

Indigenous Beliefs and Healing In Historical Perspective: Experiences from Buha and Unyamwezi, Western Tanzania

Salvatory Stephen Nyanto

Ph.D. (History) Candidate, University of Iowa
Assistant Lecturer, University of Dar es Salaam
P. O. Box 35031, Dar es Salaam-Tanzania

Abstract

This paper explores the relations between indigenous beliefs and healing practices in Buha and Unyamwezi in Western Tanzania. I argue that beliefs and healing practices are an integral part of the lives of the people in the region. Diseases, misfortunes and religion have coexisted for many centuries and affect people's lives and their relationship with the deities. Medicine--whether physical, spiritual, or psychological--is used to cure, heal, protect, and to ensure people's health and wellbeing of the society. Ideas on healing and religiosity are neither homogenous nor static. They vary from one place to another and change in response to changing social contexts. This paper relies on oral interviews and secondary sources to provide an account of healing and religiosity in Buha and Unyamwezi and the changes that have shaped the two from the late pre-colonial period to the present. It employs a comparative approach to examine healing and religiosity on societies that have different social and cultural backgrounds.

Keywords: Indigenous Beliefs, Healing, Buha, Unyamwezi

1. Introduction

In traditional cosmologies, healing and religiosity are an integral part of people's lives. The centrality of healing and religiosity has existed since time immemorial to solve issues arising from the intersections of members of families, clans and societies. For instance, between the first, second and third millennium BCE, ritual healing was used by kings of Babylon to reconcile with the divine sphere in order to maintain political stability.¹ Likewise, medicine among the Polynesians of Hawaii was inseparable from religion, as treatment of the sick depended on the worship of gods.² Again, among the Native Americans, Indians and Chinese, health and healing could not be separated from their traditional religions.³ In all these societies, health, healing and religion have coexisted for many centuries and have in due course affected people's lives and their relationship with the deities.

In African societies, diseases and misfortunes are considered to be religious experiences. Hence, religious rituals and medicine are used to cure, heal, protect, and to ensure people's health.⁴ Among the Shambaa of north-eastern Tanzania, Kilindi chiefs and local practitioners held rain medicine rituals to maintain political stability and the wellbeing of the people.⁵ In all societies, medicine men played an important role in healing.

¹Claus Ambos, "Ritual Healing and the Investiture of the Babylonian King" Edited by William S. Sax, Johannes Quack and Jan Weinholt, *The Problem of Ritual Efficacy* (Oxford: Oxford University Press, 2010), pp.22-28.

²Katherine Luomala, "Polynesian Religious Foundations of Hawaiian Concepts Regarding Wellness and Illness" Edited by Lawrence E. Sullivan, *Healing and Restoring: Health and Medicine in the World's Religious Traditions* (New York: Macmillan Publishing Company and London: Collier Macmillan Publishers, 1989), p.288.

³Ake Hultkrantz, "Health, Religion and Medicine in Native North American Traditions" Edited by Lawrence E. Sullivan, *Healing and Restoring*, pp.327-329, Vicanne Adams, "The Production of Self and Body in Sherpa-Tibetan Society" Edited by Mark Nichter, *Anthropological Approaches to the Study of Ethnomedicine* (Tucson: University of Arizona, 1992), Joseph M. Kitagawa, "Buddhist Medical History" Edited by Lawrence E. Sullivan, *Healing and Restoring*, and Kenneth Zysk, *Asceticism and Healing in Ancient India: Medicine in the Buddhist Monastery* (Delhi: Oxford University Press, 1991).

⁴ John S.Mbiti, *Introduction to African Religion* (London: Heinemann International, 1991) pp.152, 169.

⁵ Steven Feierman, *Peasant Intellectuals: Anthropology and History in Tanzania* (Madison: The University of Wisconsin Press, 1990), pp.69-119.

They applied both physical and spiritual or psychological treatment in healing. Consequently, as John Mbiti asserts, medicine men and women became both “doctors” and “pastors” to the sick.⁶ In Buha and Unyamwezi in Western Tanzania, as in other societies, healing has for many decades been central to the religious traditions of the people (Baha, Nyamwezi and the Kimbu). What medicine-men and women did, and some still do when they heal the sick, is inseparable from their religious beliefs and practices.

The relationship between religion and healing stems from the fact that religion was involved in every department of life in Buha and Unyamwezi cosmologies. The coexistence between the two continues to this day in spite of the dominance of the Christian and Islamic faiths. This paper is therefore premised on the argument that religion was an integral part of the healing process in Buha and Unyamwezi. Ideas about healing and religiosity were neither homogenous nor static. But they varied from one place to another and changed in response to changing social contexts. To complement the central argument, this paper will provide an account of healing and religiosity in Buha and Unyamwezi and the changes that have shaped the two from the late pre-colonial period to present. The study will employ a comparative approach to examine healing and religiosity in societies that have different social and cultural backgrounds.

Buha as used in this paper refers to a region in the present day Kigoma administrative region. The region was comprised of six centralized kingdoms in both pre-colonial and the colonial periods: Nkalinzi, Heru, Bushingo, Nkanda-Luguru, Buyungu and Muhambwe.⁷ The majority of the inhabitants of Buha were and are still the Ha/Baha ethnic group. Buha lies approximately between 3° and 5° S latitude and 29° and 30° 40' E longitude (to the north of the central railway line) within the administrative district of Kigoma (now Uvinza district). It is bordered to the north by Burundi and the Kagera region; to the east by the Shinyanga and Tabora regions; to the south by the Rukwa region; and to the west by Lake Tanganyika that forms a border with Democratic Republic of Congo. Kigoma has six administrative districts namely, Buhigwe, Manyovu, Kakonko, Kibondo, Kasulu and Uvinza. According to the 2012 national census, the region had a population of 2, 127,930.⁸ Unyamwezi refers to a region in the current Tabora administrative region. The Nyamwezi are the dominant ethnic group. Other smaller ethnic groups inhabiting Unyamwezi territory include the Konongo, the Sumbwa and the Kimbu.⁹ The region is bordered by Shinyanga; to the west, by Kigoma; to the south, by the Rukwa and Mbeya regions; and to the east, by Singida region. It is administratively divided into seven districts: Igunga, Kaliua, Nzega, Sikonge, Tabora Municipal, Urambo and Uyui. According to the 2012 national census, Tabora region had a total population of 2,291,623.¹⁰ Together, Buha and Unyamwezi form what is known as Western Tanzania.

Issues of religion and healing in Tanzania have received a considerable attention from social anthropologists, theologians and a handful of historians. With exception of Steven Feierman, existing studies have paid a considerable attention to the practice of western medicine within missionary hospitals, and faith healing ministries.¹¹ So far, the field has not attracted the attention of Tanzanian historians.

⁶ John S. Mbiti, *African Religions and Philosophy* (Garden City, New York: Anchor Books Doubleday & Company, Inc, 1970), p.221.

⁷ Johan Herman Scherer, “The Ha of Tanganyika”, *Anthropos*, Bd.54, H.5/6 (1959), p.844.

⁸ Captain C. H. B. Grant, “Uha in Tanganyika Territory”, *The Geographical Journal*, 66, 5 (1925), p. 411, United Republic of Tanzania (URT), *2012 Population and Housing Census: Population Distribution by Administrative Areas* (Dar es Salaam: National Bureau of Statistics, Ministry of Finance, March, 2013), p. 2.

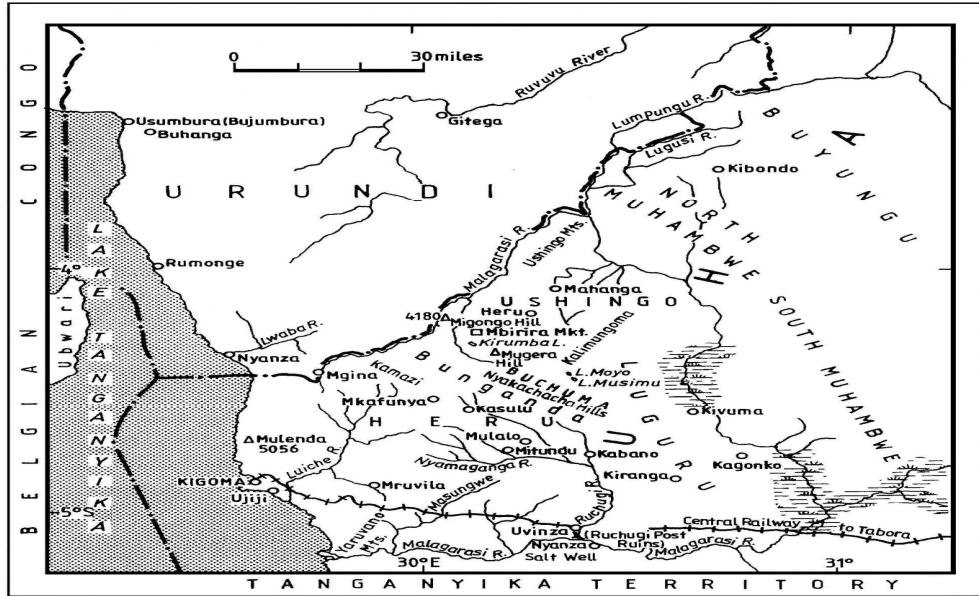
⁹ Raphael G. Abrahams, *The Peoples of Greater Unyamwezi, Tanzania (Nyamwezi, Sukuma, Sumbwa, Kimbu, Konongo)* (London: International African Institute, 1967), pp. 12-13, *The Political Organisation of Unyamwezi* (Cambridge: Cambridge University Press, 1967), pp. 1-8, Aylward Shorter, *Chiefship in Western Tanzania: A Political History of the Kimbu* (Oxford: Clarendon Press, 1972), pp.2-3.

¹⁰ United Republic of Tanzania (URT), *2012 Population and Housing Census*, p. 2.

¹¹ Steven, Feierman, *Peasant Intellectuals*, pp. 69-119, “Explanation of Uncertainty in the Medical World of Ghaambo” *Bulletin of the History of Medicine*, Volume 74, 2 (Summer 2000), p.317-344, Terence O. Ranger, “Godly Medicine: The Ambiguities of Medical Mission in south eastern Tanzania, 1900-1945” Edited by Steven Feierman and Johan M. Janzen, *The Social Basis of Health and Healing in Africa* (Berkeley, Los Angeles and Oxford: University of California Press, 1992). Other studies that have concentrated on faith healing ministries include, Paivi Hasu, “Prosperity Gospels and Enchanted Worldviews: Two Responses to Socio-economic transformation in Tanzanian Pentecostal Christianity” Edited by Dena Freeman, *Pentecostalism and Development: Churches, NGOs and Social Change in Africa* (Palgrave: Macmillan, 2012), Katharina Wilkens, *Holy Water and Evil Spirits: Religious healing in East Africa* (Munster: Lit Verlag, 2011), Hansjoerg Dilger, “Healing the wounds of modernity: Salvation, community and care in a neo-Pentecostal Church in Dar es

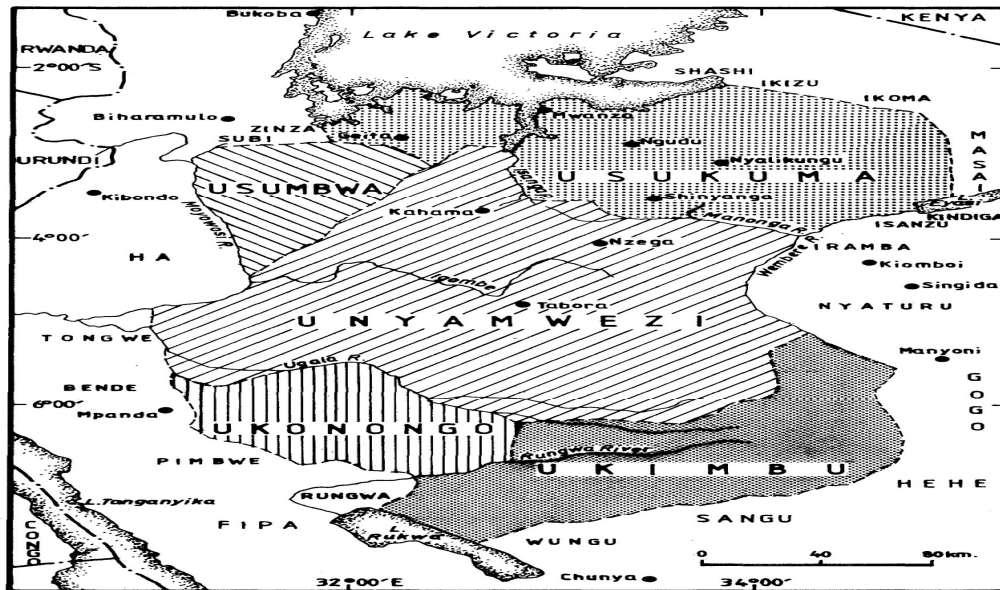
As a result, we know less about religion and healing in the religious traditions of the people, including those of the Buha and Unyamwezi. This study departs from the existing trend of scholarly inquiry into religion and healing. It seeks to examine the centrality of healing in the religious traditions of the people of Western Tanzania before and after they were integrated into Christian and Islamic faiths.

Map 1: Buha in Western Tanzania (parts of Kigoma Region)



Source: Captain C. H. B. Grant, “Uha in Tanganyika Territory”, *The Geographical Journal*, 66, 5 (1925)

Map 2: Unyamwezi in Western Tanzania (Tabora Region)



Source: Modified from Raphael G. Abrahams, *The Peoples of Greater Unyamwezi, Tanzania*, 1967

Salaam, Tanzania”, *Journal of Religion in Africa*, 37 (2007), Christopher Comoro and John Sivalon, “The Marian Faith Healing Ministry: An expression of popular Catholicism in Tanzania” Edited by Thomas Spear and Isaria Kimambo, *East African Expressions of Christianity* (Dar es Salaam: MkukinaNyota Publishers, Oxford: James Currey and Athens: Ohio University Press, 1999), Evaristi Magoti, “Charismatic Movements in the Context of Inculturation” Edited by Mika Vahakangas and Andrew Kyomo, *Charismatic Renewal in Africa: A Challenge for African Christianity* (Nairobi: Acton Publishers, 2003) and Paivi Hasu, “World Bank and Heavenly Bank in Poverty and Prosperity: The Case of Tanzania Faith Gospel”, *Review of African Political Economy*, 33, 110 (2006).

3. Disease Causation in Buha and Unyamwezi Cosmologies

Like other African societies, the Baha and Nyamwezi understood there to be three causes of diseases. The first category included diseases caused by the supreme deity. John Janzen and Steven Feierman call such diseases, diseases of God. Diseases of God happened naturally in the society with no spiritual or social cause.¹² In Buha, some diseases of God were marked as curses against the people. This was amplified in the common local proverb that the Baha used God's name to curse others saying, *ulagahumigwan' imana* 'God will curse you'.¹³ A similar case occurs in Unyamwezi where God (*Liwelelo, Linyangasa, Weyi, Limietc*) was associated with certain diseases. Therefore, it was common to say, when a person died, that *Lyatulekabuyaga* or *Lyatulekamugiti* (God has left us in the uncertain; He has left us in the darkness).¹⁴

The second categories of diseases were caused by human beings. Such diseases are commonly referred to by scholars as diseases of persons [human beings].¹⁵ They were, by and large, caused by hostile relationships between people in societies. Under such circumstances, the Baha and Nyamwezi used magic, sorcery or witchcraft (*mulogi, pl. balogi, umulozipl. abalozi*) to inflict certain diseases on other people.¹⁶ Sometimes, regular conflicts between parents would affect children who were still born. The effect of such conflicts could later affect children by giving them several diseases.¹⁷ In both Buha and Unyamwezi, parents were also said to have the power to curse their children. However, some curses were attributable to one's parents while others were attributable to one's genealogical line. Curses of the second category were said to be inherited from one generation to another.¹⁸ Children, in this category of disease causation, suffered from diseases that were marked by the people as a consequence of parents' or clan's curses.

Finally, diseases were caused by nature and ancestral spirits. Although the Baha and Nyamwezi believed in the existence of the supreme deity, they still held the view that there were other forces that were situated in between the people and the supreme deity. These forces included ancestral spirits (*mizimu*) and nature spirits (*ikisigopl.bisigo*).¹⁹ Spirits were of two categories: evil and good spirits. Evil spirits were always capricious, causing misfortunes and diseases following the breaching of societal norms. Good spirits, on the other hand, enabled the possessed--after the performing of appropriate rituals --to become traditional healers (*nyamulagura, umulaguzi, mganga, umfumu*) of diseases and misfortunes.²⁰ Generally, as David Westerlund asserts, ancestral spirits were regarded as agents of diseases, infertility and misfortunes in the society. But they could not cause death unless they were assisted by witches and sorcerers.²¹

4. Healing in the Religious Traditions of Buha and Unyamwezi

4.1 Spirit Possession and Ritual Healing

Spirit possession in Buha and Unyamwezi occurred in two situations. First, it could be meant to warn the living members of clan of the impending danger (*kimweshi*) when certain taboos were not observed. Secondly, it empowered the possessed by conferring healing abilities, which is the focus of this paper. Spirit possession was a common phenomenon throughout the nineteenth and twentieth centuries. The common forms of spirit possession included *bachwezi, bamigabo, migabo* or *migawo* secret societies in Ukimbu, and *imizimu, ibiyaga* and *ibichwezi* in Buha.

¹² John Janzen, *The Quest for Therapy in Lower Zaire* (Berkeley, Los Angeles and London: University of California Press, 1978), pp.67-69, Steven Feierman, "Explanation and Uncertainty", p. 320.

¹³ Rosemary Guillebaud, "The Idea of God in Ruanda-Urundi" Edited by E.W.Smith, *African Ideas of God: A Symposium* (London: Edinburgh House Press, 1961), p.189.

¹⁴ Fridolin Bosch, *Les Banyamwezi, people de'Afriqueorientale* (Munster: 1930)

¹⁵ See for instance John Janzen, *The Quest of Therapy*, p.68 and Steven Feierman, "Explanation and Uncertainty", p.320.

¹⁶ See for instance, John Mbiti, *Introduction*, p.169.

¹⁷ For a detailed account of such instances, see John Janzen, *The Quest for Therapy*, pp.75-80.

¹⁸ A.B.T Byaruhanga-Akiiki, "The Theology of Medicine" *Journal of African Religion and Philosophy*, Vol.2, No.1 (1991), p.26.

¹⁹ Salvatory S.Nyanto, "Coping with the Challenges of Evangelisation in a Plural Setting: Experiences of the White Fathers in Buha and Unyamwezi 1878-1978" (University of Dar es Salaam: Unpublished MA Dissertation, 2012), p.35.

²⁰ Salvatory S.Nyanto, "Coping with the challenges", p. 38, Osadolor Imasongbe, *African Traditional Religion* (Ibadan: University Press Limited, 1985), p.38.

²¹ David Westerlund, *African Indigenous Religions and Disease Causation: From Spiritual Beings to Living Humans* (Leiden and Boston: Brill, 2006), p.91.

The impacts of these spirits became noticeable when misfortunes, diseases and other serious problems struck the living members of families, clans or the entire society.²²In most cases, the possessed shivered, spoke in different tongues with obscene language, tortured his/her body, or harmed other people, sometimes the spirit dragged the possessed into the forest.²³

In Buha, living members of the family consulted diviners (*nyamulagurapl.bhanyamulagura* or *umufumu*) when they were struck by diseases or misfortunes. Diviners explained about the reported diseases as a warning (*intezi*) from their departed ancestors. To appease them, and to avert the impending dangers, members of the family were advised to make offerings (*uguhezagira*) to ancestors.²⁴Shrines for the supreme deity (*mumana*) and ancestral shrines (*indaro*, pl. *amadaro*) were common among the families in Buha and were always built near sacred trees (*imivumu*). Heads of homesteads were duty bound to make offering to the ancestral spirits and to the supreme deity on behalf of all members of the households.²⁵

In both Buha and Unyamwezi, ritual healing depended on diviner's advice. In Buha, it was preceded by identifying the origin of the spirit. The diviner (*umulaguzi*, *nyamulaguraumupfumu* or *mfumu* in Unyamwezi) had to know whether the spirit originated from Burundi, Rwanda, Muhambwe or Kongo (*ikiyagach'ikirundikazi*, *ch'imuhambwe*, *ikinyarwandauch'kongo*).²⁶ Finally, the father of the ailing person took a pot with honey (*igichuroch'ubhuki*), mixed with millet, and poured a libation to the troubling *kiyaga*. Other offerings included food, and objects that were used by ancestor(s) such as bracelets, or a small piece of backcloth (*impuzu*).²⁷ However, in Unyamwezi, offerings to the ancestral spirits, ranged from libations of sorghum flour mixed with water (*lwanga*), beer or porridge to blood sacrifice of a sheep or goat. The choice of ritual offerings depended on what the sacrificer could afford. But, as whole, cattle sacrifices were made to appease royal ancestors in times of epidemic, drought, and famine.²⁸

4.2 The 'Therapy Group' and Secret Healing Societies in Buha and Unyamwezi

The process of diagnosis and healing in many societies is not the concern of a patient. Rather, it is a duty of the entire family, clan and the whole society. As Ake Hultkrantz argues, relatives of the patient become anxious to find a medical specialist who is versed in the knowledge of healing.²⁹ Likewise, Steven Feierman shows how the *jamaa* (kinsmen) in the medical world of Ghaambo in north eastern Tanzania move from one healer to another in the quest for alternative healing methods. In such an endeavour, they question the abilities of some healers and their medicine as well.³⁰ John Janzen calls such a diagnosis processes as a 'social process.'³¹ Driven by their own decisions, relatives of patients move them from hospital care, to traditional specialists or prophets. In so doing, they establish different categories of therapeutic choices in the quest for healing.³² This is what is meant by John Janzen's term, the "therapy group."

²²Ibid, p. 890, Aylward Shorter, *East African Societies* (London: Routledge and Kegan Paul, 1974), pp.97-100, "The Migawo: Peripheral Spirit Possession and Christian Prejudice", *Anthropos*, 65 (1970), pp.117-118, Hans Cory, "The Buswezi", *American Anthropologist*, 57, 5 (1955), p.925, N. D. Yongolo, *MaishanaDesturi*, pp.25-26 and John Iliffe, *A Modern History of Tanganyika* (Cambridge: Cambridge University Press, 1979), p. 31.

²³John S.Mbiti, *African Religions*, p.82, *Concepts of God in Africa*, (New York: Praeger Publishers) p.266, Interview Kamego Yagaza, Heru village, 04/02/2012, Paul Bahinda, Kigoma, 01/02/2012, Michael Katabi, Uhemeli (Ndala) village, 09.12/2011, Paulina Mihayo, Uhemeli (Ndala) village, 09/12/2011.

²⁴ Johan H. Scherer, *The Ha*, p.889.

²⁵ Ibid.

²⁶Ibid, Interview, Kamego Yagaza, Nsengimana Nsago, Heru Juu village and Selemani Kichozi, Heru Juu village, 04/02/2012.

²⁷Pamphili Chubwa, "Tambiko la Familia Linalotaja Asili Nneza Waha: Uguhezagira" Edited by J.M.Kihiyo, L.Ndimubansi and V.G.Nkondokaya, *Milana Utamaduni wa Jamii ya Wahana Hatimaya Kimaendeleo ya Kiuchumina Kijamii ya Mkoa Katika Karneya Ishirini na Moja* (Dar es Salaam: Makumbusho ya Taifa la Tanzania, 2003), pp.7-8, *Waha: Historia Maendeleo* (Kipalapala: Tanganyika Mission Press, 2005), pp.1-9, Johan H. Scherer, *The Ha*, p.890.

²⁸ Raphael G.Abrahams, *The Nyamwezi Today: A Tanzanian People in the 1970s*, Cambridge and London: Cambridge University Press, 1981), pp.20-21.

²⁹ Ake Hultkrantz, *Health, Religion and Medicine*, p.340.

³⁰ Steven Feierman, *Explanation and Uncertainty*, p.330.

³¹ John M. Janzen, *The Quest for Therapy*, p.129.

³²Ibid, p.150, *The Social Fabric of Health: An Introduction to Medical Anthropology* (New York: McGraw-Hill Companies, 2002), pp.219-220.

In Buha and Unyamwezi, the therapy group dominated the whole process of diagnosis, therapeutic choices and consequent healing throughout the nineteenth and twentieth century's. As we have seen in other societies, patients had no decision to choose a kind of treatment. It was his/her relatives who held, to borrow John Janzen's words, "general social rights over the sufferers."³³ Very often, it was relatives and not patients, who engaged in the whole process of diagnosis, healing, and negotiations with local healers. This explains why healing among the Baha and Nyamwezi involved constant movements from one healer and fortune teller (*nyamuragura* and *umfumu*) to another. In due course, they could challenge the efficacy of medicines and the efficiency of the healers themselves. The process of searching for alternative healing lasted until relatives satisfied themselves of the efficiency of the medicine in healing their patients.

Secret societies were among the social institutions that played an important role in the healing processes of Buha and Unyamwezi. In Buha, secret societies were called *imbandwapl. abandwa, ibishegu* or *ibichwezi*. These were men and women who took an active part in the ritual ceremonies of healing.³⁴ They were called *ibhishegu* in the south and western Buha while in northern parts they were referred to as *bachwezi* or *ibhichwezi*.³⁵ *Ibishegu* or *ibichwezi* were branches of Buswezi religious secret societies that originated from Bunyoro-Kitara and spread among the Baha, Sumbwa, and Nyamwezi in western Tanzania.³⁶ Members were prohibited to speak about their final ceremonies, which took place in the bush, away from the presence of those who did not belong to the society. Neither were they allowed to disclose names of members (*amazinay'ibhiyaga* or *amazinay'ibhishegu*) to people who were not initiated.³⁷

In Unyamwezi, *buswezi* and *migabo, migawo* secret societies dominated healing ceremonies too. *Buswezi* was active among the Nyamwezi while *migabo* dominated healing among the Kimbu. It was a practice in the nineteenth and twentieth century's for the Buswezi secret society to move to different areas in Unyamwezi to organize initiations for needy patients and non-patients.³⁸ As in Buha, their secrets on healing could not be disclosed to strangers, and in any case, the presence of strangers could lead to poor performance, misfortunes, death, and failure of medicine.³⁹ To avoid unwarranted ill will, strangers and those who were not initiated into the religious community were not allowed to take part in the performance, ritual and healing processes.

As far as healing is concerned, *buswezi/uswezi* secret societies dominated the Nyamwezi therapeutic practices in the nineteenth and twentieth century's. When a person fell sick, his relatives consulted a diviner (*mfumu*) who would tell them to invite *waswezi* to perform healing. When the *waswezi* came they made up heaps of fire, and then started to deal with their medicine and brought out the sick person outside. Henceforth, they would start beating their drums and play some of their instruments near the sick person. Then the noise of the drums and the people affected the sick person and subsequently his/her body would start trembling and at the same time fall down. As the patient fell down, every one of them became happy saying "Our medicine has got him now."⁴⁰

The falling of the patient was followed by a three day drumming dance. On the fourth day they went into the bush (*kagondo*) to show the medicine to the sick person. There in the bush they could do any illicit doings such as having sexual intercourse, and these bad-things were called secret. No one was allowed to disclose these secrets to the members who had not yet been initiated into the society. They also ordered the sick person not to reveal these secrets to anybody, claiming that he/she would die. Such acts in the bush remained the most secret for them.⁴¹ However, there is no relationship between these ill doings and healing. The rationale for these practices in healing systems remains unclear.

In southern Unyamwezi, among the Kimbu, *migawo* or *migabo* secret society dominated the nineteenth and twentieth century's healing systems.

³³ John M. Janzen, *The Social Fabric*, p.219.

³⁴ Johan H. Scherer, *The Ha*, p.891.

³⁵ Johan H. Scherer, *The Ha*, p. 891-892.

³⁶ Hans Cory, "Buswezi", p. 924, Cecilia Pennacini, "Religious mobility and body language in Kubandwa possession cults" *Journal of Eastern African Studies*, Vol 3, 2 (2009), pp.333-334.

³⁷ *Ibid.*

³⁸ Hans Cory, *Buswezi*, p.925.

³⁹ *Ibid.*, p.925-926.

⁴⁰ *Tanzania National Archives (TNA) Tabora Regional Book (Western Province)*, (1929), p.5.

⁴¹ *Ibid.*

After a thorough diagnosis of the disease through divination, medicinal leaves and roots were collected and were all cooked in a pot (*kivila*).⁴² The patient was ordered to strip off all the clothes with exception of a pair of shorts or a covering for the loins. The patient was given some medicine to take internally while some incisions were also made on the patient's chest into which the medicine was scrubbed. When the medicine in the pot (*kivila*) was ready, the sufferer was placed on a stool covered by a heavy cloth, and was told to inhale the steam of the medicine.⁴³ Like *buswezi* and *ibhishegu* in Buha and Unyamwezi, members are not allowed to disclose their secrets of initiation (*nyanjangwa*) to outsiders.⁴⁴

5. Between African Religions and Christianity: Continuities and Change in Buha and Unyamwezi

5:1 Christianization versus African Religious Practices

Christianity was introduced in Buha and Unyamwezi from the 1870s onwards. Among the earliest missionaries to spread the Christian faith were the French Catholic White Fathers (1878 and 1879), the London Missionary Society (1880s), Moravian Missionaries (1898), the British Missionary Society (1920s), and the Swedish Free Mission and the Salvation Army (1930s). By the mid-1930s, many areas in Western Tanzania had already been integrated into Christian faiths.⁴⁵ Missionaries built schools and mission hospitals in areas where they opened mission stations in Buha and Unyamwezi. The establishment of mission hospitals and dispensaries exposed the Baha, Nyamwezi and Kimbutu western medicine that they had not been accustomed to.

Following the introduction of Christian faith, some chiefs and their subjects resisted while others joined the new faith, but did not totally abandon the old religious practices. The majority found themselves holding the two faiths [Christianity and ATRs]. During the early years of evangelization at Ushirombo, Mwami Ndega of the territory of Usumbwa, together with the elders of the society, did not abandon the religion of their forefathers despite the fact that he was among the students in the Catholic catechism class.⁴⁶ In 1894, he was baptised and gradually started convincing both his subjects and his neighbouring rulers to join Christianity. However, as he died in 1895, his subjects abandoned the new faith and reverted to the religion of the forefathers. He was succeeded by Robert Munesi who died shortly before he was made king. The divergent tendency was made worse by his successor, Alexander Kahunira who was a believer of traditional religions and rekindled what the missionaries called 'paganism' in the kingdom.⁴⁷

The convergent-divergent tendencies were exacerbated by Robert Munesi's successor, Emmanuel Mupipi who was crowned in the church at Ushirombo with the name Makaka. Notwithstanding being baptized and being crowned in the church, the king became a strong supporter of the traditional religions to the extent that he turned into an enemy, deceitful and a spy on the activities of missionaries.⁴⁸ His attitude drew a number of the Basumbwa who abandoned Christianity and went back to their old practices. The declining number of Christians prompted Monsign or Gerboin to concentrate on building up a village of freed slaves with an assumption that they would in due course become agents for propagating the Christian faith in Usumbwa and beyond.⁴⁹

Buha presented a similar case. The chiefs (*abami*) upheld two religious faiths (Christianity and African religions) simultaneously. Although some chiefs converted into Christianity, they could still retain the religious practices of their ancestors. Prominent among them included *mwami* Gwassa of Heru kingdom. He was baptised by Msgr. Birraux at Ujiji on the 15th April 1933 before a big crowd from Buha that attended the ceremony.

⁴²Alyward Shorter, "The Migawo: Peripheral Spirit Possession and Christian Prejudice" *Anthropos*, Bd. 65, H.1. /2 (1970), pp.112-113.

⁴³ Ibid.

⁴⁴ Ibid, p.114.

⁴⁵Salvatory S. Nyanto, "Coping", pp.51-88, Angetile Yesaya Musomba, *The Moravian Church*, p.83, John Taylor Hamilton and Kenneth G. Hamilton, *History of the Moravian Church; the Renewed Unitas Fratrum, 1722-1957* (Winston-Salem: Interprovincial Board of Christian Education, Moravian Church of America, 1983), p.609, Francis P. Nolan, *Mission to the Great Lakes: The White Fathers in Western Tanzania 1878-1978* (Kipalapala: Tanganyika Mission Press, 1978), p.17, John G. Merrit, Ed. (2006). *Historical Dictionary of the Salvation Army* (Maryland: Scarecrow Press, 2006), p.577.

⁴⁶ Francis P. Nolan, *Mission to the Great Lakes: The White Fathers in Western Tanzania, 1878-1978* (Tabora: TMP Book Department, 1978), p.28.

⁴⁷(Anonymous) *Grand Lacs: General Journal of African Missions*, Nos. 8 & 9 (1939), pp. 34-35.

⁴⁸Ibid, pp. 39-40.

⁴⁹Francis P. Nolan, *Mission to the Great Lakes*, p.28.

Msgr. Birraux was convinced by *mwami* Gwassa, who from the beginning showed some signs of becoming committed Christian. Commenting about the *mwami*, Msgr. Birraux had this to say:

It is unusual to hear an important chief in a country where everything, including all the women, were considered his personal property, say such things as ‘Before governing others, one must govern oneself’ and still more unusual if he puts such statements into practice but Joseph Gwassa was such a man.⁵⁰

However, contrary to the bishop’s expectation, *mwami* Gwassa did not abandon his old ways. The sacred groves-*amaholezo*, the royal drums and the royal symbols (the royal spear-*mkalinga* and the royal python-*insato*) still earned a substantial reputation in his kingdom. The annual thanksgiving ceremony, *Indolegwazi Mpeshe* was retained, upon which the *tambiko la mwami* (ritual for the king) was held at *vugizo (kukibhilachi’ vugizo)* for three consecutive days of great ceremony. This still attracted the majority Baha, notwithstanding the imposition of Christian teachings in the kingdom. The two [sacred groves and the ceremony] were seen by the missionaries as stumbling blocks towards the Christianization of the *Banyaheru*, as many Christians including their chief (*mwami*) could at some point be found among the practitioners of African religions.⁵¹

The convergent-divergent tendencies also characterized the day to day undertakings of the ordinary Baha and Nyamwezi in the region. Although the White Fathers made countless efforts to attract the people into the new faith, it became difficult for the majority to abandon the religion of their forefathers wholeheartedly. Fr. Dromaux made several attempts using material objects to attract the local people to join Christianity. His attempt to evangelize and attract Africans into the new faith was recorded as follows:

I go there accompanied by some native children and carrying a little salt or tobacco. On my arrival, I invite the people to come together to hear the words of God and I sit down on the shade of a tree or hut Sometimes I speak, sometimes I ask questions. One of the children I have brought distributes salt, another tobacco. The rest of the salt is distributed at the end of the lesson.⁵²

Nevertheless, the results were frustrating, as Fr. Dromaux concluded, “I find more disappointments than conversion.” From Dromaux’s conclusion, it can further be noted that African religions were still strong despite his efforts to attract the people into the new faith. The people could assemble, hear and get what Fr. Dromaux offered and thereafter went back to their roots. Dromaux’s experience bears resemblance to what was happening in Buha and Unyamwezi. At Ndala, members of the *uswezi* secret society regarded missionaries as a threat to their religious practices. Some of the local Nyamwezi found it difficult to abandon *uswezi* due to the strong influence it had on their lives. Even those who had been converted into Christianity could sometimes be found among the initiated members of the society as Michael Katabi emphasized:

Kulikuwana baadhiya Wanyam weziwalio kuwawa mekwisha batizwawa owalikuwawana changanya Ukristona Usweziwao. Hiindiyoiliyo kuwa changam otokubwasanakwa ma-White Fathers. Walikuwawana fanya ibadazaohuku Ukristonahuko Uswezi. Hadileokuna Wakrist oambaowana changan yaingawawana fanya kwauficho.⁵³ [There are some Nyamwezi who had already been baptized; they were practicing both Uswezi and Christianity. Up until now, there are Christians who secretly practice Uswezi]. My own translation.

A related case was Buha, where elders, chiefs (*abami*) and guardians of land and land spirits (*bateko*) in the Heru Kingdom were not absorbed by the influence of Christianity. They had a similar conception that the missionaries came to ruin the society whose foundation was deeply rooted in the traditional practices.⁵⁴ The message of the new religion did not appear to sink into people’s minds and hence it was easier said than done for the majority to abandon the old practices and turn their attention to Christianity. This, in consequence, prompted the people to go to the sacred groves (*ukwihezagira*) and to the church as well. When they were prohibited from dual religious faiths, the reply was repentant, “*None tusengei kimanachom wikanis aimizimuyabaso kuruntiyiza kutugora? njanyetusengevyose.*” (If we worship God in church, shall we not be troubled by the spirits of the forefathers? We would rather worship the two).⁵⁵

5:2 Allopathic Medicines versus Traditional Healing Systems

⁵⁰Ibid, p.54.

⁵¹Interview, MzeeKamegoYagaza, MzeeSelemaniKichuzi, Bibi NsengimanaNsago, HeruJuu Village 04/02/2012.

⁵²Francis P. Nolan, p.18.

⁵³Interview, Michael Katabi, Ndala (Uhemeli), 09/12/2011.

⁵⁴Interview KamegoYagaza, and NsengimanaNsago, Heru village, 04/02/2012.

⁵⁵KamegoYagaza.

The introduction of mission hospitals and allopathic medicine in Buha and Unyamwezi were inextricably linked to the spread of Christianity. In this regard, Catholic male missionaries found it important to found, and in some cases, invite female missionary societies to provide education and health services. The female missionary societies that entirely engaged in the provision of health services in Buha and Unyamwezi included the society of the Daughters of Mary (1930), Medical Missionaries of Mary (1951), the White Sisters (1894), Bene Maria Sisters (1951), and the society of Saint Theresa to mention just a few.⁵⁶ In his study about the medical work of the Universities Mission to Central Africa (U.M.C.A) in Masasi, South-eastern Tanzania, Terence Ranger lists four claims on behalf of missionary medical work by the people from 1900 to 1945. The first was that medical work among the missionaries was seen to be a continuation of the work of Jesus Christ. Thus, it was understood by the nineteenth and twentieth-century bishops that doctors were “true successors of Christ the Healer”.⁵⁷ Secondly, western medicine had a power to penetrate into the behalf of what they termed “heathen” and Muslims who were resistant to evangelization. Thirdly, western medicine was seen to have power over what they called “heathenism”. Its power to treat African diseases was used to justify European superiority over what they claimed to be “African superstition”.⁵⁸ Finally, mission hospitals instilled in the people a sense of time, work discipline and solemnity as necessary conditions for rational thought and action.⁵⁹

Like South-eastern Tanzania, conversion of the Baha, Nyamwezi and Kimbu into Christianity meant, among other things, a rather complete reliance on western medicine. But, traditional healing systems in Buha and Unyamwezi were not totally abandoned in favour of western medicine. While allopathic medicine was very effective in treating some of the tropical diseases, it could not treat all diseases. Very often, people with afflictions caused by witchcraft, nature and ancestral spirits and other malicious forces were not taken to mission hospitals. Divinations and traditional ritual healing persisted and involved constant use of both traditional and western therapeutics.⁶⁰ Even those who had taken western medicine could at some point consult traditional healers (*umfumu*, *nyamuragura*) when a particular medicine proved ineffective in addressing the disease.

Notwithstanding the convergent-divergent tendencies of the Baha, Nyamwezi, and Kimbu, there was a considerable decline of the traditional healing systems following the spread of missional hospitals. Some of the Baha, Nyamwezi and Kimbu continued with ancestral veneration in search of disease causation and consequent healing.⁶¹ In 1897, Fr. Brard of the society of the White Fathers provided accounts of the common ancestral veneration in Usukuma.⁶² However, in the 1950s, as Ralph E. Tanner asserts, regular propitiations of ancestors were no longer common. Ritual sacrifices could only be made in time of distress and illness. Both educated and uneducated members in Sukumaland despised traditional practice as useless.⁶³ Commenting on the declining ancestral veneration in Usukuma, Ralph Tanner made the following observation in 1967.

⁵⁶ Sr. Eustella Josephat, *Constitution of the Congregation of Daughters of Mary-Tabora* (Kipalapala: Tanganyika Mission Press, 2011), p.3, George Leisner and Ludovick Matanwa, *Miaka Miamoja Jimboni Kigoma 1879-1979* (Kipalapala: Tanganyika Mission Press, 1980), p. 67, Nolan Margaret Mary, *Medical Missionaries of Mary: Covering the First Twenty-Five Years of the Medical Missionaries of Mary, 1937-1962* (Dublin: Three Candles Press, 1962), p. 119, Hugo Hinfelaar, *Footsteps on the Sands of Time: A Life of Bishop Jan van Sambeek* (Rome: Society of Missionaries of Africa, History Series, No.8, 2007), p. 75, *Annual Reports of Provincial Commissioners: Western Province* (1951), p. 190.

⁵⁷ Terence O. Ranger, “Godly Medicine: The Ambiguities of Medical Mission in Southeastern Tanzania, 1900-1945” Edited by Steven Feierman and John M. Janzen, *The Social Basis of Health and Healing in Africa* (Berkeley, Los Angeles and Oxford: University of California Press, 1992), p.257.

⁵⁸ *Ibid*, p. 258.

⁵⁹ *Ibid*, p. 259.

⁶⁰ See for instance Terence O. Ranger, *Godly Medicine*, pp.263-270.

⁶¹ Interview, Michael Katabi, Uhemeli (Ndala), 09/12/2011, Muhoza Kapera, Rusesa village 04/01/2012 and Kamego Yagaza, Heruu Juu village 04/02/2012.

⁶² David Westerlund, *African Indigenous*, p. 91.

⁶³ Ralph E.S. Tanner, *Transition in African Beliefs: Traditional Religion and Christian Change; a Study in Sukumaland, Tanzania, East Africa* (Maryknoll, New York: Maryknoll Publications, 1967), p.24.

Now both educated and uneducated persons neglect their ancestors for years and consider propitiating them only when they are in trouble, so that the cult of the ancestors has changed from maintaining their goodwill by regular rites as was done in the past to the present intermittent recognition of their powers to harm and the ceremonies, individual rather than collective, necessary to recover their goodwill. It is their interference rather than their benevolence that occasions the ritual.⁶⁴

From the above excerpt, we learn that the influence of western education and medical services including missionary health services had far reaching impacts on traditional healing systems. Further changes became noticeable between the 1970s and 2000s following the spread of Pentecostalism and faith healing ministries.⁶⁵ Today, notwithstanding the persistent Christian medical services and faith healing ministries, the Baha, Nyamwezi and Kimbu have not abandoned their healing systems. Even committed Christians and Muslims at some point still venerate ancestors in the quest for healing and other needs, as Juma Nusura and Kassim Mbingo indicated in the following testimony.

Haya matatizo yalikuwepo na yapo mpaka sasa, siyo siri. Kwa maana sisi katika kutembea kwetu na katika kuishi hapa Ujiji tumeweza kujichanganya na makundi kama hayo. Unaweza ukajikuta kama mimi ni Mkristu au Muislam lakini kwenye masuala ya jadi ninahudhuria. Sasa huyu mtu anayemwamini Mungu inakuwaje unamkuta katika kundi la kuchimbua mizimu? Lakini kama mtoto wa mjini ukipata bahati ya kuingia maeneo hayo unawakuta wale waumini mnaoabudu pamoja.⁶⁶

This cited excerpt can loosely be translated as “Such problems were there and still exist, it is no longer secret. As we have lived here in the town [Ujiji], we have been interacting with such groups of people. You may find, for instance, a Christian or Muslim attending rituals. If such a person believes in God, why then should he/she venerate ancestors? But as a town dweller, if you have chance to attend rituals you meet committed Christians and Muslims there” This quotation shows how it has become difficult for both Muslims and Christians to totally abandon religious practices of their forefathers. It becomes difficult in African settings to unravel traditional religious practices from the day to day undertakings of the people.

6. Conclusion: the current conjuncture

It is beyond doubt, as indicated in this paper, that healing and religiosity are inseparable in the traditional cosmologies of many societies. Pieces of evidence regarding the Baha, Nyamwezi and Kimbu have demonstrated the co-existence of healing and religion spanning from the 1800s to the present. Issues of religion and healing have attracted the attention of anthropologists and the ologians working on India, China, North America, Latin America and Africa.⁶⁷ However, the field has attracted no attention of Tanzanian historians. Issues of healing and religiosity in the traditional cosmology of Tanzanian north eastern local communities have so far received the attention of an American anthropologist and historian, Steven Feierman.⁶⁸ The majority of Tanzanian and foreign anthropologists have over two decades concentrated on faith healing ministries in urban centers. As a result, we know little about healing and religiosity in the traditional cosmologies of many societies in the rural areas.

To this knowledge gap, this paper has presented healing and religiosity from a historical standpoint. It has concentrated on the Baha, Nyamwezi and Kimbu of Buha and Unyamwezi in Western Tanzania. The rationale of this approach has been to map out the vast arrays of commonalities and differences of the healing systems of societies that have variegated social and physical backgrounds. However, what appears in common is that, despite regional and social differences, the Baha, Nyamwezi and Kimbuhad shared understandings of disease causation, spirit possession, the quest for therapy, the roles of secret societies and ritual healing. In all these societies, families and relatives in consultation with diviners played an important role in healing processes and constantly moved from one place to another in the quest for effective therapy.

⁶⁴ Ibid.

⁶⁵ Josiah L. Mlahagwa, “Contending for the Faith, Spiritual Revival and the Fellowship Church in Tanzania” Edited by Thomas Spear and Isaria N. Kimambo. *East African Expressions of Christianity* (Nairobi: E.A.E.P, Athens: Ohio University Press, and London: James Currey, 1999) pp.300-301.

⁶⁶ Interview, Juma Nusura and Kassim G. Mbingo, Ujiji, 29/01/2012.

⁶⁷ See for instance, Chad M. Bauman, *Miraculous Health*, Katherine Loumara, *Polynesian Religions*, Hurlkranz, Ake Hultkrantz, *Health, Religion and Medicine*, John Janzen, *The Quest for Therapy*, and Steven Feierman, *Explanation and Uncertainty*.

⁶⁸ Steven Feierman, *Explanation and Uncertainty*, and *Peasant Intellectuals*, pp.69-119.

The introduction of Christianity from the mid-1870s onwards in Buha and Unyamwezi affected established healing systems of the people. Some practices lost favour while others continued. But, despite the imposition of the Christian faiths, some converted Africans still held dual religious practices. Such convergent-divergent tendencies of the Baha, Nyamwezi and Kimbu continue to this day, as one informant attested, “Even now I tell you on Sunday we will sing Hallelujah but on Monday they go somewhere else. There are some people there they think they will relieve their problems. So Africans still hold on to their roots even if they go to the church”⁶⁹ The growing influence of mission and government hospitals, and Pentecostal healing ministries, has not stopped the Baha, Nyamwezi and Kimbu from consulting traditional healers in times of affliction. Families and relatives still move their patients from one healer to another, from one mission or/and government hospital to another, or from one faith healing ministry to another searching for alternative therapy.

From the foregoing discussion, the following two reflections can be made. First and foremost, religion as a set of institutionalized beliefs and practices and healing were inseparable in the traditional cosmologies of the Baha, Nyamwezi and the Kimbu in Western Tanzania. In all these societies, religion became an integral part of the healing process. Secondly, the introduction of western medicine in Christian mission hospitals affected healing and religiosity of Buha and Unyamwezi cosmologies. Missionaries stressed total conversion that meant leaving aside their traditional religious practices and healing systems as well. However, as I have argued above, the people did not totally abandon their religious practices and healing systems. They kept on consulting traditional healers in spite of attending mission hospitals. Such a tendency continued throughout the colonial period and remains part of the main character of the people in Western Tanzania.

Bibliography

- Abrahams, Raphael G. (1967a). *The Peoples of Greater Unyamwezi, Tanzania (Nyamwezi, Sukuma, Sumbwa, Kimbu, Konongo)* London: International African Institute.
- _____. (1967b), *The Political Organisation of Unyamwezi*, Cambridge: Cambridge University Press.
- _____. (1981). *The Nyamwezi Today: A Tanzanian People in the 1970s*, Cambridge and London: Cambridge University Press.
- Adams, Vianne. (1992). “The Production of Self and Body in Sherpa-Tibetan Society” Edited by Mark Nichter, *Anthropological Approaches to the Study of Ethnomedicine*, Tucson: University of Arizona.
- Ambos, Claus. (2010). “Ritual Healing and the Investiture of the Babylonian King” Edited by William S. Sax, Johannes Quack and Jan Weinholt, *The Problem of Ritual Efficacy*, Oxford: Oxford University Press.
- Byaruhanga-Akiiki, A.B.T. (1991). “The Theology of Medicine” *Journal of African Religion and Philosophy*, Vol.2, No.1.
- Chubwa, Pamphili. (2003). “Tambiko la Familia Linalotaja Asili Nne za Waha: Uguhezagira” Edited by J.M.Kihiyo, L.Ndimubansi and V.G.Nkondokaya, *Mila na Utamaduni wa Jamii ya Waha na Hatima ya Kimaendeleo ya Kiuchumi na Kijamii ya Mkoa Katika Karne ya Ishirini na Moja* (Dar es Salaam: Makumbusho ya Taifa la Tanzania.
- _____. (2005). *Waha: Historia Maendeleo*, Kipalapala: Tanganyika Mission Press.
- Comoro, Christopher and John Sivalon. (1999). “The Marian Faith Healing Ministry: An expression of popular Catholicism in Tanzania” Edited by Thomas Spear and Isaria Kimambo, *East African Expressions of Christianity*, Dar es Salaam: Mkukina Nyota Publishers, Oxford: James Currey and Athens: Ohio University Press.
- Cory, Hans. (1955). “The Buswezi”, *American Anthropologist*, Vol.57, No. 5.
- Dilger, Hansjoerg. (2007). “Healing the wounds of modernity: Salvation, community and care in a neo Pentecostal Church in Dar es Salaam, Tanzania”, *Journal of Religion in Africa*, 37.
- Feirman, Steven. (1990). *Peasant Intellectuals: Anthropology and History in Tanzania*, Madison: The University of Wisconsin Press.
- _____. (2000). “Explanation of Uncertainty in the Medical World of Ghaambo” *Bulletin of the History of Medicine*, Volume 74, 2.
- Grant, C.H.B. (1925). “Uha in Tanganyika Territory”, *The Geographical Journal*, 66, 5.
- Fridolin Bosch, Fridolin. (1930). *Les Banyamwezi, people de’Alfriqueorientale*, Munster.

⁶⁹Interview, Francis Ndumuli Aloo, Bukene, 30/11/2011.

- Guillebaud, Rosemary. (1961). "The Idea of God in Ruanda-Urundi" Edited by E. W. Smith, *African Ideas of God: A Symposium*, London: Edinburgh House Press.
- Hamilton, John T, and Kenneth G. Hamilton. (1983). *History of the Moravian Church; the Renewed Unitas Fratrum, 1722-1957*, Winston-Salem: Interprovincial Board of Christian Education, Moravian Church of America.
- Hasu, Paivi. (2006). "World Bank and Heavenly Bank in Poverty and Prosperity: The Case of Tanzania Faith Gospel", *Review of African Political Economy*, 33, 110.
- _____. (2012). "Prosperity Gospels and Enchanted Worldviews: Two Responses to Scio-economic transformation in Tanzanian Pentecostal Christianity" Edited by Dena Freeman, *Pentecostalism and Development: Churches, NGOs and Social Change in Africa*, Palgrave: Macmillan.
- Hinfelaar, Hugo. (2007). *Footsteps on the Sands of Time: A Life of Bishop Jan van Sambeek*, Rome: Society of Missionaries of Africa, History Series, No.8.
- Hultkrantz, Ake. (1989). "Health, Religion and Medicine in Native North American Traditions" Edited by Lawrence E. Sullivan, *Healing and Restoring: Health and Medicine in the World's Religious Traditions*, New York: Macmillan Publishing Company and London: Collier Macmillan Publishers.
- Iliffe, John. (1979). *A Modern History of Tanganyika*, Cambridge: Cambridge University Press.
- Janzen, John. (1978). *The Quest for Therapy in Lower Zaire*, Berkley, Los Angeles and London: University of California Press.
- _____. (2002). *The Social Fabric of Health: An Introduction to Medical Anthropology*, New York: McGraw-Hill Companies.
- Josephat, Eustella Sr. (2011). *Constitution of the Congregation of Daughters of Mary-Tabora*, Kipalapala: Tanganyika Mission Press.
- Kitagawa, Joseph M. (1989). "Buddhist Medical History" Edited by Lawrence E. Sullivan, *Healing and Restoring: Health and Medicine in the World's Religious Traditions*, and New York: Macmillan Publishing Company and London: Collier Macmillan Publishers.
- Leisner, George and Ludovick Matanwa. (1980). *Miaka Miamoja Jimboni Kigoma 1879-1979*, Kipalapala: Tanganyika Mission Press.
- Luomala, Katherine. (1989). "Polynesian Religious Foundations of Hawaiian Concepts Regarding Wellness and Illness" Edited by Lawrence E. Sullivan, *Healing and Restoring: Health and Medicine in the World's Religious Traditions*, New York: Macmillan Publishing Company and London: Collier Macmillan Publishers.
- Magoti, Evaristi. (2003). "Charismatic Movements in the Context of Inculturation" Edited by Mika Vahakangas and Andrew Kyomo, *Charismatic Renewal in Africa: A Challenge for African Christianity*, Nairobi: Acton Publishers.
- Mary, Nolan M. (1962). *Medical Missionaries of Mary: Covering the First Twenty-Five Years of the Medical Missionaries of Mary 1937-1962*, Dublin: Three Candles Press.
- Mbiti, John S. (1970). *African Religions and Philosophy*, Garden City, New York: Anchor Books Doubleday & Company, Inc.
- _____. (1970). *Concepts of God in Africa*, New York: Praeger Publishers.
- _____. (1991). *Introduction to African Religion*, London: Heinemann International.
- Merrit, John G, Ed. (2006). *Historical Dictionary of the Salvation Army* (Maryland: Scarecrow Press.
- Mlahagwa, Josiah L. (1999). "Contending for the Faith, Spiritual Revival and the Fellowship Church in Tanzania" Edited by Thomas Spear and Isaria N. Kimambo. *East African Expressions of Christianity*, Nairobi: E.A.E.P, Athens: Ohio University Press, and London: James Currey.
- Nolan, Francis P. (1978). *Mission to the Great Lakes: The White Fathers in Western Tanzania 1878-1978*, Kipalapala: Tanganyika Mission Press.
- Nyanto, Salvatory S. (2012). "Coping with the Challenges of Evangelisation in a Plural Setting: Experiences of the White Fathers in Buha and Unyamwezi 1878-1978", University of Dar es Salaam: Unpublished MA Dissertation. Osadolor. Imasogange. (1985). *African Traditional Religion*, Ibadan: University Press Limited.
- Pennacini, Cecilia. (2009). "Religious mobility and body language in Kubandwa possession cults" *Journal of Eastern African Studies*, Vol 3, 2.

- Ranger, Terence. (1992). "Godly Medicine: The Ambiguities of Medical Mission in South-eastern Tanzania, 1900-1945" Edited by Steven Feierman and John M. Janzen, *The Social Basis of Health and Healing in Africa*, Berkley, Los Angeles and Oxford: University of California Press.
- Scherer, Johan H. (1959). "The Ha of Tanganyika", *Anthropos*, Bd.54, H.5/6.
- Shorter, Alyward. (1970). "The Migawo: Peripheral Spirit Possession and Christian Prejudice", *Anthropos*, 65, H.1. /2.
- _____. (1972). *Chiefship in Western Tanzania: A Political History of the Kimbu*, Oxford: Clarendon Press.
- _____. (1974). *East African Societies*, London: Routledge and Kegan Paul.
- Tanner, Ralph E.S. (1967). *Transition in African Beliefs: Traditional Religion and Christian Change; a Study in Sukumaland, Tanzania, East Africa*, Maryknoll, New York: Maryknoll Publications.
- Tanzania National Archives (TNA) Tabora Regional Book (Western Province).
- Tanzania National Archives (TNA) Annual Reports of Provincial Commissioners: Western Province, 1951.
- Westerlund, David. (2006). *African Indigenous Religions and Disease Causation: From Spiritual Beings to Living Humans*, Leiden and Boston: Brill.
- Wilkins, Katharina. (2011). *Holy Water and Evil Spirits: Religious healing in East Africa*, Munster: Lit Verlag.
- Yongolo, N.D. (1953). *Maishana Desturiza Wanyamwezi*, London: Sheldon Press.
- Zysk, Kenneth. (1991). *Asceticism and Healing in Ancient India: Medicine in the Buddhist Monastery*, Delhi: Oxford University Press.
- (Anonymous) (1939). *Grand Lacs: General Journal of African Missions*, Nos. 8 & 9.

List of Interviews in Buha and Unyamwezi

- Francis Ndumuli Aloo, Bukene, 30/11/2011.
- Michael Katabi, Ndala (Uhemeli), 09/12/2011.
- Paulina Mihayo, Uhemeli (Ndala) village, 09/12/2011.
- Muhoza Kapera, Rusesa village 04/01/2012.
- Juma Nusura and Kassim G. Mbingo, Ujiji, 29/01/2012.
- Paul Bahinda, Kigoma, 01/02/2012.
- Kamego Yagaza, Heru village, 04/02/2012.
- Nsengimana Nsago, Heru Juu village, 04/02/2012.
- Selemani Kichozi, HeruJuu village, 04/02/2012.