Chapter 2

ICTs for Enhanced Use of Indigenous Medicinal Plants by the Ashante Speaking People of Ghana

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ABSTRACT

Knowledge, over the centuries, has been recognised as power when acquired and used to resolve pertinent human problems. It helps to develop and advance communities in the environment they reside. Knowledgeable communities manage to elevate themselves from diseases and other catastrophes. It does not matter whether people are knowledgeable in the indigenous African ways or in the Western ways of knowing. What matters most is that the knowledge, skills, attitudes and values embedded in their social contexts are not only essential for their advancement and development, they are also critical for their survival. Knowledge acquisition through education enables communities to emancipate themselves from ignorance and poverty and raise themselves above all the challenges that may impinge negatively on their general and specific well-being. There is urgent need to gather together the indigenous wisdom of different ethnic groups around the world, especially the knowledge of indigenous medicinal plants and their uses for treatment and healing. This paper proposes to make a contribution in this respect by providing the basis of some of the IKS of the Akan ethnic group of Ghana, the Asantes, related to indigenous medicinal plants application for the treatment of a multiplicity of ailments. Recommendations regarding how this IKS can be preserved and commercialized through the application of Information and Communication Technology (ICT) to benefit the indigenous Asante speaking people of Ghana are provided.

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INTRODUCTION

Indigenous knowledge systems (IKS) of indigenous peoples around the world are varied; however, there are consistent patterns in the way indigenous knowledge (IK) is acquired and in the nature of the content and context of their application (Nyathi, 2005; Ntuli, 1999; Van Wyk, 2002; Hountondji, 2002). It is important to place IKS in proper perspective as different from the Western Science-based Knowledge Systems (WSKS). In practice, both systems have complementary characteristics. IK from the African indigenous perspective is local and specific to the people who have acquired and managed them over the centuries before the advent of colonization. A major characteristic of IK is that it draws on a very long term practical information base which had been tried and tested practically for centuries. In this sense, it would be ideal to indicate that there is great advantage in using both IKS and the WSKS for complementation purposes for the treatment and healing of different ailments. In other words, both systems have strengths which, when combined, can work together effectively and efficiently.

The message through this chapter is that the Akan ethnic group’s IKS related to medicinal plants provide ways of knowing and learning and have the capability of addressing a multiplicity of society’s numerous healthcare problems. Some of these IKS are discussed in this paper. Medicinal plants can be freely applied in the healthcare systems of all interested medical practitioners. Generally, IKS are by nature context-based in the production of goods and services and provide socially constructive knowledge capable of empowering people at grass roots level to resolve their healthcare problems and also earn income which they can use to resolve some of their financial problems.

Furthermore, this chapter addresses the problem of neglect of IKS of the medicinal plants and their use. The Akan ethnic group of the Asante speaking people of Ghana tend to help resolve some of societies’ numerous healthcare problems using indigenous medicinal plants and honey. The information provided in this paper was tapped from the IKS of forest and savannah medicinal plants which was made readily available to me by someone close to me dealing with indigenous medicinal plants, my father, a renowned indigenous medical doctor.

The knowledge of forest and savannah medicinal plants can contribute to the improvement of healthcare in Africa in particular and the rest of the world in general. It is important that such medicinal plants be made available for researchers to undertake further studies to explore the ways indigenous societies, over the years, have been able to survive amid harsh climatic, economic and social conditions for centuries; and had been able to attend to their pertinent medical problems that they encountered before the advent and introduction of western medicine. The IKS that guided indigenous societies deserve to be made available to humanity through the use of ICT to be studied and experimented further and carefully documented for posterity. An aspect of the Asante speaking people of the Akan ethnic group of Ghana IKS is showcased below illustrating that it can be used by all categories of medical practitioners for the improvement of healthcare and also for generating income.

An issue worth considering in this discussion is how the rural communities which possess the indigenous medical plants knowledge will be able to have access to ICT. Access to ICT like telephone and internet is required to make it easy for Asantes to share and make accessible their knowledge and skills available to the rest of the medical world through video, CD and Internet access. ICT is not available in the rural areas of Ghana, especially in the Asante (misspelt Ashanti by colonialists) region. In the light of such handicap, it would be worthwhile for the Ghana Government to make provision to provide the rural folk access to ICT in the rural areas where they are mostly needed. If