

Prayer, Spatial and Health-Seeking Beliefs in Ghana

Daniel Yaw Fiaveh, University of Cape Coast, Ghana

& Michael P.K. Okyerefo, University of Ghana, Legon, Ghana

Introduction

- To discuss the religious and health seeking beliefs of informal prayer groups in Ghana.
- We interrogate the link between prayer and health-seeking attitude, with particular reference to how the forest as 'religious space' plays a prominent role.

Intro Cont'd

- Religion largely explains healthcare beliefs and behaviour (de Graft Aikins, 2005; Okyerefo, 2011; Twumasi, 2005).
- Drawing examples from Witchcraft accusations, HIV, Ebola, etc. (Levine, 2011; Roura et al. 2010; WHO, 2014).
- Reasoned action and planned behaviour (e.g., Ajzen, 1991; Fishbein & Ajzen, 1975) induced by group norms; God is “the greatest physician”

Intro Cont'd

- Growth of Pentecostal-Charismatic [P-CC] Christian churches and healing.
- In Ghana, P-CC form 28.3% population, Protestants 18.4%; Catholic 13.1% of the population with 71.2% Christians, (GSS 2012).
- Belief in seclusion as a 'religious space' e.g.s., parks, forests, etc.

How does the conceptualization of the forest influence perceptions of prayer and healing beliefs in Ghana?

Methods

- Qualitative and exploratory
- **Achimota Forest**; 248,698 visits to PGs in 2009, average of 20,000 per month (GFC, 2010)
- **Purposive and Snowball**; 32 interviewees & 2 Group interviews
- **Thematic Analysis** (Bryman, 2008)
- **Demographics**: female (27). Most members (30) were below 40 years. Twenty-six (26) were married 15 were single. The education straddles JHS to SHS with varied occupations

Table 1 Summary of Demographic Characteristics

	Number of Interviewees Total		
	Women	Men	
Individual Interviews			
Ordinary Members	18	6	24
Leaders	1	7	8
Group Interviews			
GI 1 (<i>n</i> 8)	8	-	8
GI 2 (<i>n</i> 4)	-	4	4

RESULTS

- Interviewees distinguished between physical (i.e., lifestyle and emotional cause) to spiritual cause (“spiritual attack”).
- Lifestyle related diseases include malaria, cholera, general body pains, diabetes, **stroke**; and were **gendered**.
- Women saw heart disease as a health problem for women through emotional stress (as a result of a husband’s infidelity) .

Quote 1; (Member, male, 60 years, married)

*You know there are some diseases that you get and the doctors can't even explain to you. Sometimes a **spiritual attack** or a curse from your enemy or something your parents did. You see even HIV can be a **spiritual attack**. Some people are not **spoilt** [promiscuous] but is surprising to hear that this person has gotten [contracted] this disease [HIV]. Have you heard of what some call "Tukpe"? Or Ashanti's as "duabo".*

Forest as a sacred 'space'

- Forest was seen as an opportunity to **express themselves freely** and as space for **more prayer** and **counseling time** with their leader unlike the walled confines of a church citing the Bible.
- They believe the leader or pastor has less time with his or her congregants in walled churches.
- They made a salient difference between praying at home and the forest, **comforts** and **noise they make**.

Quote 2; Grp Int. 2, average age of 32 years

*Church auditoriums are situated in towns and there is the tendency of **disturbing people**. But here we don't disturb and we can communicate freely with our Father. Moreover, this **man** [Prayer Group Leader] **is special and God has opened his eyes to see visions**, which is why we like this place.*

- The interviewees' health-seeking behavior point to **miscommunications** about some causes of diseases.
- The members linked their religious beliefs to **faith in herbal remedies** compared to mainstream hospitals and Western biomedical care.
- They accept herbal medicine or even recommend its use as long as it is not used in connection with asserting belief in traditional religion.
- On another level, **prayer is complementary to hospitals and Western biomedical care.**

Quote 3; Member, female, 26 years, unmarried

*Doctors treat but **God heals**. After prayer and healing, you still need to go to the hospital for check-ups. The hospital and the pastor support you as you take your medication.*

Conclusion

- The initial findings show that there are several reasons why prayer group members in this study resort to the forest, such as finding a serene sacred space in a crowded city to confront the vicissitudes of life.
- Disease, for the prayer group members, has spiritual and physical origins, making them seek both biomedical and spiritual care.
- Interviewees were convinced that hospitals can help with physical diseases, but spiritual diseases require spiritual solutions, such as prayer.

Conclusion cont'd

- The interviewees shared in the general belief that doctors can treat certain conditions, but only God heals.
- We suggest the development of health outreach/education programmes to alter beliefs and cultural practices of a huge constituency in the field of health care in Ghana.

THANK YOU