



REDRESS

Reducing the burden of
Severe Stigmatising Skin Diseases

Beyond the Biomedical

Collaboration with faith & traditional healers in the management of skin NTDs is possible, leading to earlier case detection and stigma reduction



'I think as a leader you should also be somebody who will have a cool mind, patient, and always willing to listen to people. As a leader, you should not be the first but always be the last; that is some of the parts of leadership.'



The Role of Faith in Healing: A Photovoice Study

Lofa and Grand Gedeh Counties, Liberia



Traditional Healers Photovoice Study

Lofa and Grand Gedeh Counties, Liberia

Summary / Synopsis

Traditional and faith healers often hold significant cultural and societal influence in the management of skin NTDs due to their trusted positions within the community and beliefs about disease origins (Chandler, 2016). Recognising their key role, and willingness to work with formal health systems, REDRESS partnered with informal providers to co-develop interventions on identifying symptoms of NTDs, stigma reduction and basic psychological support. Training, sensitisation and involving them in referral systems can lead to early case detection and timely referral to formal healthcare settings, reducing delays in treatment. Faith and traditional healers fill gaps in uneven and varied availability of mental health service provision at facility level due to their roles in providing holistic and spiritual care. Integrating traditional healing practices with biomedical approaches can offer a more comprehensive and holistic care strategy. Collaboration can enhance treatment outcomes.

Background

Why are informal health providers key stakeholders?

People affected by skin Neglected Tropical Diseases (NTDs) often experience social stigma related to beliefs surrounding the cause of their illness which can delay care seeking, exacerbating morbidity and having negative impacts on the mental wellbeing of people affected and their families. These beliefs often have a supernatural and/ or spiritual underpinning, which means that people affected may choose to seek care from informal providers (e.g. traditional or faith healers), rather than the formal health system, compounded by the trust people place in these providers as we found in our scoping review (McCollum et al. 2022). Consequently, faith and traditional healers play key roles in identifying and managing individuals impacted by skin NTDs.

In Liberia:



Faith healers are often empathetic toward people affected by skin conditions as well as those experiencing mental distress.

“Often you will see health workers covering away from affected persons when the sore is smelling bad, but a traditional healer would hold them close to provide traditional treatment... no matter what you think about traditional health practices... there is something about that physical connection and desire to help or reduce stigma that makes people feel human... that supports mental health too... with or without the addition of counselling.”

National Mental Health Service Provider

Defining Informal Health Providers

Informal health providers include individuals who deliver health-related services outside formal healthcare systems. This includes traditional healers, faith healers, herbalists, and other non-certified practitioners who offer various forms of healing and treatments.



Faith healers rely on spiritual or religious beliefs and practices to address health issues. They often use prayer, rituals, and religious texts as a means of healing, attributing illness to spiritual or supernatural causes.



Traditional healers use indigenous knowledge, cultural practices, and traditional medicine to diagnose and treat various ailments. Their methods may involve herbal remedies, rituals, massages, or spiritual ceremonies, rooted in cultural and traditional beliefs about health and illness. Traditional healers are often referred to as Zoe within Liberia.



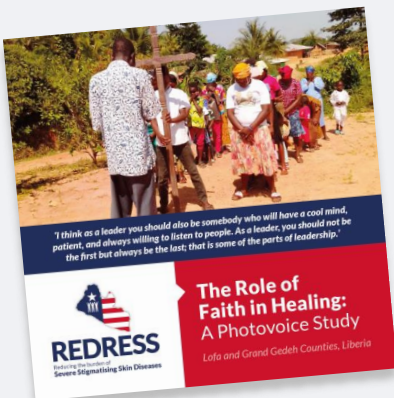
Faith healer in Grand Gedeh County



Traditional healer in Lofa County

The inclusion of informal providers in the delivery of holistic person-centred care for skin NTDs is critical. Yet, there is limited evidence on suitable structures and opportunities for collaboration between formal and informal providers in the management of NTDs. As part of REDRESS, we sought to:

- **investigate** the role of informal providers in the management of NTDs in Liberia; their **experiences and perceptions of caring for people affected by skin NTDs**;
- **co-design interventions** to improve their engagement through the use of participatory approaches.



Please look at the photovoice booklets on the role of traditional and faith healers for further detail on findings.



[Faith Healers](#)



[Traditional Healers](#)



"This shows the traditional medicine that I was using ... we were in the interior, and we started using country medicine. After some time doing the country medicine, the foot don't want to get better, that is when we go to the hospital."

Person affected, Grand Gedeh County



"A man of God was praying for me. ...God can make a way for you. Because when that man of God prayed for me, he counselled me...The only thing that can be done right now is that we just put our heart together and ask, continue praying that the people will farm medicine, the rightful medicine for their foot."

Person affected, Margibi County

What was the impact of REDRESS interventions?

Training and sensitisation sessions can foster positive relationships with traditional and faith healers, adjusting beliefs about the cause of NTDs, increasing commitment to share awareness within their community and improving changes of referral to/collaboration with the formal health system at an earlier stage.

"I love the training because I learned new things today, which was affecting us and all we thought of was witchcraft and is not so. So, there are some things now I learned today that when I get back home, I will try to deliver this message to my community."

Traditional and faith healers, FGD post training, Lofa County

- Informal providers have a critical role in promoting trust and acceptance of seeking care at the health facility, as faith healers share health messages within the community, encouraging persons affected to have faith that their condition can be managed and that there is treatment available at the health facility.
- Working in partnership with traditional and faith healers can increase case detection. Perceptions about relationships between faith/traditional healers and formal health workers shifted positively, indicating stronger ties between informal providers and formal health providers, resulting in increased patient referrals.
- Traditional and faith healers work with community health assistants through pre-existing community engagement platforms to identify skin NTD cases. In Lofa CHAs engage in church-based case detection, while faith healers offer referrals and support to patients, providing prayer during medical care. Friendships and collaborations have been forged between faith healers, community health assistants and facility health workers.
- Respect and recognition of roles was key to building relationships and collaboration between formal and informal health systems, this allowed each health actor to manage relevant components of skin NTDs: faith and traditional healers the spiritual and health workers the biomedical and social.



[Read: Case Detection Case Study](#)

“I share my knowledge with traditional healers because people like that, they never used to know the importance of the health facility. Whenever patient come to them, their belief is a witchcraft... Maybe it's a curse on a person, but with a training received from REDRESS, we were able to teach them that's a training, how to refer patient from the community, from their house and where they treat patients to the health facility.”

Hagar, CHSS and co-researcher, Margibi County



“...they [health workers] didn't even recognize us before so that made us to be further from one another. Based on the training REDRESS carried through, we are now closer. We understand our selves, we are united together... we take patients from our side and they received the patients.”

Faith healers, FGD, Grand Gedeh County

- Enhanced collaboration with the formal health system can have a negative impact on livelihoods of informal providers: further discussion on the best way to address this impact is still needed.
- Participatory intervention design-built trust and collaboration between informal providers and formal health providers. These relationships take time and resources to foster and is something that could be further considered in scaling up these approaches within the national NTD programme.
- The role of informal providers in the management of skin NTDs has been recognised at national level. The national NTD programme is committed to strengthening working relationships between the formal and informal health system with key activities now detailed in the National NTD Masterplan 2023-2027 to: Orientate traditional and faith healers to suspect and refer NTDs cases and use [look, listen and link](#) guidelines. Traditional and faith healers were also included in the masterplan development process.
- REDRESS' partnership has garnered interest within Liberia and internationally through presentations and recommendations shared at the [WHO's first skin NTD meeting](#) in Geneva in 2024 and COR-NTD where the key roles of informal providers was recognised with a participatory breakout session; exploring optimal collaboration with traditional and faith healers was highlighted as areas for further operational research.



[Read: Five Key Learnings](#)

What did we do to strengthen collaboration with informal health providers?

REDRESS aimed to strengthen the collaboration between informal providers and formal providers to improve case detection and management by including them throughout the research process and providing training to informal healthcare providers. Informal providers were included during county dissemination and intervention design workshops, within community advisory boards and in sense checking intervention materials for their suitability.

REDRESS developed a one-day training for informal providers which included an emphasis on recognition of people affected by skin NTDs, dispelling myths around the cause of these conditions, referral linkages, providing basic psychosocial support and understanding stigma.

- Training sessions were conducted for informal providers, including 294 faith healers and 294 traditional healers. The training covered topics such as dispelling myths, comprehending the origins of NTDs, identifying and referring NTD cases, offering basic psychological support, and reducing stigma.
- Dialogues were facilitated between health facilities and traditional/faith healers to foster collaboration, overseen by county and national supervisors.
- Faith and traditional healers, were equipped with job aids tailored for their communities. These aids included guidance on addressing myths, understanding the origins of NTDs, recognizing signs and symptoms, look listen link to identify and refer someone experiencing mental distress. [link to page X-X of REDRESS manual].
- Traditional healers and faith healers attended midterm review meetings, and were given platforms to present at meetings and take part in World Café sessions.
- The profile of working in partnership with traditional and faith healers was raised through a presentation at the WHO first skin NTDs meeting by Hannah Berrian.
- You can also learn more about this process by listening to this podcast about Inclusion and Participation and working with traditional healers.



[Listen: Link to podcast](#)



Photo Exhibition and Intervention Design Workshop with stakeholders including faith and traditional healers



Traditional healers (Prince Gwion, left) and faith healers presenting and attending World Café session at the REDRESS Mid-term Review Meeting



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