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**TOPIC: INDIGENOUS KNOWLEDGE SYSTEMS PERTAINING TO  
CHILD HEALTH CARE IN LESOTHO**

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## **Abstract**

This study explores how indigenous knowledge systems can contribute to improving child healthcare in Lesotho. Through qualitative analysis, the research uncovers community attitudes towards traditional medicine and its relevance in contemporary healthcare. The findings highlight that recognizing and valuing these indigenous practices can empower communities and promote collaboration between traditional healers and healthcare professionals. Additionally, the study stresses the need to engage younger generations to restore interest in traditional knowledge. To support this, it recommends creating Indigenous Knowledge Centers to boost health literacy and community involvement. Ultimately, this study advocates for a general healthcare framework that honors cultural contexts, paving the way for a healthier future for all children in Lesotho.

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# CHAPTER 1

## STATEMENT OF THE PROBLEM AND ITS SETTING

### 1.0 Introduction

Indigenous knowledge systems (IKS) play a significant role in sustaining health within rural communities in Lesotho. In particular, this study focuses on indigenous knowledge systems pertaining to child healthcare and the potential role that they can play in the achievement of Sustainable Development Goal (SDG) 3 which focuses on good health and well-being. This is important because traditional healing practices face the threat of erosion due to modernization and urban migration, understanding how this knowledge is preserved and utilized is essential for improving child health outcomes. This dissertation aims to explore the significance of IKS in addressing child ailments. This chapter is structured as follows: it begins with background to the study, followed by a statement of the problem and purpose of the study. Next, the objectives of the study and research questions will be outlined. A central theoretical statement will provide the framework for the arguments, which will be supported by a discussion on the significance and assumptions of the study. The delimitations of the study will be clearly indicated, followed by definitions of key terms. Finally, there will be summary of the main points discussed.

### 1.1 Background

According to are considerable advancements in healthcare globally between developed and developing countries, as well as between urban and rural areas, especially in child health outcomes (WHO, 2022). Whilst health care systems in developing countries are progressing toward almost eliminating child mortalities, such trends are not apparent in developing countries. In many instances, child mortality not only remains high but there is also a very high dependence on Indigenous Knowledge Systems in maintaining child health, especially in rural areas (WHO, 2022). In other words, Indigenous Knowledge Systems (IKS) play a significant role in healthcare by providing culturally relevant and community-based solutions (Gracey & King, 2009).

As used in this study, Indigenous Knowledge Systems refers to the unique local knowledge, practices and beliefs developed by specific communities and shared over generations (UNESCO, 2017). It reflects an understanding of local environments, ecosystems and cultural traditions. Elderly people and traditional healers play a crucial role in preserving and passing down this valuable wisdom within their communities (Rashmi, 2024:15). Despite this knowledge playing a very important role in child health, it is increasingly becoming lost as older generations die off and the knowledge is not passed on to future generations. Lesotho is no exception in this regard (Rashmi, 2024).

In the context of assessing Indigenous Knowledge Systems in Lesotho, particularly in child healthcare, these systems have been instrumental in empowering rural communities across the developing world, providing them with essential tools to navigate everyday challenges (UNESCO, 2017). In the healthcare sector, traditional medicine serves as the first line of primary healthcare, particularly in regions where access to modern medical facilities is limited (WHO African Region, 2022:28).

In Lesotho, the reliance on traditional practices is evident, as older people often turn to local remedies when addressing child health issues. However, that valuable knowledge surrounding traditional medicines used for treating various child ailments is rapidly diminishing. As younger generations migrate to urban areas and the influence of Western medical practices, there is a growing concern that these traditional healing practices and wisdom may soon be lost (Thamae & Khanyile, 2023:67).

Despite the progress has been made in Lesotho in reducing child mortality rates, challenges persist due to factors like poverty, rural access to healthcare and high HIV/Aids prevalence that affect child health outcomes (UNICEF, 2012). Some ailments which continue to impact child health negatively cannot be treated within modern healthcare facilities and often require the expertise of older people or traditional healers, who possess deep knowledge of indigenous healing practices (Hicks & Liddell, 2023). These practitioners play a crucial role in addressing specific child health issues that may not be addressed by conventional medicine (Syamsuriah et al., 2019). Therefore, this research aims to assess the role of indigenous knowledge systems in child healthcare in Lesotho.

## **1.2 Statement of the Problem**

Child healthcare remains a critical challenge in many rural areas of Lesotho resulting in high rates of both child morbidity and mortality. According to the Lesotho Demographic and Health Survey (LDHS, 2024), the under-five mortality rate is 54 deaths per 10000 live births, and infant mortality stands at 26 deaths 10000 live births. This situation is exacerbated by the loss of traditional knowledge that could be instrumental in addressing these issues.

## **1.3 Purpose of the Study**

The purpose of this study is to investigate how indigenous knowledge systems can be utilized on child healthcare in Lesotho.

## **1.4 Objectives of the Study**

- To determine how Indigenous knowledge systems can be used as an approach to improve child health in Lesotho.
- To assess the perceptions of rural women toward the use of traditional medicines in the treatment of child ailments in rural Lesotho.
- To identify the key traditional medicines utilized in the treatment of child ailments within rural communities of Lesotho
- To assess the determinants of the use of traditional medicines in the treatment of child ailments in Lesotho
- To examine the methods through which traditional knowledge has been preserved and transmitted across generations in rural Lesotho

## **1.5 Research Questions**

- How can indigenous knowledge systems be used as an approach to improve child health in Lesotho?

- What are the perceptions of rural women toward the use of traditional medicines in the treatment of child ailments in rural Lesotho?
- What are the key traditional medicines used in the treatment of child ailments in rural Lesotho?
- What are the key determinants of the use of traditional medicines in the treatment of child ailments in Lesotho?
- How has the traditional knowledge been preserved and transmitted from generation to generation?

### **1.6 Significance of the Study**

Indigenous knowledge systems have a key role to play in the delivery of child health services throughout the rural areas of many developing countries, especially toward the achievement of child health, yet such knowledge remains poorly integrated into the main health systems and such knowledge is being progressively lost.

### **1.7 Delimitations of the Study**

The study will specifically concentrate on indigenous knowledge systems relevant to child healthcare.

### **1.8 Organisation of the Remainder of the Report**

The chapters succeeding this introductory chapter shall comprise Chapter 2 which is on the literature review; the third chapter shall comprise the research methodology, the fourth chapter shall comprise data analysis and interpretation and finally, the last chapter shall comprise the conclusions based on the findings of the study.

## **CHAPTER 2**

### **LITERATURE REVIEW**

#### **2.0 Introduction**

This chapter presents the literature review on indigenous knowledge systems pertaining to child healthcare in Lesotho. The aim of this review is to explore the current research and consolidate the understanding of how indigenous knowledge practices can improve child health outcomes in Lesotho. This review will not cover all aspects of IKS but will focus primarily on those relevant to child health management. There are several key objectives that are to be discussed in this chapter; determining how indigenous knowledge systems can be used to improve child health in Lesotho, assessing rural woman's perceptions of traditional medicines for treating child ailments, identifying key traditional medicines used in these communities, enhancing the determinants influencing the use of traditional medicines and examining the methods of preserving and transmitting traditional knowledge across generations. This chapter is organized into three sections: the first one discusses theoretical frameworks, with a particular focus on Indigenous Woman's Standpoint Theory, the second reviews empirical research on how the intersection of gender and health in the context of COVID-19 can inform and reshape indigenous health discourses to better include women's perspectives in environmental conservation efforts, while the final section identifies the gap.

#### **2.1 Theoretical Framework**

##### **2.1.1 Indigenous Women's Standpoint Theory**

Women's knowledge, experiences and practices pertaining to health of their children comprises the center piece of the study. The theoretical framework provided by Indigenous Women's Standpoint Theory has therefore, been adopted as the key theoretical point of entry. To discuss this theory effectively, it is important to trace the evolution of thought from Standpoint Theory through Women's Standpoint Theory, Indigenous Standpoint Theory and indigenous Women's Standpoint Theory.

The study of marginalized voices is a longstanding component of social theory, and the first step in the process was Standpoint Theory, which has its roots in Marxist philosophy. Marxism emphasizes that people's experiences and social standards have a significant impact in their knowledge and understanding (Hill, 1999). Specifically, the perspectives and experiences of marginalized groups are very important because they provide unique insights into society (Hill, 1999).

Building upon this foundation, feminist scholars such as Sandra Harding (1986) and Dorothy Smith (1989) developed Women's Standpoint Theory, commonly referred to as Feminist Standpoint Theory. They maintained that women's lived experiences provide an epistemic privilege that challenges conventional ideas of objectivity. Put it another way, women's experiences and viewpoints provide a useful perspective on how knowledge is usually created and understood, highlighting biases in what is deemed accurate (Smith, 1989; Harding, 1986).

Feminist theory, as a broader framework, critiques the traditional masculine biases that have predominantly been shaped by male perspectives. It urges that knowledge is not neutral, rather, it is influenced by power dynamics and societal norms that often marginalize women's voices. Feminist theory asserts that the dominant narratives in both science and philosophy tend to reflect male experiences and biases, thereby constructing a version of reality that overlooks the complexities of women's lives (Gurung, 2020).

Central to Women's Standpoint Theory is the idea that marginalized groups, particularly women, have a distinctive standpoint that can reveal insights into social inequalities and injustices that are often hidden from the dominant viewpoint. This perspective emphasizes that knowledge is socially situated, what is considered "truth" or "objective" is often based on the experiences and biases of those in position of power (Gurung, 2020). Hardin and Smith advocate for an epistemology that values subjective experiences as legitimate sources of knowledge. they argue that incorporating these perspectives can not only enrich our understanding of social realities but also contribute to more effective social change (Smith, 1989; Harding, 1986).

After realizing the limitations of Women's Standpoint Theory, Martin Nakata began to explore Indigenous Standpoint Theory, which focuses on the value of Indigenous viewpoints in understanding social, cultural and political dynamics (Nakata, 2007). However, this framework

neglects the unique experiences and perspectives of indigenous women in favor of focusing more on the experiences of Indigenous men.

This gap paved the way for Indigenous Women's Standpoint Theory. Articulated by Moreton-Robinson, this theory's central theme is the intersectionality of gender into the analysis. Intersectionality, as introduced and developed by Kimberle Crenshaw, is a framework that examines how numerous social identities including race, gender and class, connect in order to shape one's experiences of discrimination and oppression. This concept points out that, people may face different challenges depending on the combination of their identities, instead of viewing these identities in isolation (Crenshaw, 1989). So, Moreton-Robinson's argument is that, intersecting oppressions experienced by indigenous women within societal hierarchies efficiently contributes to the development of indigenous women's research methodologies that address both cultural knowledge and gendered experiences (Moreton-Robinson-2013).

Indigenous Women Standpoint Theory also underscores the importance of cultural identity in shaping the experiences of indigenous women. Chen (2014) defines cultural identity as the feeling of connection to a specific group characterized by various factors, such as nationality, race, gender and religion. She mentions that this identity is shaped and sustained through the sharing of collective knowledge, which includes traditions, heritage, language, artistic expressions, social norms and customs. She adds that, cultural identity is significant in influencing how individuals perceive themselves and their interaction with the world (Chen, 2014). Within the framework of diversity, equity and inclusion, cultural identity is essential for creating an environment where differences are recognized and valued, thus, contributing to a more inclusive and equitable society. (Usborne & Sablonniere, 2014).

According to Indigenous Women Standpoint Theory, cultural beliefs and practices affect maternal and child health (Moreton-Robinson, 2013). This is because traditional healing methods, dietary practices and community rituals play crucial roles in child health, therefore, by incorporating these indigenous perspectives, researchers can fully understand and improve healthcare strategies that resonates with local communities (Moreton-Robinson, 2013).

Additionally, Indigenous Women Standpoint Theory advocates for the inclusion of indigenous women in health decision-making processes. Moreton-Robinson (2013), mentions that since women are caregivers and knowledge holders, this puts them in a position to contribute valuable

insights into child healthcare practices. Therefore, by empowering indigenous women to partake in health policy discussions can lead to more culturally appropriate and effective health programs that align with local needs (Ryan, 2020).

### **2.1.2 Strengths of Indigenous Women Standpoint Theory**

Indigenous Women Standpoint Theory offers a general framework that encapsulates various and complex experiences of Indigenous women. By recognizing different cultural, social and historical contexts which women live in, this framework allows researchers to gain deeper insights into the complications of their realities (Ryan, 2020). As discussed by Moreton-Robinson (2013), this view is specifically essential for addressing issues related to health, education and community dynamics, as it does not only consider individual experiences but also the broader systemic factors engaged. When applying this approach to child health care in Lesotho, it allows for an examination of how cultural practices, traditional beliefs and socio-economic conditions combined influence maternal and child health outcomes. Consequently, this understanding can lead to more effective and tailored interventions that address specific community needs (Moreton-Robinson, 2013).

Among the most notable strengths of Indigenous Women Standpoint Theory is its central point on empowerment. While this theory caters for the voices and experiences of Indigenous women, it actively promotes their involvement in research and advocacy efforts (Moreton-Robinson, 2013). She continues to show that this empowerment encourages a sense of agency, which allows Indigenous women to challenge powerful narratives and asserts their rights and identities (Moreton-Robinson, 2013). This involvement justifies their experiences and inspires community ownership of health initiatives, leading to more culturally appropriate healthcare solutions (Moreton-Robinson, 2013).

According to Moreton-Robinson (2013), Indigenous Standpoint Theory also highlights the significance of cultural relevance in policy-making and research. By valuing and including Indigenous Knowledge Systems, the theory ensures that research is meaningful and applicable to the involved communities. This cultural relevance is important in dealing with matters revolving around healthcare, education and social justice, since it aligns with the values, beliefs and practices of Indigenous communities. This alignment helps in combating the historical marginalization of

Indigenous Knowledge in broader health and social policies, reinforcing the importance of indigenous perspectives in shaping their futures (Moreton-Robinson, 2013).

### **2.1.3 Weaknesses**

One of the weakness of Indigenous Women's Standpoint Theory is the risk of overgeneralization. Despite its goal being to capture the disparity of indigenous women's lived experiences, it may oversimplify most complicated health issues that vary in different communities (Cox et al., 2021). For example, in Lesotho, health practices and beliefs related to child care can differ between ethnic groups, such as the Basotho and Bathepu. If one-size-fits-all approach is applied by researchers, this means that it is highly possible to overlook traditional healing practices that influence child health. This generalization leads to interventions that do not go along with other certain communities and that ultimately undermines their effectiveness (Cox et al., 2021).

Furthermore, the intersectional approach of Indigenous Women Standpoint Theory demands a profound understanding of numerous factors including historical context, gender, socio-economic status and culture. Implementing this multifaceted approach can be challenging, particularly in constrained resource settings. For instance, collecting comprehensive data that captures the intersection of these factors necessitates both qualitative and quantitative research methods, which may be inaccessible in certain settings (Cox et al., 2021). In Lesotho, where health research funds are often limited, researchers may encounter difficulties in obtaining sufficient data to inform their understanding fully (United Nations Permanent Forum on Indigenous Issues, 2021). Therefore, this lack of comprehensive data can easily hinder the evolution of effective health initiatives, leading to shallow analysis that inadequately represent the full scope of indigenous women's experiences (McGuire-Adams, 2023).

Finally, implementing insights from Indigenous Women Standpoint Theory is often encountering difficulties as a result of limited resources. Majority of indigenous communities' experience financial limitations that restrict their efforts in implementing health programs. To illustrate this, in Lesotho, community health initiatives often lack sustained funding for long-term projects focused on improving child health care. This financial limitation hinders the development of culturally appropriate programs that incorporate indigenous knowledge practices (Moreton

Robinson, 2013). Therefore, without adequate support, those efforts may struggle to gain credibility or even achieve the recognition necessary to shape broader health policy frameworks (Cox et al., 2021).

Furthermore, historical inequalities and systemic obstacles worsens these challenges, making it difficult for indigenous communities to access essential resources and support necessary for health initiatives (Butler, 2021). As a result, the sustainability of health programs grounded in indigenous women standpoint theory may be jeopardized, potentially reinforcing rather than reducing health inequalities. Effectively addressing these barriers can help with changing conceptual knowledge into practical, impactful strategies leading to improved health outcomes among indigenous women and children (Smith, 2012).

## **2.2 Review of Related Research**

Indigenous women in Zimbabwe have been playing a key role in maintaining as well as transmitting medicinal knowledge within Shona societies particularly in passing down this knowledge through generations (Manyonganisa, 2023:3). He emphasizes that older women remain deeply connected to mother earth in their healing practices. As a result, they serve as reservoirs of traditional healing methods that align with environmental sustainability.

During COVID-19 pandemic, women in Zimbabwe felt obliged to ensure the safety and well-being of their families, a thought deeply ingrained in the practices of indigenous women who have relied on traditional methods for preventing and treating disease throughout the history (Manyonganise, 2023:7). When it was announced that modern science failed to deliver a cure for the pandemic, these women swiftly recognized the need to turn to their own cultural heritage to find the solution. They started the collection of traditional herbs known to them, finding both treatment and prevention in these long-standing practices (Manyonganise, 2023:7).

The case study's emphasis on the revival of traditional medicine not only demonstrates these women's tenacity but also underscores critical role in maintaining cultural knowledge and traditions. When traditional medical systems were unable to provide answers during a crisis, these women took on the role of becoming the custodians of knowledge that had been passed down through generations (Manyonganise, 2023). This indicates that their experiences reinforced a collective belief in the effectiveness of traditional medicines, which they saw as a reliable source of support and healing.

### **2.2.1. Strengths Relating to Indigenous Women's Standpoint Theory**

The case study emphasizes the role of African Indigenous Medicine (AIM), showcasing how women turned to traditional practices during the Covid-19 pandemic when modern medicine fell short. For example, women reported that using herbs such as *zumbani* and *mufandichimuka* for both prevention and treatment of covid-19 (Manyonganise,2023:7). This focus validates the significance of indigenous knowledge as essential to community health, aligning with Indigenous women's standpoint theory's principle of recognizing the value of indigenous expertise (Coates et al., 2023:905).

In addition, the study centers the experiences of indigenous women, illustrating their crucial roles in health practices. For instance, women expressed a strong sense of responsibility for sick family members, often prioritizing these duties over their own safety (Manyonganise,2023:7). This emphasis on women's lived experiences aligns with indigenous women's standpoint theory, which argues that understanding health issues through the lens of those directly affected provides deeper insights into community dynamics (Coates et al., 2023:908).

Furthermore, the study integrated local cultural practices, maintaining relevance to the communities involved. The women's use of traditional healing methods reflects their cultural heritage and knowledge passed down through generations. For example, the practice of *pre-mastication* (chewing medicine before feeding it to children) (Wendy, 2007), highlights the culturally specific ways women care for their families (Manyonganise, 2023:4). This cultural grounding enhances the legitimacy of the findings, as emphasized in Indigenous Women's Standpoint Theory, which recognizes the importance of cultural context in health discussions (Coates et al., 2023:905).

Lastly, the advocacy for sustainable harvesting practices reflect the interconnectedness of health and the environment, a key aspect of indigenous women's standpoint theory. Women in the study expressed a commitment to preserving the ecosystem, stating that they would leave roots intact when harvesting herbs to ensure future growth (Manyonganise,2023:8). This awareness underscores the role of women as environmental stewards, highlighting the importance of their knowledge in promoting both health and ecological sustainability (Coates et al., 2023:907).

### **2.2.2 Weaknesses**

Some researchers argue that focusing exclusively on women's contributions to indigenous health and environmental conservation neglects broader systemic challenges, such as economic inequality, political instability and inadequate healthcare infrastructure. For instance, Chivandikwa et al. (2024) points out that gender-focus approaches often fail to address how persistent poverty and weak institutional frameworks limit the effectiveness of health interventions.

While Manyonganise (2023) highlights the importance of indigenous health practices and their value in addressing health concerns, critics such as Munyiswa et al. (2025) contend that her

analysis falls short in exploring how these traditional practices can be effectively integrated into contemporary healthcare systems. This lack of examination is particularly critical when considering the complex challenges posed by pandemics like COVID-19. Without a clear framework for combining indigenous approaches with modern medical practices, her recommendations may not be fully practical in real-world scenarios. This gap limits the potential for a holistic health strategy that could leverage the strengths of both indigenous and modern healthcare systems to improve overall health outcomes (Munyiswa et al., 2025).

## **Addressing Research Questions**

### **2.3. Introduction**

Lesotho's health system is multifaceted, comprising various service providers that include public health facilities, private clinics, faith-based organisations and non-governmental organisations (NGOs). The public sector managed by ministry of Health, offers services through hospitals and health canter distributed across different districts. However, in rural communities, families face the heartbreaking reality of high child morbidity and mortality rates, largely due to preventable diseases. In their search for relief, parents often turn to traditional remedies, therefore, Indigenous Knowledge Systems emerge as an important lifeline. The aim of this section is to explore the role of Indigenous Knowledge Systems in enhancing child healthcare outcomes in Lesotho. To achieve this, the section will explore several key objectives: first, how Indigenous Knowledge Systems can be employed as an approach to improve child health in Lesotho. Perceptions of rural women towards the use of traditional medicines in treatment of child ailments will also be investigated. Additionally, this section will identify key traditional medicines utilized in in treating child ailments in rural Lesotho. Furthermore, key determinants influencing the use of traditional medicines will be explored. Finally, this section will examine how traditional knowledge has been preserved and transmitted from generation to generation.

### **2.4 Indigenous Knowledge Systems as an Approach to Improve Child Health in Lesotho**

#### **2.4.1 Integration of Indigenous Practices into Modern Healthcare**

Mungomeri et al. (2016) asserts that the use of herbal remedies for health and specific dietary custom, are central to the cultural fabric of local communities in Lesotho. This practices play a key role in enhancing modern healthcare by filling in gaps associated with accessibility and ensuring that health interventions are culturally appropriate. By merging these traditional approaches with modern medical methods, healthcare can become more effective and inclusive, catering to the needs and beliefs of the community while at the same time improving overall child health outcomes. This collaboration can help bridge the gap between mainstream medicine and

indigenous knowledge, developing a more inclusive approach to health care (Mugomeri et al.,2016).

Integrating indigenous knowledge systems into modern healthcare can improve child health outcomes in Lesotho. This approach is demonstrated by interventions that balance traditional caregiving practices with modern medical approaches through hybrid model that incorporate both community-based and clinic-based care (Ndayizigiye et al., 2022). Their intervention focused on parent coaching and the importance of culturally relevance, which resulted in improved child development outcomes and more effective caregiving behaviors. By adopting this culturally familiar strategy, Lesotho can advance its efforts by ensuring that healthcare services are effective and accessible to a wide range of communities (Ndayizigiye et al., 2022).

Using traditional practices can also be a successful approach for improving child health outcomes. One major practice is breastfeeding, which offers infants vital nutrients and immune support during their early developmental stages. This natural method of nourishment not only fosters physical growth but also strengthens the infant's immune system, reducing the likelihood of illness (Ndayizigiye et al., 2022).

Mphatlalatsane Trial Team (2016) emphasizes that training community health workers to educate and support mothers in best feeding strategies has proven to be an effective approach. Health workers serve as local resources, by providing guidance on the importance of breastfeeding and nutrition, and helping mothers navigate challenges they may face. Research from the Mphatlalatsane Trial Team (2016) reveals that such initiatives not only adds to mothers' knowledge but also empowers them to adopt practices that are healthier and beneficial to their children's growth and development.

Moreover, integrating and valuing traditional practices can create a more inclusive environment that resonates with the community's cultural context. This integration fosters a sense of trust and cooperation between healthcare systems and local populations, making health services more effective and accessible (Lesotho Child Grants Programme Analysis Team 2023). Their analysis emphasizes that this method of encouraging healthy traditions can lead to significant improvements in child health outcomes, initially contributing to the broader goal of public health in Lesotho (Lesotho Child Grants Programme Analysis Team (2023).

## **2.4.2 Promoting Health Equity Through Community-based Programs**

Promoting health equity through community-based programs is essential for successfully harnessing Indigenous Knowledge Systems (IKS) to improve child health in Lesotho. These initiatives capitalize on local knowledge and cultural practices to challenge child health differences in a meaningful way. By directly engaging communities, these programs confirm that health interventions are not only relevant but also resonate with the people they serve. This localized approach fosters trust and participation, which are crucial for the success of health initiatives aimed at improving child health outcomes (Ndayizigiye et al., 2022).

One notable example of this is the integration of early childhood development (ECD) interventions into primary healthcare systems in Lesotho. Such initiatives have shown remarkable success in enhancing child development outcomes and improving caregiving practices (Ndayizigiye et al., 2022). By involving village health workers who are familiar with the cultural context, these programs effectively utilize culturally relevant methodologies that resonate with local families. These engaged efforts lead to better health practices among caregivers, ultimately resulting in healthier children and stronger family dynamics (Ndayizigiye et al., 2022).

Additionally, the Lesotho Child Grants Programme serves as a powerful tool for promoting health equity by combining financial support with community-driven strategies. This program provides cash transfers to vulnerable families, which can alleviate economic barriers to accessing healthcare. By empowering families with financial resources, the program enables them to invest in their children's health and well-being (Lesotho Child Grants Programme Analysis Team, 2023). Furthermore, the community-centric approach of the Lesotho Child Grants Programme fosters collaboration among local stakeholders, creating a supportive environment that encourages healthy practices and improves overall child health outcomes. This strategy not only addresses immediate health needs but also contributes to the long-term sustainability of health equity in Lesotho (Lesotho Child Grants Programme Analysis Team, 2023).

## **2.5 Limitations of Indigenous Knowledge Systems in Lesotho**

In Lesotho, indigenous Knowledge Systems (IKS) are primarily oral traditions, passed down through generations. Pitikoe and Morojele (2017) argue that this reliance on oral transmission makes them vulnerable to memory decay and potential loss over time. They continue to show that, as knowledge is shared through storytelling and personal recollection, there is a risk that critical information may be forgotten. So, the lack of written documentation worsens this issue, as it prevents the establishment of stable record that could validate and preserve this valuable knowledge. Consequently, many practices may disappear without a trace, undermining the cultural heritage and practical wisdom embedded within this systems (Pitikoe & Morojele, 2017).

Moreover, Indigenous Knowledge is deeply rooted in the unique cultural practices and environmental conditions of local communities, limiting their universal applicability (Kaya & Seleti, 2013). For instance, the indigenous knowledge possessed by Basotho herders is intricately tied to their specific herding lifestyle, which includes practices, rituals and beliefs developed over centuries (Pitikoe & Morojele, 2017). This localized nature, makes it challenging to integrate such knowledge into national educational curricula or policy framework that aim for universal applicability. As a result, the rich insights offered by Indigenous Knowledge Systems can be overlooked when attempting to formulate policies that serve diverse populations (Kaya & Selati, 2013).

Finally, efforts to combine IKS with scientific approaches face difficulties due to differing worldviews. Indigenous practices are often viewed through a Western lens that may deem them outdated, creating barriers to collaboration and mutual recognition. This perception undermines the value of indigenous knowledge and limits the potential for learning from traditional practices that have been refined over generations. The failure to acknowledge the nature of IKS can hold back innovation and limit the development of solutions that combine the strengths for both indigenous and scientific knowledge (Kaya & Seleti, 2013).

## **2.6 Perceptions of Rural Women Toward Traditional Medicines for Treating Child Ailments in Lesotho**

### **2.6.1 Cultural Significance**

Traditional medicines are combined into the cultural essence of rural communities in Lesotho. These remedies symbolize not only rural women's heritage but also their identity, having been passed down through generations as a means of healing and care. This deep-rooted cultural significance fosters a strong sense of trust in traditional medicine, making it a preferred choice for addressing child ailments (Thipanyane et al., 2022). This situation is reflected in South Africa, where it has been indicated that traditional practices are closely linked to cultural beliefs and are viewed as vital for managing health issues, particularly those affecting children (Thipanyane et al., 2022).

### **2.6.2 Accessibility and Affordability**

In many rural communities of Lesotho, modern healthcare accessibility is often hindered by geographical challenges and financial constraints. Therefore, traditional medicine occurs to be a more accessible and cost-effective alternative for many families in remote and rural areas, as emphasized by WHO director-General Dr. Tedros Adhanom Ghebreyesus at the WHO Traditional Medicine Global Summit in 2023. Studies conducted in Uganda highlight that traditional medicines are normally utilized as the first line of treatment due to their local availability and minimal cost, making them accessible to those who might otherwise struggle to afford modern healthcare services (Logiel et al., 2021).

### **2.6.3 Trust in Efficacy**

Rural women often place considerable trust in the effectiveness of traditional medicines, a belief deep-rooted in personal experiences and the shared knowledge of their communities. Traditional healers are viewed as skilled and reliable figures, particularly for treating common childhood ailments such as fevers and digestive problems. This trust in traditional remedies is not unique to Lesotho; similar patterns have been observed in Zimbabwe, where women have relied on traditional treatments during antenatal care despite expressing concerns about potential safety issues (Mudonhi & Nunu, 2021). The confidence in traditional healers stems from their deep

understanding of local plants and remedies, as well as their familiarity with the cultural context of health and illness, allowing them to provide care that resonates with the community's values and beliefs (Marques et. al., 2021).

## **2.7 Key Traditional Medicines Used for Child Ailments in Rural Lesotho**

### **2.7.1 Traditional Medicines**

- Lengana (*Artemisia afra*): famous for curing respiratory issues such as cold and coughs. It is frequently used in inhalation treatments where the child inhales steam from boiled leaves (Moteete & Seleteng\_Kose, 2019).
- Bloukomo: Another herb that is commonly used in combination with Lengana to treat similar respiratory issues (Mugomeri et al., 2016).
- Monkhoane (*Heteromorpha arborescens*): Used to treat headaches by inhaling smoke from burning sticks (Moteete & Seleteng-Kose, 2019).
- Hloko (*Elionurus muticus*): The roots are chewed to alleviate stomach aches (Moteete & Seleteng-Kose, 2019)
- Phate ea ngaka (*Helichrysum caespitium*): It is used for treating wounds and skin infections (Possa & Khotso, 2019).

## **2.8 Key Determinants of the Use of Traditional Medicines in the Treatment of Child Ailments in Lesotho**

### **2.8.1 Cultural Beliefs and Practices – Heritage and Tradition**

Traditional medicines are deeply instilled in the cultural norms of rural communities in Lesotho. Families usually consider these remedies as essential components of their cultural heritage, leading to a strong preference for traditional treatments over modern medical alternatives. This perception is mirrored in the research from Western Kenya, which indicates that cultural beliefs pertaining to the causes of illness, as well as supernatural influences, significantly affect the utilization of traditional medicine (James et al., 2023).

The selection of particular herbs as well as methods associated with their utilization are normally dictated by traditional norms. Communities in Lesotho often rely on these practices because they have demonstrated effectiveness consistently over time. This reliance promotes a strong sense of trust in traditional remedies, as they are seen as fundamental to the community's cultural fabric (Possa & Khotso, 2015).

Furthermore, the cultural practices usually include the administration and preparation and of remedies in ways that mirror local customs and values. For example, particular herbs may be used specifically for children, with different procedures that honor cultural traditions. This combination of knowledge and application of that knowledge through practice reinforces the community's identity and highlights the importance of upholding these traditions for next generations. In this way, the use of traditional medicines is not just about health but an essential aspect of cultural continuity and belonging (Possa & Khotso, 2015).

### **2.8.2 Community Trust**

The collective knowledge and experiences shared within communities strengthens the community's reliance on traditional healers and their treatments. A study conducted across sub-Saharan Africa highlights that the level of community trust is a significant factor influencing the choice to seek traditional medicine practitioners for addressing childhood illnesses (James et al., 2023). Another research which was conducted in Tanzania has revealed that traditional medicines are usually viewed as effective treatments for different illnesses in children. This perception is

largely rooted in community trust, as many people believe in the healing properties of these natural remedies based on traditional practices and local experiences (Mwembete & Joseph, 2010; Ekor, 2014).

### **2.8.3 Accessibility and Availability**

In rural Lesotho, access to healthcare facilities is often limited, primarily due to challenging geographical conditions. This situation makes traditional medicines a more viable and accessible option for many families (WHO Traditional Medicine Global Summit, 2023). Similar findings have been observed in Ethiopia, where geographic isolation has been identified as a crucial determinant for the use of traditional medicine (Demtew et al., 2020). The physical distance to modern healthcare services can deter families from seeking timely medical attention, making local remedies more appealing.

### **2.8.4 Economic Factors**

Economic limitations lead families to prioritize the use of affordable traditional remedies over more costly modern treatments. Many families face financial limitations that make traditional medicines a more affordable alternative (WHO Traditional Medicine Global Summit, 2023). This is mirrored from studies in Northern Tanzania, which found that cost is a fundamental determinant, influencing the use of traditional medicines. As a result, during times of financial stress, affordability of traditional herbs becomes a crucial factor leading families to prioritize these options in health decision-making (Stanifer et al., 2015; Demtew et al., 2020).

### **2.8.5 Perceived Efficacy**

Many rural women make decisions about healthcare based on their perceived effectiveness of traditional medicines, which is often shaped by personal experiences and the shared knowledge of families and friends. In Western Africa, for example, mothers have reported a high level of awareness regarding effective herbal remedies for common ailments such as respiratory illnesses and diarrhea (WHO Traditional Medicine Global Summit, 2023). This collective understanding

fosters confidence in the use of traditional treatments, as successful outcomes are shared and celebrated within the communities.

### **2.8.6 General Approach**

Traditional medicines are frequently viewed as addressing not just physical symptoms but also the emotional and spiritual aspects of health. This perspective encourages their use for treating children's ailments, as families believe that these remedies are beneficial in supporting the general well-being rather than merely alleviating specific symptoms. Such a comprehensive approach to health resonates deeply within cultural contexts, reinforcing the reliance on traditional practices (James et al., 2023).

### **2.8.7 Education and Awareness**

Women who are knowledgeable about the preparation and therapeutic benefits of various herbal remedies are more likely to use them for their children's health. Research in Ethiopia shows that parental understanding of specific plants and their uses is important in influencing the decision to use traditional medicine. This knowledge empowers women, enabling them to make informed decisions about their children's healthcare (Demtew et al., 2020).

### **2.8.8 Influence of Traditional Healers**

Traditional healers often play a major role in influencing the use of traditional medicines. This is seen whereby they educate families about the application and benefits of different remedies subject to different ailments. Their guidance not only improves the community's understanding of traditional medicine but also significantly affects the acceptance and use of these remedies within households. Therefore, their influence fosters trust and promotes the continued use of traditional practices (James et al., 2023).

### **2.8.9 Social Factors**

Women in Lesotho often serve as the primary caregivers, making critical decisions for their children regarding health-related issues. Findings across Sub-Saharan Africa indicate that material roles greatly influence healthcare choices, inclusive of the decisions to utilize traditional herbs.

This constant involvement of mothers in caregiving emphasizes the importance of their perspectives and experiences in shaping health practices (James et al., 2023).

## **2.9 Preservation and Transmission of Traditional Knowledge in Lesotho**

### **2.9.1 Oral Traditions**

Oral traditions serve as a vital foundation for the preservation of traditional knowledge in Lesotho. Elders play a big role in sharing proverbs, songs and stories that encapsulate practical wisdom related to health and biodiversity conservation. Through storytelling, communities reinforce their identity and pass on lessons learned from past experiences. This method not only conveys cultural values but also ensures that essential practices are handed down to younger generations, allowing them to connect with their heritage (Mokuku & Mokuku, 2023; Maluleka & Ngulube, 2018).

### **2.9.2 Rituals and Ceremonies**

Community rituals and ceremonies provide significant opportunities for the transfer of indigenous knowledge. These events not only serve educational purposes but also strengthen community bonds. The gatherings often include demonstrations of traditional practices, such as the preparation of herbal remedies or specific agricultural techniques. By engaging in these activities, participants ensure the continuity of such knowledge and practices, fostering a sense of belonging and cultural pride (Mokuku & Mokuku, 2023; Dlamini & Nokwanda, 2021).

### **2.9.3 Role of Elders and Traditional Healers**

Elderly people and traditional healers are the most respected figures within their communities and their knowledge is considered to be instrumental. They provide mentorship to young generations through hands-on-training, teaching them how to identify medicinal plants and prepare medicines. Their leadership in guiding traditional practices ensures that this wisdom is preserved and respected within the communities. By serving as advisors, they help with maintaining the cultural heritage and encouraging younger generations to appreciate, maintain and engage with traditional knowledge. This leadership role demonstrates the importance of unity within communities and cultural permanence (Dlamini & Nokwanda, 2021; Maluleka & Ngulube, 2018; Khanyile et al., 2023).

## **2.10 Research Gap**

Regardless of the continuing issues regarding child healthcare in Lesotho, characterized by high rates of child mortality and mobility, there is a mounting concern of the loss of indigenous knowledge which could effectively contribute in improving child health outcomes. This research gap highlights the needs to discover and document particular traditional remedies as well as practices which have a potential of addressing these health issues. By incorporating indigenous knowledge into modern healthcare approaches is essential for preserving cultural heritage and improving child health care.

## CHAPTER 3

### RESEARCH METHODOLOGY

#### 3.0 Introduction

Research involves a systematic approach to gathering, analyzing and interpreting data to enhance our understanding of a particular issue or topic that we find intriguing (Leedy, Ormrod & Johnson, 2021). Essential to this process is methodology, which lays the foundation for how the study is conducted and ensures the reliability of the findings. This study will adopt a qualitative approach, allowing for an in-depth exploration of participant's experiences and perspectives. The aim of this chapter is to provide an overview of the research methods employed in this study, ensuring that the approaches used are transparent. The chapter is structured as follows: first there will be a discussion on research paradigms and overview of research methodology, followed by a detailed explanation of the research design and approach. This includes a discussion on population sampling techniques and the data collection methodologies utilized in the study. Finally, the research will address essential ethical considerations.

#### 3.1 Research Paradigms

A research paradigm is defined as a framework that shapes how a researcher views and interprets the world (Kivunja & Kuyini, 2017). In other words, it consists of a set of ideas, beliefs and understandings that inform how researchers develop theories and apply techniques in their work. Research paradigms shapes the methods used in a study, ensuring that the research is conducted in a logical and appropriate manner. It is important in that, it helps researchers determine how to ask questions, collect data and interpret findings, ultimately influencing the overall direction of the research project (Nicolas, 2024).

There are several types of research paradigms, including positivism, interpretivism, critical and constructivist. For this study, interpretivist paradigm will be adopted. According to Nicolas (2024), the interpretivist paradigm emphasizes that individuals perceive and understand reality in unique ways. This means that although there may be a single objective reality, each person interprets it based on their personal experiences and perspectives. Interpretivists usually use qualitative

research methods to explore these various interpretations, including techniques such as interviews, focus groups and document analysis. By focusing on the personal experiences of individuals, interpretivists aim to gain a deeper understanding of how people make sense of their world (Asgar, 2013).

The choice to use interpretivist paradigm for this study is comes from the intention of understanding how individuals from local communities personally experience and view the indigenous knowledge systems and their influence on child health care. This approach allows researchers to gather rich qualitative insights that are necessary for understanding the complex nature of health practices.

By adopting the interpretivist paradigm, the study acknowledges that health practices are not merely based on objective data but are deeply connected with cultural beliefs, personal experiences and social contexts. This paradigm allows for a thorough exploration of how parents and caregivers make sense of and utilize traditional herbs in caring for their children, taking into consideration about their unique backgrounds and life experiences.

Additionally, the interpretivist paradigm promotes an open communication with participants, creating space for their voices to be heard and valued in research process. This inclusion element is crucial for obtaining genuine perceptions into the community's and practices and beliefs, resulting in a more effective and culturally suitable health solutions. Ultimately, this paradigm is the most appropriate choice for this study since it corresponds with research objectives, highlighting the importance of understanding the perspectives of individual within their cultural and social contexts.

### **3.2 Research Methodology**

Research methodology refers to the overall strategy that the researcher adopts to conduct their study (Leedy & Omrod, 2021). According to them, this approach comprises of the principles that inform the research design, providing the researcher with necessary information about how to proceed. It influences the choice of particular tools and techniques for the research, including surveys, interviews or experiments.

In essence, methodology provides a path for the whole research process. It shapes how data is collected, by censuring that the chosen methods align with the research objectives. It also dictates how the data will be analyzed, determining which analytical techniques will be applied to derive meaningful insights. Finally, the methodology informs how the findings will be interpreted, providing a context for understanding the results in relation to the research questions (Leedy & Omrod, 2021). Methodologies are generally classified into qualitative and quantitative approaches, based on the nature of data and type of analysis needed, however, this study will use qualitative approach.

### **3.3 Overview of Qualitative Research**

According to Chinyere and Eze (2023), qualitative research is primarily concerned with exploring feelings, ideas and personal experiences. Its main objective is to gather insights that can lead to the development of testable hypothesis, often conveyed through narrative forms. This approach is particularly useful during the exploratory phases of a study, as it enables researchers to identify patterns and gain fresh perspectives on complex issues (Chinyere & Eze, 2023).

Qualitative research focuses on the subjective interpretations and investigations of societal realities using numerous methods such as in-depth interviews, focus groups and participant's observation, to collect rich descriptive data (Merriam & Tisdell, 2016). These approach allows researchers to engage deeply with participants, fostering an environment where individuals can share their thoughts and feelings in their own words. This emphasis on personal narratives helps uncover the meanings that individuals associate with their experiences, providing valuable context and depth of the findings (Merriam & Tesdell, 2016).

One of the defining features of qualitative research is its non-numerical data collection (Chinyere & Eze, 2023). Rather than relying on statistical analysis, qualitative research often utilizes semi-structured format, which allows for flexibility in responses. This enables researchers to follow up on interesting points raised by participants, leading to a more understanding of subject matter (Chinyere & Eze, 2023).

### 3.4 Research Design

Kouam & William (2024), define research design as a plan that explains how the research will be conducted, what data will be collected, and how it will be analyzed to answer the research questions. In this study, a qualitative research design will be employed, focusing on in-depth understanding and interpretations of participants' experiences regarding indigenous knowledge systems in child health care.

The sampling technique used in this study was that of snowball sampling, which is a non-probability sampling method in which initial participants, known as “seeds”, identified and recruited additional individuals who meet the study's criteria. This process created a chain of referrals, allowing researcher to access populations that might otherwise be difficult to reach (Hair et al., 2020).

In rural areas in Lesotho, many women may not be easily accessible due to geographical challenges, social barriers or even cultural norms (Browne, 2005). Traditional health practices are often shared within tight-knit communities, making it difficult for researchers to find participants who hold valuable indigenous knowledge. By starting with few individuals within a community, snowball sampling enables a researcher to leverage these social networks to connect with other women. This approach ensures that representative sample is reached, capturing the diverse perspectives of those who have firsthand experienced with traditional child health practices (Browne, 2005).

Additionally, snowball sampling facilitates the gathering of rich, contextual data. As participants refer others, one can collect in-depth qualitative data that reflects a broad range of perspectives on indigenous knowledge systems and their contributions to child health. This method enhances the quality of data by allowing a researcher to explore various views within the community, leading to a more understanding of how traditional practices are perceived and utilized. It also enables a researcher to identify common themes and unique insights that may not have been apparent through other sampling methods (Browne, 2005).

### **3.5 Study Area Description Application of Snowball Sampling**

The study was conducted in Nkoeng, a village located within the Maseru district of Lesotho. Nkoeng is characterized by its rural setting, where the traditional health practices are rooted in the local culture. Access to modern healthcare facilities is limited and many families rely on indigenous knowledge systems for child healthcare. The geographical challenges and social norms in this area can make it difficult to reach individuals who possess valuable knowledge about traditional health practices.

### **3.6 Application of Snowballing Sampling**

To effectively gather data in Nkoeng, snowball sampling was employed as the primary sampling technique, and several key steps were followed. First, the researcher began by identifying participants who are knowledgeable in traditional child health practices. Those women were selected based on their reputation within the community, experience and their willingness to share their experiences. In addition, in order to ensure the complete understanding of the topic, efforts were made to explain the study's purpose and ensured that participants were comfortable in sharing their own experiences.

After conducting interviews with those participants, they were asked to refer other people with similar knowledge. This referral process was essential for accessing individuals who might otherwise be difficult to reach due to community social dynamics. As participants referred others, the researcher established relationship and trust within the community. This was vital in encouraging participants to openly discuss their experiences, thereby enriching the qualitative data collected. Through this method, the researcher was able to gather a wide range of perspectives on traditional child health practices. Each new participant brought unique insights, contributing to a comprehensive understanding of how indigenous knowledge systems are perceived and utilized.

### **3.7 Data Collection Techniques**

Data was collected through semi-structured and in-depth interviews, whereby individual's perspectives were extensively explored. Semi-structured interviews were explored using a flexible

set of open-ended questions, allowing participants to elaborate on their thoughts and experiences in detail while also allowing the researcher an opportunity to go deeper for further information into specific areas of interest. Such flexibility was vital as it also encouraged subjects to narrate their narratives in their own words, resulting in rich qualitative data that revealed their true viewpoints (Knott et al., 2022).

Qualitative data was also collected through interviews, using an in-depth interview guide, which developed a comfortable environment where participants were able to open communication that allowed them to provide their beliefs, practices and experiences related to traditional medicine. This type of format allowed for a more personal dialogue, one that enabled the researcher to reach deep insights into the participants' lives which may not have emerged in a more structured setting. The interviewer was actively listened and engaged with participants, following up on interesting points and exploring themes as they arose (Retledge & Hogg, 2023).

Additionally, interviews took place in a setting selected by the participants, which made them feel more comfortable and encouraged them to open up about their experiences. With the participants' permission, every session was recorded in order to guarantee data collection accuracy in data collection to enable a thorough analysis.

### **3.8 Data Analysis**

The data gathered was analyzed using thematic analysis, a method that allows for identification of patterns and themes within participants' narratives (Nameem et al., 2023). This process involved organizing the data systematically to discover repeated themes, providing a profound understanding of the participants' experiences and insights regarding indigenous knowledge systems in child healthcare. Through this analysis, the study aimed to go beyond surface-level findings and delve into meanings and implications of the data, thus, providing a more complete view on the topic.

There are several themes explored in this study. Primarily, the theme of perception of traditional medicine focused on how participants view traditional medicine practices, including their beliefs about effectiveness, safety and cultural significance. Understanding these perceptions is vital because they mold the individual's attitudes towards indigenous knowledge in healthcare and this can persuade acceptance and utilization of those practices within communities.

Secondly, the theme of cultural practices and child health was explored, in particular, specific cultural practices relating to child healthcare, such as remedies, rituals and preventive measures. By analyzing these practices, study highlighted the critical role of culture in shaping health behaviors and beliefs, that is, it revealed how cultural contexts influence the choices made by families concerning child health. This exploration lead to better understanding of the intersection between culture and healthcare.

Additionally, the theme of impact on health outcomes assessed how indigenous knowledge systems influenced health outcomes for children. Participants' narratives were analyzed by identifying both positive and negative impacts, offering a view of the effectiveness of traditional practices. Understanding these outcomes was crucial for evaluating the broader implications of indigenous knowledge in child health care.

Lastly, the theme of challenges and barriers addressed the obstacles faced by participants when utilizing traditional medicine, including lack of resources and conflicts with modern medical practices. By understanding these barriers, this study aimed to identify areas of improvement and support, ultimately enhancing the effectiveness of traditional medicine within the health care system. The main goal of this thematic analysis was to capture the essence of participants' experiences and understanding the role of indigenous knowledge systems.

### **3.9 Research Approach**

This study used phenomenology since it focuses on exploring and understanding the lived experiences of individuals (Hoffding et al., 2022). This approach aims to capture the essence of a specific phenomenon by exploring into how individuals perceive and interpret their experiences (Simply Psychology, 2024).

In the context of this research on traditional practices and remedies on child healthcare, phenomenological research is suitable because it allows for an in-depth exploration of how indigenous knowledge systems influence child healthcare practices. By focusing on the lived experiences of community members and caregivers, this approach aims to uncover the meanings and significance they attribute to indigenous knowledge.

Through in-depth interviews and open-ended questions, this research captured different perspectives of participants, providing insights into how traditional practices and beliefs contributed to child health care in Lesotho. This approach not only honors the voices of community but also highlights the value of indigenous knowledge in achieving health objectives.

### **3.10 Target Participants**

Participants were chosen based on their relevance to the study's focus on traditional healthcare practices. The target group included traditional healers, parents and caregivers. Below are the details of the relevance of the selected participants.

#### **3.10.1 Traditional Healers**

These individuals have extensive knowledge of herbal remedies and cultural practices in child healthcare. Their expertise will provide insights into the methods and beliefs surrounding traditional healing practices.

#### **3.10.2 Parents or Caregivers**

According to WHO (2018), a parent or a caregiver is someone who provides daily care and support for their children, in this case they have firsthand experience using traditional remedies for their children's health issues. Parents and caregivers normally hold cultural practices and beliefs related to traditional herbs that influence their decisions about treating children's ailments (Ngere et al., 2022). Therefore, their perspectives are important for understanding the practical applications and significance of those practices in daily life.

### **3.11 Ethical Considerations**

In conducting this research, had complied with ethical considerations to shield the rights and well-being of all participants. One of the key aspects of this commitment was obtaining informed consent. Participants were furnished with all the details regarding the purpose of the study, its procedures as well as its potential risks, ensuring they make informed decision about their participation.

Another significant consideration in this research was confidentiality. All collected data during the study was safely stored, with measures in place to protect participants' privacy. In other words, data collected was anonymized, ensuring confidentiality for individual responses. Therefore, only combined data was reported, which minimized the risk of identifying any individual participant and maintaining the integrity of their information.

Lastly, all participants were ensured to fair treatment throughout the research process. That is, everyone was treated equally despite their background, and proactive steps were taken to remain neutral in the process. This commitment contributed to an ethical research environment where all participants felt they are valued and included.

## CHAPTER 4

### FINDINGS OF THE RESEARCH

#### 4.0 Introduction

The use of traditional medicines is still a basic aspect of healthcare in rural areas in Lesotho, where access to modern medical facilities is very limited. This chapter delves into the insights gathered from community members with regard to perceptions and experiences of traditional medicines, mainly in the context of child healthcare. By exploring these viewpoints, the study aims to understand how indigenous knowledge systems can contribute to promoting well-being for all children in Lesotho. The layout of the chapter includes, demographic characteristics of the study area, data analysis and interpretation. Finally, the conclusion will be provided.

#### 4.1 Demographic Characteristics

In this study, a total of twenty (20) participants were interviewed, providing a diverse collection of perspectives on traditional child healthcare practices within the community of Nkoeng. Among the participants, there were four men and sixteen women, with ages ranging from fifty-one (51) to eighty-seven (87) years, highlighting the inclusion of both older and more experienced voices in traditional healthcare practices.

Regarding education, eight (8) participants had attended primary school, indicating a level of formal education, while one holds a diploma. The remaining participants have no formal education, reflecting the community's reliance on traditional knowledge transmission. In terms of occupational status, two participants are recognized traditional healers, while many were not formally employed.

## Data Analysis

### 4.2. Basotho Traditional Practices for Child Birth

#### 4.2.0 Introduction

Child care often begins from the point of conception of the child and is provided in the form of antenatal care. Basotho had their traditional antenatal care practices. The participants were therefore, asked to explain these practices.

One participant shared various traditional practices that are employed in preparing women for childbirth. One respondent noted,

*“In Basotho culture, preparing a woman for childbirth involves a variety of traditional practices and remedies known as Pitsa, which is a boiled concoction of selected herbs. These remedies can differ from family to family reflecting localised customs and beliefs. In our case, expectant woman is given Pitsa, a herbal mixture which is tailored to her needs. Some families use soot cooked with wild rhubarb or river pumpkin- Gunnera perpansa, while others may choose medicinal herbs such as Helichrysum caestitium or sorghum. These herbal concoctions strengthen the mother and prepare her body for childbirth. The woman drinks these remedies consistently over a certain period, allowing the beneficial properties to take effect”* (Respondent 4, M.K).

The above narrative reveals a rich mix of traditional practices in Basotho culture that prepare women for childbirth. These practices underscored by the concept “pitsa”, highlight the significance of herbal remedies tailored to individual needs. The emphasis on “pitsa” as a boiled concoction of selected herbs illustrates a deep-rooted knowledge of local plants and its medicinal properties. This customization, depending on familial and localized customs, reflects the community’s understanding of the unique circumstances of each expectant mother, emphasizing a personalized approach to maternal care.

The mention of specific herbs such as *Gunnera perpansa* and *Helichrysum caestitium*, indicates not only the diversity of available natural resources but also the cultural significance attributed to

these plants. This diversity suggests a wealth of knowledge passed down through generations, where families select herbs based on tradition, availability and perceived effectiveness. The assertion that these herbal concoctions strengthen the mother and prepare her body for childbirth points to an integrated understanding of health that combines physical, spiritual and environmental factors.

Another respondent highlighted the diversity of practices within families and the importance of personalized care. She noted,

*“Another traditional practice involves the use of moli, which is administered to help ensure that the child is born without any complications (Respondent 5, M.L).*

The inclusion of “moli” as a practice aimed at ensuring a complication-free delivery highlights the community’s proactive approach to health. This reflects a cultural belief in the importance of preventative measures during pregnancy, supporting the idea that childbirth is not merely a medical event but a cultural milestone that requires preparation and care.

Moreover, the consumption of fermented food such as sour milk or traditional sorghum beer is common. Respondent 3, M.G.L noted,

*“The expectant mother may consume sour milk or small amount of traditional beer. This is thought to help the child develop smooth skin and prevent issues during birth. The nutritional benefits derived from these foods support both the mother and the child in preparation for delivery” (Respondent 1, M.E.K).*

The consumption of fermented foods such as sour milk and traditional beer, further reveals the importance of nutrition in this cultural framework. The fact that these foods contribute to the child’s smooth skin and overall development demonstrates an understanding of dietary impacts on both maternal and fetal health. This aspect of care emphasizes the view of health prevalent in Basotho culture, where physical nourishment is intertwined with cultural practices.

In addition to dietary practices, there are specific rituals taught to be integral to childbirth preparation. Pregnant women are always advised to engage in certain behaviours. As noted by one of the participants:

*“As the woman approaches her due date, particularly in the later months of pregnancy, she is advised to sit in a bucket of hot water every night. This practice relaxes the body and prepare it for labour, promoting a smoother delivery”* (Respondent 2, M.A.K).

The ritual of sitting in hot water as the due date approaches illustrates a culturally ingrained approach aimed at relaxation and preparation for labour. This practice not only serves a physical purpose but also encapsulates the emotional and psychological readiness for childbirth, highlighting the importance of rituals in the maternal experience.

#### **4.2.2 Norms and Taboos**

Participants highlighted two key behaviors that expectant mothers are encouraged to follow to ensure the health of both mother and child. One notable practice involves performing specific rituals when attending social events. A participant explained,

*“In Basotho culture, when attending events such as weddings, funerals or any kind of event, a pregnant woman is required to perform certain rituals. Upon entering the venue, she must pick up the soil with her fingers at the gate where most people enter, and smear it to her head. This act brings protection for both the mother and the child”* (Respondent 6, M.M).

This narrative reveals the community’s collective belief in the spiritual dimensions of health. The act of picking up soil and smearing it on the head functions as a protective gesture, symbolizing a connection to the earth and an invocation of safety for both mother and child. This ritual highlights the importance of community involvement in maternal health, suggesting that childbirth is not just an individual experience but a communal concern that necessitates collective support and protective practices.

Another respondent emphasized the importance of environmental factors in pregnancy. She stated,

*“Pregnant women are advised against sitting in direct sunlight, especially while at the door of the house. Being directly exposed sunlight can negatively affect the health of the child. Instead, they should seek shade and comfort to promote well-being during pregnancy”* (Respondent 2, M.A.K).

The advice against sitting in direct sunlight reflects an acute awareness of environmental factors that can impact pregnancy. This recommendation is rooted in local knowledge that associates direct sunlight exposure with potential negative health outcomes for the child. The emphasis on seeking shade indicates an approach to maternal health, demonstrating a cultural understanding of how external conditions can affect well-being during pregnancy.

Dietary practices also play a crucial role in the health of pregnant women. So, there are dietary restrictions that pregnant women are expected to follow. As stated by respondent 6,

*“A pregnant woman is restricted to certain foods such as tripe made from cooking the small intestines of sheep, goats or cows, and eggs”* (Respondent 6, M.M).

The mention of specific dietary restrictions reveals a sophisticated understanding of nutrition within Basotho culture. These restrictions likely stem from historical observations about the effects of various foods on maternal and fetal health. By adhering to these dietary norms, expectant mothers align themselves with culturally established practices that prioritize the health and development of their children.

#### **4.2.3 Integration of Local Knowledge with Modern Healthcare**

Participants expressed two ways how local knowledge could fit with modern healthcare practices. She indicated,

*“Our ways can help the doctors. If they know what we do, they can understand us better. This means if healthcare providers are aware of the traditional*

*remedies that families use, they can offer guidance on how to combine these practices safely with modern treatments* (Respondent 7, M.J.M).

The statement highlights the desire for healthcare providers to engage with and understand traditional practices. This openness suggests that incorporating traditional knowledge can improve the relationship between patients and healthcare professionals. When doctors are aware of the remedies families use, they can provide more relevant and tailored medical advice, ensuring that treatments do not conflict with cultural practices. This integration enhances patient's comfort and compliance, as families feel respected and understood in their cultural context.

Another focus was on preventive health through traditional practices,

*“We take care of ourselves with what we eat and how we live, this helps us stay well”* (Respondent 7, M.J.M).

The recognition that traditional practices contribute to preventive health indicates an alignment with modern healthcare attitudes, which increasingly prioritize well-being. This idea emphasizes an approach to health that resonates with contemporary preventive medicine. The also perspective suggests that the Basotho community possesses valuable insights into health maintenance that can complement medical interventions, highlighting the potential for a more integrated health model.

#### **4.2.4 Suggestions for Collaboration Improvement**

There has been an emphasis on the importance of training programs for healthcare providers to facilitate the integration of local knowledge with modern healthcare. They stated,

*“I would like to see more training programs for healthcare providers that include education about traditional medicines and practices”* (Respondent 9, M.L.K).

The call for more training programs that include education about traditional medicines highlights a critical gap in current healthcare practices. By equipping healthcare providers with knowledge of local remedies and cultural competence, leading to more effective communication and care.

This training can foster mutual respect and understanding, which allows healthcare providers to better accommodate patient's beliefs and practices within medical treatments.

In addition to training, respondent 9 suggested,

*“Besides that, creating a community platform where families can share their experiences and successes with both traditional and modern treatments would be beneficial. This could take the form of community gatherings or support groups that encourage dialogue and learning”* (Respondent 9, M.L.K).

The suggestion to create community platforms where families can share their experiences with both traditional and modern treatments underscores the importance of dialogue and community engagement. Such platforms could facilitate knowledge exchange, allowing families to learn from one another and discover effective practices. Community gatherings or support groups can also strengthen social bonds, creating a supportive environment where expectant mothers feel empowered and informed.

Another respondent highlighted a critical role of community health workers who are familiar with both traditional and modern practices. She remarked,

*“Having health workers who are familiar with both traditional and modern practices would provide guidance on the safe use of traditional remedies alongside modern treatments, ensuring families receive a proper care. Finally, I hope to see more collaboration between local health authorities and traditional healers”* (Respondent 11, M.E.L).

This narrative suggests a practical approach to bringing the gap between these two systems. These workers can serve as vital links, guiding families on the safe use of traditional remedies alongside modern treatments. Their dual knowledge can improve the effectiveness of healthcare delivery, ensuring that families receive comprehensive care that respects their cultural practices.

The hope for increased collaboration between local health authorities and traditional healers reflects an understanding of the importance of integrating local knowledge into the formal healthcare system. Such collaboration can validate traditional practices while providing a framework for safe and effective healthcare delivery. This partnership can boost develop trust in the healthcare system, encouraging families to engage with both traditional and modern practices.

## **4.3 Perceptions of Rural Women Toward the Use of Traditional Medicines for Child Ailments**

### **4.3.0 Introduction**

Understanding the views of rural women regarding traditional medicine is essential for comprehending their healthcare choices. This section explores their perception in using traditional medicines.

#### **4.3.1 Views on Using Traditional Medicines for Treating Children’s Sickesses**

Respondent 10 expressed a very positive view regarding the use of traditional medicines for treating children’s illnesses. She stated,

*“I have a very positive view of using traditional medicines for treating children’s sicknesses. In my experience, these remedies have been effective for ailments such as coughs, fever and many more. I appreciate that traditional medicines often come from natural resources, which makes me feel more comfortable about their use. They are part of our culture and history, passed down through generations and I believe that they hold a wealth of knowledge that has been validated by time”* (Respondent 10, M.L.L).

This narrative highlights a strong belief in the effectiveness of traditional remedies. By stating that these remedies are derived from natural resources, the participant expressed a sense of comfort and confidence in their use. This connection to nature enhances the perceived legitimacy of traditional medicines, aligning with a growing preference for natural health solutions in various cultures.

Another respondent elaborated on the empowering aspect of using traditional herbs, noting,

*“using traditional herbs allows me to take an active role in my child’s health care. I feel empowered when I prepare a remedy from herbs I learned about from my family”* (Respondent 8, T.L).

*“I see traditional herbs as a vital part of our approach to health, complementing modern methods rather than replacing them”* (Respondent 8, T.L).

The above narratives indicate empowerment as an important aspect of the use of traditional medicines. The respondent articulated how preparing remedies from familial herbs allows her to take an active role in her children’s healthcare, providing her with a sense of agency and control over their well-being. This active participation is particularly significant in rural settings where access to modern healthcare is limited. The ability to utilize knowledge passed down from family members not only proves confidence in their caregiving abilities but also reinforces the importance of maternal roles within the family and community. By actively engaging in healthcare practices, women feel empowered to make informed decisions that directly impact their children’s health outcomes.

Furthermore, the perception that traditional herbs complement modern medicine rather than replace it indicates a complete understanding of health care among these women. They advocate for an integrated approach that recognizes the strengths of both traditional and modern practices. This perspective suggests that women do not view these systems as mutually exclusive, rather as parts of a comprehensive health strategy. By combining the preventive and benefits of traditional remedies with the advancements of modern healthcare, mothers are better equipped to address their children’s health needs.

#### **4.3.2 Reasons for Choosing Traditional Medicines Over Modern Healthcare**

Respondents 12 and 13 articulated several reasons for preferring traditional herbs over visiting a hospital or clinic. They explained,

*“First and foremost, traditional remedies are more accessible and affordable. In many cases, I find the necessary herbs in my own garden or nearby fields, which saves me the cost of transportation and medical fees that can be burdensome, especially for a simple ailment. When my child has a minor sickness, I prefer to start with what know works from our traditional practices”* (Respondent 12, M.T).

*“I trust the remedies that my family has used for generations and I have seen their effectiveness firsthand. Going to a clinic can often feel impersonal and intimidating, especially if the healthcare providers do not understand our cultural backgrounds or practices”* (Respondent 13, M.K).

Despite their preference for traditional medicine, respondent 13 acknowledged that there are circumstances where hospital care becomes necessary. She stated,

*“If my child shows alarming symptoms that do not improve with traditional remedies, I recognize the importance of professional medical intervention. In those cases, I will seek medical help, as I want to ensure my child receives the best possible care”* (Respondent 13, M.K).

This statements from respondent 12 and 13 reveal a clear preference for traditional medicines among rural women, driven by practical considerations such as accessibility, affordability and a deep-rooted trust in cultural practices. These factors underscore a significant reliance on traditional remedies for child ailments, highlighting a pragmatic approach to healthcare that aligns with their everyday realities.

Respondent 12 emphasizes the practical benefits of traditional remedies, noting their accessibility and affordability. The ability to source necessary herbs from one’s own garden or nearby fields eliminates transportation costs and medical fees, making traditional medicine a viable option for families facing financial constraints. This practical consideration is particularly important in rural areas where healthcare facilities are distant. By starting with familiar remedies for minor illnesses, mothers can manage their children’s health effectively while minimizing economic burdens. this approach reflects a resourceful and positive attitude towards health care, prioritizing what is readily available and cost-effective.

Respondent 13 highlights the emotional and cultural dimensions of choosing traditional remedies, expressing a strong sense of familiarity and trust. The continuity of using remedies that have been passed down through generations fosters a deep connection to cultural heritage and reinforces confidence in their effectiveness. The mention of clinics feeling impersonal and intimidating points to a common barrier that many individuals face within formal healthcare systems. When healthcare providers do not resonate with the patient’s cultural backgrounds, it can lead to discomfort and

distrust, making traditional remedies more appealing. This sentiment underscores the importance of cultural competence in healthcare, as it can significantly influence patient choices and outcomes.

While both respondents express a preference for traditional remedies, respondent 13 also acknowledges the importance of seeking professional medical intervention when necessary. This balanced perspective shows an understanding of health care that does not dismiss modern medicine but rather complements it with traditional practices. The recognition of symptoms that warrant professional help indicates a responsible approach to child healthcare, where traditional and modern methods coexist. This willingness to adopt and seek appropriate care when conditions do not improve demonstrates a commitment to ensuring the best outcomes for their children, highlighting the potential for a collaborative approach to health that respects both traditional knowledge and modern medical practices.

## 4.4 Key Traditional Medicines Used in the Treatment of Child Ailments

### 4.4.0 Introduction

This section outlines the specific traditional remedies employed by communities in addressing child ailments and how they are prepared, their decision making in selecting those remedies for specific ailments, as well as challenges communities face in acquiring those medicinal plants.

- Soil
- *Dianthus bascuticus*
- *Hypoxis hemerocallidea*
- African wormwood
- *Hermannia depressa*
- Sheep feces
- Canabbis seeds
- *Gazania krebsiana*
- *Curculigo pilosa*
- *Prunus persica*

Respondent 6 shared her knowledge as a traditional healer on the preparation of traditional medicines. She explained,

*“Many traditional medicines are prepared by cooking specific herbs or plants. For example, remedies like hypoxis hemerocallidea, gazania krebsiana and canabbis seeds are boiled or simmered in water. Once cooked, the resulting infusion is strained, and the child is given the liquid to drink. This method allows the beneficial properties of the herbs to be extracted effectively”*  
(Respondent 6, M.M).

This narrative underscores the importance of culinary methods in extracting the healing properties of local plants. By boiling or simmering those herbs, practitioners create effective infusions that

retain the beneficial compounds necessary for healing. This method reflects a deep understanding of both the plants and the cooking techniques that facilitate medicinal properties, demonstrating a practical application of local knowledge. The emphasis on preparing remedies in this way highlights the commitment to using natural resources effectively, ensuring that the remedies are both powerful and culturally relevant.

In addition to cooking, respondent 14 highlighted the unique practice of using smoke inhalation for certain remedies. He noted,

*“Some remedies are prepared by burning certain plants such as peach tree. The smoke produced is inhaled by the child, which can help alleviate respiratory issues. This method is often used for conditions related to the chest, as the inhalation of herbal smoke can provide relief from congestion and promote easier breathing”* (Respondent 14, T.K).

The practice of smoke inhalation described by respondent 14 introduces an innovative approach to treating respiratory issues. By burning specific plants and allowing children to inhale the smoke, this method addresses conditions like congestion in a unique way. This reflects an adoptive use of available resources to tackle health challenges, emphasizing the flexibility of traditional medicine in responding to specific ailments. The effectiveness of this method showcases the traditional healer’s knowledge of herbal properties and their applications, further validating the role of these practices in community health.

Another respondent further elaborated on the use of topical applications, stating,

*“Certain medicines are applied externally. For example, some remedies are smeared on the child’s nose or other affected areas. These topical applications can help with headaches or other skin disease issues. The medicine is often made from crushed herbs mixed with oils or fats to enhance absorption through the skin”* (Respondent 5, M.L).

*“In some cases, traditional medicines are administered through small cuts made with a razor. This technique is generally reserved for specific conditions where the application of medicine directly into the body is deemed necessary” (Respondent 16, P.M).*

Respondent 5’s insights into topical application reveal another dimension of traditional healing, where remedies are applied externally to address headaches or skin diseases. The use of crushed herbs mixed with oils or fats improves absorption through the skin, indicates an understanding of both herbal properties and human body’s responses. Additionally, respondent 16’s mention of administering medicine through small cuts shows a more invasive approach that is reserved for specific conditions, demonstrating a broad understanding of when and how to apply these remedies effectively. This technique reflects a depth of knowledge that goes beyond basic herbal preparation, showcasing the traditional healer’s skill in tailoring treatments to individual health needs.

Finally, respondent 16 emphasized the importance of making remedies more palatable for children. He explained,

*“For particular remedies like krebsiana, the prepared herbal infusion is mixed with mild before being given to the child” (Respondent 16, P.M).*

The emphasis on making remedies more palatable as noted above, highlights the importance of ensuring that children can comfortably consume these medicines. Mixing herbal infusion with mild ingredients demonstrates an understanding of child-specific needs and preferences, which is crucial for compliance and effectiveness. This consideration reflects a compassionate approach to healing, recognizing that the acceptance of a remedy can impact its efficacy.

#### 4.4.2 Decision-Making in Selecting Traditional Medicines for Specific Illnesses

A systematic approach was outlined when selecting traditional medicines for specific illnesses, Respondent 17 noted,

*“The first step is to identify the symptoms of the illness. I take note of what the child is experiencing, whether it is a fever, cough, stomachache or another ailment. Understanding the symptoms helps narrow down potential remedies. Next, I draw upon my own knowledge of traditional herbs, which I have learned from my family and community. I consider which herbs have been traditionally used for similar symptoms. If I am uncertain about which remedy to use, I often consult with elders in the community. They have a wealth of experience and can offer valuable insights into what has worked for others in similar situations. Their guidance can help me make a more informed decision.”* (Respondent 17, M.A.L).

Respondent 17 outlines a systematic approach to selecting traditional medicines that emphasizes careful observation and cultural knowledge. The first step involves identifying the symptoms the child is experiencing; such as fever or cough. This focus on symptom identification mirrors modern medical practices and ensures that the selected remedy is appropriate for the specific ailment, reflecting a logical approach of healing.

The respondent’s reliance on personal knowledge, gained from family and community traditions highlights the cultural significance of these practices. By drawing on remedies historically used for similar symptoms, the healer honors ancestral wisdom while reinforcing community connections. This aspect underscores the idea that traditional medicine is a living practice enriched by collective experiences.

Finally, the practice of consulting with elders demonstrates an appreciation for communal wisdom. Elders bring valuable insights that can guide decision-making, especially in uncertain situations. This collaboration not only increases the effectiveness of treatment but also fosters respect for the knowledge passed down through generations, showcasing the importance of community in traditional healing.

### 4.4.3 Challenges on Acquisition of Herbs

Respondent 7 again addressed the challenges in sourcing traditional herbs, noting,

*“Many herbs that we rely on today are not readily available in our yards as they once were due to environmental changes and overharvesting. As a result, families often find themselves purchasing these remedies from local markets rather than gathering them from our own gardens or fields”* (Respondent 7, M.J.M).

The respondent points out to environmental changes as a primary factor affecting the abundance of traditional herbs. This include factors such as climate change, urbanization and habitat distraction, which disrupt the natural growth of these plants. The declining availability of herbs in local yards indicates a shift in the landscape that directly affects traditional healing practices, making it harder for families to access the remedies they have relied on for generations.

The mention of overharvesting indicates that the demand for traditional herbs may have outpaced their natural regeneration. This unsustainable practice not only threatens the availability of these herbs but also raises concerns about the long-term viability of traditional medicines. As families increasingly depend on local markets for remedies, the reliance on commercial sources can lead to higher costs and potential quality issues, as market herbs may not always meet the standards of freshly harvested ones.

The transition from gathering herbs in gardens to purchasing them in markets represents a broader shift in traditional practices. This change diminishes the cultural connection to herbal medicine as the act of gathering and preparing remedies is often steeped in familial and community traditions. The loss of this connection can impact the transmission of knowledge and practices related to traditional healing.

## 4.5 Key Determinants of the Use of Traditional Medicines in the Treatment of Child Ailments in Lesotho

### 4.5.0 Introduction

The choice to use traditional herbs for treating child ailments is influenced by a variety of factors, which will be discussed below.

Central to this choice is a profound trust in those remedies, they even highlighted specific instances. Respondent 5 noted,

*“I choose traditional medicines for my child’s sickness primarily because I have a deep trust in the remedies that have been passed down through generations in my family. These medicines have been used by my ancestors and I have observed their effectiveness in treating common ailments. Over the years, I have personally witnessed how these remedies work, which reassures me of their value. For example, when my child has fever, I know exactly which herbs to use and I have seen how quickly they can help alleviate the symptoms”* (Respondent 5, M.L).

*“Cultural beliefs also play an important role in my decision-making process. In our community, traditional medicine is not just about treating illness, it is viewed as an approach to health and well-being. There is a strong belief that these remedies are safer because they come from our natural environment, and they do not contain the chemicals often found in modern medicines. This connection to nature is important to us, as it aligns with our cultural practices and values. Many people in my community have a profound respect for the earth and the plants it provides, because these natural remedies can heal without the side effects which are often associated with pharmaceuticals. This cultural perspective reinforces my preference for traditional medicines, as they feel like a part of my heritage and identity”* (Respondent 5, M.L).

The above reveals that the use of traditional medicines in Lesotho is shaped by a union of trust. This trust is rooted in personal experience and familial history, where the observed effectiveness

of these remedies fosters confidence in their use. The respondent's familiarity with specific herbs shows how personal observation reinforces belief in traditional practices. This trust is crucial as it directly impacts the decision-making process regarding child health care.

Cultural belief also shapes the perception of traditional medicine within the community. Respondent 5 highlights that traditional remedies are viewed not merely as treatments but as integral to health and well-being of the children. This cultural perspective influences the acceptance of these remedies as they align with community values. The idea that traditional remedies are considered safer because they originate from the natural environment reflects a broader cultural respect for nature and its resources. Therefore, that contribute to a sense of identity and heritage, reinforcing the preference for traditional over modern medicines.

Furthermore, the connection to nature is vital in the rationale for choosing traditional remedies. Respondent 5 emphasized that these remedies are perceived as more natural and less harmful than modern pharmaceuticals, which are often associated with chemicals and side effects. This viewpoint resonates deeply within the community, where respect for the earth and its healing plants is paramount. The alignment of traditional medicine with environmental values strengthens its appeal, as it embodies an approach to health that respects both human and ecological well-being.

#### **4.5.1 Influence of Family or Community's Opinion Over the Choice of Medicine**

Respondent 9 vividly illustrates the profound impact of family and community on their healthcare decisions, indicating how these influences create a strong support system that nurtures confidence in traditional remedies. She states,

*“My family's and community's opinions influence my choice of medicine, as they provide a strong support system in my health decisions. If my family supports the use of traditional medicines, it gives me the confidence to trust in those choices. For instance, my mother has always encouraged me to use remedies that she knows work best based on her past experiences. Her guidance is invaluable, as I often turn to her for advice when my child is unwell. This*

*generational knowledge creates a bond and a sense of continuity, reinforcing my belief in the effectiveness of traditional treatments” (Respondent 9, M.L.K).*

*“In our community, there is a widespread respect for traditional healers and the knowledge they possess. Many people prefer traditional treatments because they have seen their effectiveness over generations. This collective belief makes me feel more comfortable using these remedies, especially for everyday health issues. I often hear discussions among community members about the benefits of traditional medicine, which reinforces my choices” (Respondent 9, M.L.M).*

Respondent 9 reveals the strong support system provided by family when making health decisions. The encouragement from family members, particularly a mother with experience in traditional remedies, fosters confidence in using these treatments. This support not only validates the choice to use traditional medicine but also highlights the importance of trusted relationships in healthcare decisions. The reliance on generational knowledge creates a sense of continuity and connection to past practices, highlighting the effectiveness of traditional treatments based on personal anecdotes and shared experiences.

Apart from that, the broader community plays an important role in shaping attitudes towards traditional medicine. Respondent 9 notes the widespread respect for traditional healers and collective belief in the efficacy of their remedies. Such communal endorsement creates a comfortable environment for individuals to choose traditional treatments. The respondent’s reference to discussions within the community about the benefits of traditional medicine shows how shared beliefs can validate personal choices, promoting a collective identity centered around cultural healing practices

Then interplay between family and community opinions strengthens the choice of traditional remedies. When both spheres align in their support for these treatments, it builds up on individual’s conviction and trust in traditional medicine. This dynamic illustrates how cultural practices and beliefs are upheld through social networks, ensuring that traditional healing remains a vital path of children’s healthcare.

#### **4.5.2 Impact of Financial Situation on Medicine Choices**

Respondent 6 acknowledges that their financial situation does impact their ability to use traditional medicines, but in a manner that challenges common assumptions. Rather than hindering access to traditional remedies, financial constraints actually make them a more sustainable option.

*“Yes, my financial situation does affect my ability to use traditional medicines, but in a different way than you might think. Traditional medicines are generally more affordable and accessible compared to modern treatments. In our community, we often rely on plants and herbs that grow in our surroundings, which means we don’t have to spend a lot of money to treat minor ailments. For instance, if my child has ear infection, I can easily find herbs in my garden or nearby fields to make a remedy”* (Respondent 6, M.M).

The respondent indicates that financial constraints do affect their ability to access medical treatments, but in a positive way for traditional medicines. Traditional remedies are portrayed as more affordable and sustainable compared to modern pharmaceuticals. This affordability stems from the reliance on locally available plants and herbs which reduces the need for costly purchases. This perspective highlights the economic advantage of traditional medicine, particularly in communities where financial resources may be limited.

Respondent 6 also emphasizes that traditional medicines often utilize resources readily available in the environment, such as herbs from gardens or nearby fields. This accessibility makes it easier for families to treat minor ailments without incurring expenses. The ability to source remedies from one’s surroundings not only alleviates financial burdens but also empowers individuals to take charge of their health care using familiar, natural resources.

#### **4.5.3 Challenges in Accessing Traditional Medicines**

Respondents outlined several interconnected challenges faced when trying to obtain traditional medicines, primarily revolving around availability, sustainability, commercialization and knowledge transmission.

Availability stands out as a pressing issue. The respondent clearly articulates,

*“Yes, I do face several challenges when trying to obtain traditional medicines. One of the main challenges is the availability of certain plants or herbs, especially if they are out of season or if the weather has not been conducive for their growth. For example, some herbs that are effective for treating coughs might not be readily available during dry seasons, which forces me to seek alternatives”* (Respondent 11, M.E.L).

This highlights vulnerability in traditional medicine practices, where reliance on specific environmental conditions can directly affect health outcome. Therefore, this emphasizes the fragility of relying on natural resources that are subject to seasonal and climatic variations.

The challenge of sustainability emerges in the narrative. The respondent 4 points out,

*“Another significant challenge we face when trying to access these herbs is the overharvesting of medicinal plants by traditional healers and others in the community. As the demand for these remedies has grown, some traditional healers have begun to harvest herbs and plants without ensuring their replacement. This practice led to a noticeable decline in the availability of certain medicinal plants in our environment. I have noticed that herbs that were once abundant in our fields are becoming increasingly rare. Many healers, in their effort to meet the needs of their patients, children for example, may prioritize immediate access to these plants over conservative harvesting practices. This lack of consideration for the long-term health of our local plants has a direct impact on our ability to the remedies that have been trusted to find the remedies that have been trusted for generations”* (Respondent 4, M.K).

Overharvesting of these herbs threatens the immediate availability of these herbs but also raises ethical questions about the practices of those who harvest them. Also, the observation that “herbs that were once abundant in our fields are becoming increasingly rare” serves as a stark warning about the long-term consequences of unsustainable practices. The community’s health is

intricately tied to the health of its natural environment, and without a commitment to sustainable harvesting, future generations may find themselves lacking these essential resources.

Another respondent says,

*“There are individuals in our community who are harvesting these plants solely for resale. The rising interest in traditional medicine has created a market where certain herbs are highly sought after, not just for personal use but for profit. This commercialization can lead to the depletion of vital resources, as those harvesting for resale may not adhere to sustainable practices. They often prioritize quantity over quality, taking from the land without regard for the future availability of these plants. As a result, many of us are left struggling to find the necessary ingredients for our traditional remedies. This scarcity can be frustrating and disheartening, especially when we rely on these medicines for our children’s health. The difficulty in accessing traditional remedies not only affects our immediate health care options but also threatens the transmission of traditional knowledge. When younger generations see their elders struggling to find these plants, it may lead to a disconnection from our cultural practices and a diminished appreciation for the wisdom of traditional medicine”* (Respondent 17, M.A.L).

Commercialization adds another layer of complexity to the challenges, and this transition not only risks depleting the resources needed for personal and communal health but also threatens nature in a way that undermines its essential value. The main concern here is prioritizing economic gain over ecological responsibility, which threatens to erode the traditional knowledge that sustained the communities for generations.

## **4.6 Preservation and Transmission of Traditional Knowledge**

### **4.6.0 Introduction**

The preservation and transmission of traditional knowledge regarding health practices is important for maintaining cultural heritage. This section explores how the knowledge about traditional medicines is passed down through generations. Key aspects include how individuals learn about these herbs, methods used to teach children about these remedies and the changes observed in knowledge transmission compared to previous generations. Additionally, the challenges faced in keeping this knowledge alive and strategies for addressing these challenges are discussed.

### **4.6.1 Sources for Traditional Medicines and Health Practices**

The respondent 8 expresses how their understanding of traditional medicines and health practices is deeply rooted in familial teachings. She reflects on oral traditions passed down from their parents and grandparents, emphasizing that,

*“Growing up, my mother would often share anecdotes about the remedies her own mothers used when she was a child. These stories were not just about the herbs but also about the circumstances in which they were used, which helped me understand their importance. I remember sitting with my grandmother as she prepared various mixtures, explaining each step and the reason behind using specific plants. This hand-on learning experience was enriching and fostered a deep respect for our cultural heritage”* (Respondent 8, T.L).

*“Other community members also played a vital role in my education about traditional health practices. Neighbors and friends would share their experiences, creating a communal knowledge base. For instance, if someone found success with a specific herbal treatment for a child’s cough, they would share it during gatherings. Through this interactions, I learned practical aspects of traditional medicines as well as values and beliefs that underpin our practices”* (Respondent 8, T.L).

The respondent's reflections on learning from their mother and grandmother shows how familial teachings are central to the understanding of traditional remedies. The stories shared by the mother about remedies used by previous generations provides contexts and significance to the herbs themselves. This narrative approach not only conveys practical knowledge but also embeds historical context within the learning process. The hands-on experience of preparing mixtures alongside the grandmother fosters a deep respect for the cultural heritage and reinforces the significance of learning through direct engagement.

Respondent 8 also puts emphasis on the role of community members in shaping their understanding of traditional health practices. The sharing of experiences among neighbours and friends creates a communal knowledge base that enriches individual learning. This collective approach highlights the importance of social networks in the transmission of traditional knowledge. The example of sharing successful herbal treatments during community gatherings shows how communal interactions strengthen the practical and cultural aspects of traditional practices.

This means that, the dual sources of knowledge, being familial and communal knowledge, illustrates that understanding traditional medicines is not merely about the herbs themselves but also involves the values and beliefs that underpin their use. This integration ensures that traditional practices are not only preserved but also adopted and enriched through shared experiences and collective wisdom.

#### **4.6.2 Ways of Teaching Children About Traditional Medicines**

The respondent highlights two approaches to teaching their children about traditional medicines, emphasizing the role of elders and formal education in preserving this cultural knowledge. She said,

*“Elders and traditional healers are incredibly important in sharing this knowledge. They serve as the guardians of our cultural practices and often have a wealth of information that is invaluable. In our community, children are encouraged to spend time with these elders, listening to their stories and*

*learning from their experiences. When we visit a traditional healer, I take the opportunity to discuss various ailments and the significance of each. These interactions help my children appreciate the wisdom that comes with age and experience, reinforcing the importance of our traditional knowledge”* (Respondent 3, M.G.L).

*“In some cases, families may choose to invest in formal education by paying knowledgeable individuals, often with livestock like cows, to teach their children about traditional practices. This batter system reflects the cultural significance of both the knowledge being shared and the resources involved. By compensating someone who is well-versed in traditional medicine, families ensure that their children receive quality instructions from experienced mentors who can provide insights to go beyond what is written in books”* (Respondent 3, M.G.L).

#### **4.6.3 Changes in Knowledge Transmission Over Generations**

Respondents collectively highlighted changes in how traditional knowledge is passed down compared to their childhood. Respondent 17 indicated,

*“Yes, I have noticed significant changes in how traditional knowledge is passed down compared to when I was a child. When I was growing up, there was a gathering known as “Thakaneng”, which occurred during the winter months. Girls and boys would spend time in separate groups with older women and men, respectively. This practice serves as a rite of passage and provides a structured environment for imparting essential knowledge about our cultural heritage, including traditional health practices”* (Respondent 17, M.A.L).

*“During Thakaneng, boys and girls learned how to identify various medicinal plants, their uses and the methods for preparing remedies. Older women shared their wisdom and experiences, teaching the younger generation about the healing properties of different herbs, how to properly harvest them and the*

*importance of respecting nature. This allowed girls to connect with their culture deeply and understand the significance of maintaining these traditions”* (Respondent 17, M.A.L).

Respondent 17 reflects on the traditional gatherings known as “Thakaneng”, highlighting its structured approach to imparting cultural knowledge. This rite of passage for boys and girls underscores the importance of communal learning and mentorship from elders. The separation of genders suggests a tailored approach to education, allowing for focused discussions on gender-specific roles and responsibilities within the cultural context. The organized nature of these gatherings fosters a sense of belonging and continuity, developing community bonds and cultural identity.

The respondent also emphasized the practical aspects of learning during Thakaneng, where children learn to identify medicinal plants and understand their uses. This hands-on experience encourages a deep connection to nature and instills respect for the environment. The emphasis on harvesting methods and ethical considerations reflects an approach to knowledge transmission, where the focus extends beyond mere usage to include sustainable practices. This nurturing of respect for nature is essential for the preservation of traditional knowledge and practices.

Responded 19 indicates,

*“Storytelling also played a huge role in teaching children about traditional medicines. I share stories from my own childhood, recounting how my mother and grandmother used certain remedies and the lessons they imparted. These narratives not only keep the knowledge alive but also emphasize the values of respect for nature and the importance of community health”* (Respondent 19, M.A.M).

*“Today, however, I see that many younger people are increasingly focused on modern lifestyles, which has significantly altered how they learn about traditional practices. Many children and teenagers spend considerable time on social media platforms where they encounter an information about some of the*

*traditional medicines. While some of this content can be informative and valuable, it often lacks the personal connection and depth that comes from direct, hands-on learning with elders” (Respondent 19, M.A.M).*

Respondent 19 discusses the significance of storytelling in teaching traditional medicines. The act of sharing personal narratives from one’s childhood serves as a vital mechanism for keeping knowledge alive. These stories not only provide practical information about remedies but also convey the cultural values associated with them, such as respect for nature and community health. Storytelling boosts emotional connections to the knowledge, making it more memorable and impactful for younger generations.

The respondent notes a marked shift in the focus of younger people towards modern lifestyles, especially with the rise of social media. This shift indicates a cultural transition where traditional practices may be overshadowed by contemporary influences. While social media can disseminate information widely, it often lacks the depth and personal connection that comes from direct, hands-on learning with elders.

Respondent 18 added,

*“On these platforms, individuals with knowledge about traditional remedies post videos explaining their importance and usage. While this can be an effective way to reach a broader audience, it can also lead to superficial understanding of these practices. Children may find it easier to scroll through quick clips rather than engage in meaningful conversations with their parents or grandparents who can share not just the “how” but also the “why” behind these traditions” (Respondent 18, M.L.L).*

*“Other children, on the other hand, still learn from their parents and grandparents, however, the frequency of those interactions has diminished. This change is largely due to the influence of modern education and the availability of information online, which can sometimes overshadow the oral traditions that have been our way of life” (Respondent 18, M.L.L).*

Respondent 18 also highlights the role of social media in the transmission of traditional knowledge, noting that while it can broaden outreach, it risks fostering a superficial understanding of practices. The convenience of scrolling through quick clips can lead to passive consumption of information, lacking the engagement and critical thinking that comes from meaningful conversations with elders. This observation shows the importance of intergenerational dialogue in conveying not just the “how” but also the “why” behind traditional medicines.

The respondent also acknowledges that while some children still learn from their parents and grandparents, the frequency of these interactions has decreased. This decline can be attributed to the influence of modern education and the overwhelming availability of online information, which may overshadow oral traditions. This observation raises concerns about the potential loss of cultural continuity and the depth of understanding that comes from experiential learning. The diminishing role of oral traditions in favor of modern educational methods reflects broader societal changes that may contribute to a disconnect from cultural heritage.

#### **4.6.4 Causes of Change on Transmission of Knowledge**

Respondent 2 indicates,

*“Several factors have contributed to these changes. As I have mentioned, the increasing access to modern technology has shifted priorities. With the rise of smartphones, tablets and the internet, children today are more connected to the digital world than ever before. Social media platforms provide a lot of information to their fingertips. While this can be beneficial in some respects, it often shifts children’s priorities away from engaging in traditional practices to consuming content online. Instead of spending time with family members learning about herbal remedies and cultural rituals, many young people are captivated in the latest trends or entertainment, leading to a disconnection from their cultural roots”* (Respondent 2, M.A.K).

Respondent 2 articulates a critical shift in engagement due to the presence of modern technology. This shift represents a fundamental change in how knowledge is accessed and valued. The

immediate availability of information online creates a paradox: while it democratizes access to knowledge, it also promotes shallow engagement. Children are increasingly attracted to the instant gratification of digital content, which can diminish the time and motivation to engage in traditional practices that require patience, commitment and personal interaction. This shift leads to a weakened cultural identity, as the richness of familial traditions and hand-on learning is sacrificed for passive consumption.

Respondent 15 discusses how the pursuit of western education and modern careers contributes to the perception that traditional knowledge is less relevant. She states,

*“Additionally, children are encouraged on pursuing western education and modern careers. This shift is often seen as the pathway to success and upward mobility, creating pressure for children to prioritize academic achievements over learning traditional practices. As a result, many young people may view traditional knowledge as less relevant in a rapidly changing world. This focus on formal education has led to the detachment from the hands-on, experimental learning that is essential for understanding and appreciating traditional medicines. While children are encouraged to chase modern careers, they may unintentionally overlook the value of their cultural heritage and wisdom embedded in it”* (Respondent 15, M.E.M).

This statement highlights a systemic issue where western educational models are prioritized over traditional knowledge systems. This reflects broader societal values that equate success with formal education and modern careers, potentially marginalizing indigenous knowledge. The pressure to achieve academic success creates a hierarchy where traditional practices are seen as less valuable or relevant, which risks eroding the cultural fabric. This shift not only affects individual learning but also threatens the community’s ability to pass down essential cultural practices, as the younger generation become less engaged in their heritage.

Apart from that, Respondent 19 addresses the impact of globalization on perceptions of traditional knowledge. She states,

*“Globalization has also played a key role in changing perceptions of traditional knowledge. The influx of new ideas, practices and products from around the world has created a perception that modern methods are superior to traditional remedies. As people are exposed to global health trends and pharmaceutical advancements, they begin to question the effectiveness of local traditional practices.”* (Respondent 19, M.A.M).

The narrative reveals globalization as a double-edged sword. While it can introduce beneficial ideas and practices from around the world, it often leads to a devaluation of local knowledge. The exposure to global health trends create an implicit bias favoring modern solutions, casting traditional remedies as outdated. This shift in perception diminishes the credibility of traditional healers and remedies they offer, leading to a preference for alternatives that are perceived as more advanced or effective. Consequently, younger generations are less inclined to engage with traditional knowledge, as they view it as outdated in comparison to modern techniques.

Respondent 14 highlights the issue of overharvesting medicinal plants as a barrier to transmitting traditional knowledge. She indicates,

*“As the demand for these remedies has increased, many traditional healers and those in the community have harvested plants without ensuring their sustainability. This depletion of resources means that certain vital plants are no longer available, making it challenging to teach children about their uses and benefits”* (Respondent 14, T.K).

This narrative reveals that overharvesting medicinal plants not only threatens the availability of these resources but also disrupts the experiential learning process that is vital for passing down traditional knowledge. When younger generations cannot access the same herbs their parents and grandparents utilized, it creates a disconnection from the practical aspects of traditional medicine.

This lack of direct experience leads to a diminished appreciation for the cultural significance of these practices, resulting in a loss of valuable knowledge that has been cultivated over generations.

#### **4.6.5 Keeping Traditional Knowledge Relevant for Today's Children**

To keep traditional knowledge relevant for today's children respondent 20 emphasizes the importance of active integration into their daily lives through storytelling and contextual learning. she mentions,

*“We as parents, actively integrate to their daily lives. We use storytelling as a way to connect traditional practices to modern experiences. For example, when discussing health, we relate the benefits of traditional remedies to what they learn in school about health and nutrition. This helps them see the value in our practices while also recognizing that they coexist with modern knowledge”* (Respondent 20, M.F.M).

*“We also encourage children to be curious and ask questions. If they come across a new modern treatment, we invite them to compare it with traditional remedies. This process helps them appreciate both perspectives and understand that traditional knowledge can be adapted rather than discarded. Furthermore, we involve them in community events where traditional healers share their knowledge, giving them a chance to interact with elders and learn in an engaging environment”* (Respondent 20, M.F.M).

The above narratives reveal that by actively weaving traditional remedies into discussions about modern health and nutrition, parents create a bridge between the past and present, helping children see the tangible value of their heritage in contemporary contexts. This method positions traditional knowledge not as outdated but also as a complementary aspect of modern understanding, which fosters a sense of coexistence rather than conflict between the two.

The use of storytelling serves as a powerful educational tool, engaging children emotionally and intellectually. It allows parents to convey not just information but also the significance behind traditional practices, enriching children's appreciation for their cultural roots. By contextualizing

traditional remedies within familiar modern concepts, parents make these practices more relatable and accessible, thereby increasing their relevance in children's lives.

Encouraging curiosity is another vital component of respondent 20's strategy. By inviting children to explore and compare modern treatments with traditional remedies, parents cultivate critical thinking skills and empower their children to engage actively with both forms of knowledge. This inquiry-based approach fosters a deeper understanding of health and wellness, equipping children with the ability to make informed decisions. It transforms learning from a passive experience into an active dialogue, where children feel invested in their cultural heritage.

Furthermore, involving children in community events where traditional healers share their knowledge provides experiential learning opportunities that are crucial for effective knowledge transmission. These interactions allow children to learn directly from elders and create a sense of community and belonging. Engaging with traditional healers deepens children's respect for their cultural practices and improves the importance of preserving this knowledge for future generations.

#### **4.6.6 Challenges in Preserving Traditional Knowledge and Solutions**

One of the main challenges faced in keeping traditional knowledge alive is modern lifestyles and urbanization. Respondent 7 says,

*“There is an increasing influence of modern lifestyles, which often leads to a decline in interest among younger generations. Many children are more inclined to seek quick solutions through modern medicine rather than engaging with traditional practices. Additionally, the availability of information online can sometimes overshadow the wisdom shared by elders, making it harder for traditional knowledge to compete for attention”* (Respondent 7, M.J.M).

*“Another challenge is the loss of community unity. As people move to urban areas or become more isolated in their daily lives, the communal gathering that once facilitated the sharing of knowledge are becoming less frequent. This shift*

*makes it difficult for children to learn about traditional practices in an organic and immersive way” (Respondent 7, M.J.M).*

The narratives reveal that the increasing preference for quick solutions through modern medicines indicates a cultural transition where immediate gratification takes precedence over the more time-consuming immersive processes associated with traditional practices. This trend suggests that younger generations undervalue the depth and richness of traditional knowledge, viewing it as less relevant in an age where information is readily available and easily consumable online. This leads to a diminished engagement with cultural heritage, as the wisdom of elders struggle to compete with the attraction of digital content.

Moreover, the loss of community unity presents a barrier to the transmission of traditional knowledge. as individuals migrate to urban areas or become more isolated in their daily lives, the communal gathering that historically facilitated the sharing of cultural practices are increasingly rare. This disconnection undermines the organic, experiential learning opportunities that are vital for understanding traditional knowledge. Without these immersive interactions, children miss out on the contextual learning that comes from participating in community rituals and practices, further distancing them from cultural roots.

Another respondent says,

*“Integrating traditional knowledge into school curricula could help bridge the gap between modern education and our cultural heritage. Teaching children about the benefits of traditional medicine alongside modern health practices can make them more appreciative of both” (Respondent 20, M.F.M).*

In response to these challenges, respondent 20 proposes integrating traditional knowledge into school curricula as a potential solution. This approach emphasizes the need to create an educational framework that values both modern and traditional practices. By teaching children about the benefits of traditional medicine alongside contemporary health practices, educators can foster a great appreciation for cultural heritage. This integration can serve as a bridge, which enables children to see the relevance of traditional knowledge in their lives while equipping them with diverse perspectives on health and wellness.

## **Interpretation of Data in Relation to Study's Objectives**

### **4.7. Introduction**

This data interpretation section explores the vital role of indigenous knowledge systems in improving child healthcare in rural communities in Lesotho. By revisiting objectives of the study, the aim of this section is to interpret the data collected on indigenous knowledge systems and their impact on child healthcare in Lesotho. Relevant concepts from indigenous women's standpoint theory will be identified to frame the analysis. Finally, findings will be organized into thematic sections including cultural knowledge and practices, personal experiences, community relationships, holistic health, empowerment, intergenerational knowledge transmission, resistance to dominant paradigms and environmental connection.

### **4.8 Traditional Practices Surrounding Child Birth in Basotho Culture**

The practice of giving Pitsa, a tailored herbal concoction designed to strengthen the mother and prepare her body for child birth, reflects a sophisticated knowledge of local medicinal flora such as wild rhubarb and other therapeutic plants like *helichrysum caestitium*. This individualized approach signals family and community-level adaptations of traditional medicine, sustaining a perspective where cultural, environmental and physical health converge (Possa, 2024; Fobo et al., 2024). Moreover, traditional birth attendants apply indigenous strategies such as adnominal compression, blowing into a bottle and administering soot or herbal infusions to aid the third stage of labour and placenta delivery, blending practical techniques with cultural practices (Fobo et al., 2024).

Diet holds symbolic and functional value in Basotho childbirth customs. The consumption of fermented foods like sour milk and traditional sorghum beer reveal a sophisticated understanding of nutrition's role in childbirth. These foods are not merely sustenance, they are infused with cultural significance and practical benefits (Chesetsi & Ross, 2025). The belief that these foods contribute to the child's smooth skin and overall health reflects a broader cultural ethos that values not only the survival of the child but also their quality of life from birth onward. This nutritional aspect highlights the interconnectedness of diet, health and cultural identity, suggesting that food

practices surrounding childbirth are immersed in tradition and communal knowledge (Chesetsi & Ross, 2025).

The ritual of sitting in a bucket of hot water, as discussed by respondent 2, illustrates the cultural importance placed on specific behaviours during pregnancy. This practice serves multiple purposes including the promotion of physical comfort, aids in relaxation, and prepares the body for labour. The emphasis on such rituals indicates that childbirth is not solely a medical event but a culturally significant experience that encompasses physical, emotional and psychological dimensions (Fobo et al., 2024). This view of childbirth preparation suggests that cultural practices aim to ensure not just a smooth delivery but also a positive emotional experience for the mother, reinforcing the idea that the psychological state is as important as physical readiness (Fobo et al., 2024).

#### **4.8.1 Norms and Taboos**

The data collected from participants reveals important cultural norms and taboos surrounding pregnancy in Basotho society. One significant practice involves a ritual that pregnant women must perform when attending social events. Respondent 6 (M.M) explains that upon entering venues such as weddings or funerals, a pregnant woman is required to pick up a soil and smear it to her head. This act is deeply symbolic, reflecting the community's belief in the spiritual dimensions of health. It suggests that physical actions are not only practical but also infused with protective significance aimed at safeguarding both the mother and her child. This practice shows how cultural rituals are intertwined with health beliefs, emphasizing an approach where spiritual and physical well-being are seen as connected (Chesetsi & Ross, 2025; Thulo, 2024).

Moreover, respondent 2 (M.A.K) underscores the importance of environmental factors during pregnancy. The advice against sitting in direct sunlight highlights a practical consideration for the health of the child. It reveals a cultural understanding that exposure to certain elements can negatively impact pregnancy. This norm encourages pregnant women to seek shade and comfort, emphasizing the need for a supportive environment during this critical period. Such guidance reflects a community consciousness about maternal well-being and the belief that the physical environment can influence health outcomes (Chesetsi & Ross, 2025; Fobo et al., 2024).

Dietary restrictions during pregnancy further illustrate communal belief around health and well-being. Respondent 6 notes that pregnant women are restricted from consuming certain foods such as tripe and eggs. These dietary restrictions indicate a cultural framework that governs not only what is considered nourishing but what is deemed harmful during pregnancy (Bautista-Velarezo et al., 2020). This suggests that food choices are viewed through a lens of health implications for both mother and child, highlighting the importance of nutrition in this stage of life. The specific mention of certain foods implies that there is a collective wisdom about what supports or hinders health, shaped by generations of experiential knowledge (Aynalem et al., 2023; Bautista-Velarezo et al., 2020).

#### **4.8.2 Integration of local knowledge with modern healthcare**

The participants' insights reveal the value of integrating local knowledge with modern healthcare practices. Respondent 7 (M.J.M) emphasizes on healthcare providers understanding traditional remedies supports findings that such cultural competence fosters better communication, trust and patient-centered care in clinical settings. Knowledge of family-used remedies enables doctors to provide safer and more supportive advice, promoting coexistence and collaboration between traditional and conventional medicine (WHO, 2023).

Additionally, the focus on preventative health through traditional practices highlights a proactive approach to wellness. Respondent 7 (M.J.M) points out that attention to diet and lifestyles is a key part of staying healthy. This perspective aligns well with modern health principle that prioritize prevention over treatment. By emphasizing self-care rooted in local knowledge, the community expresses a commitment to maintaining health through familiar practices, suggesting that their traditions are not only relevant but also beneficial in today's healthcare context (PMC NCBI, 2023; UMN CCAPS, 2024).

Together, these insights illustrate a vision where local knowledge and modern healthcare can complement each other, fostering a more inclusive approach to health that respects cultural practices while embracing scientific advancements.

### **4.8.3 Suggestions for Collaboration Improvement**

The participant's suggestion strongly emphasizes the necessity of training programs and collaborative platforms to improve the integration of traditional and modern healthcare practices (M.L.K). Respondent 9's call for training healthcare providers about traditional medicines aligns with research underscoring the capacity-building initiatives enhance mutual understanding between biomedical practitioners and traditional healers, which fosters respect and collaboration (Nemutandani et al., 2016). Such training equips healthcare providers with cultural competence, allowing them to offer safer, more informed guidance that integrates both treatment paradigms effectively (Nemutandani et al., 2016).

The idea of workshops and seminars where traditional healers and healthcare professionals exchange knowledge reflects documented practices of collaboration through formal relationship-building activities, which have proven successful in improving healthcare delivery in diverse settings. This educational exchanges help to build trust necessary for sustainable integration (Mabitja et al., 2022).

Furthermore, the recognition of community health workers skilled in both traditional and biomedical health practices, as cited by respondent 11 (M.E.L), supports research advocating for bridging roles to guide safe use of traditional remedies alongside modern treatments (Ngole et al., 2024; WHO, 2023). These workers function as critical intermediaries, improving patient access to integrated care and ensuring safety.

Overall, these participant insights reflect that successful integration requires structured training, collaborative knowledge exchange, community involvement and bridging healthcare workers who understand both systems. This multi-faceted approach promotes a healthcare system that is culturally respectful, safe and effective.

## **4.9 Views on Using Traditional Medicines for Treating Children's Sicknesses**

Respondent 10's appreciation of traditional medicines, especially for minor ailments like coughs and fever, highlights the belief in the natural origin and generational knowledge that validates these

treatments over time (M.L.L). This aligns with findings from research showing that caregivers in various cultures trust traditional remedies passed down through generation for common childhood ailments due to their accessibility, natural source and cultural backing (Gaceta, 2019) The sense of comfort and cultural identity attached to these remedies reinforces continued use and positive perceptions (Gaceta, 2019).

Respondent 8's emphasis on empowerment through preparing herbal remedies illustrates the participatory role caregivers take in their children's health, developing a sense of agency and control (T.L). This empowerment is an important factor identified in literature as it supports active caregiver involvement, complementing rather than replacing modern healthcare (Nationwide children's Hospital, 2024).

Together, these data indicate that traditional medicine is seen not only as a effective health resource but also as a culturally embedded practice that supports overall child health. This reinforces scholarly calls for healthcare systems to recognize and integrate traditional practices with modern medicine in a way that respects caregiver agency and cultural heritage while ensuring safety and efficacy (Alemu et al., 2025).

#### **4.9.1 Reasons for Choosing Traditional Medicines Over Modern Healthcare**

The data from respondent 12 (M.T) and 13 (M.K) articulated several reasons for preferring traditional medicines over modern healthcare. Respondent 12 highlights accessibility and affordability as key drivers of this preference, explaining that the availability of herbs in the garden or nearby fields remove barriers such as transportation and medical fees that make clinic visits costly and inconvenient for minor ailments (M.T). This is supported by scholarly evidence indicating that traditional medicines are often more accessible and affordable than modern healthcare, especially in rural areas where healthcare facilities are far or lacking in resources (WHO, 2025; Sato, 2016).

Respondent 13 adds an important dimension of cultural trust and familiarity. The participant emphasized that remedies passed down through generations build confidence through observed effectiveness and cultural resonance (M.K). The perception that clinics can be impersonal or

culturally insensitive further motivates reliance on traditional medicine, which is often more aligned with patient's health beliefs and practices (WHO, 2025; Sibanda et al., 2021). However, the acknowledgement that professional medical intervention is sought to severe symptoms shows a balanced health-seeking behavior that values both traditional remedies and modern healthcare when necessary, a well-documented pattern in many communities globally (WHO, 2025; Sato, 2026).

#### **4.10 Traditional Medicines Used for Sick Children**

Respondent 6 describes the common practice in preparing herbs such as hypoxis hemerocallidea, gazania krebsiana and cannabis needs to create infusions for oral administration to children (M.M). This method effectively extracts the medicinal properties of the plants, a preparation technique widely documented in ethnobotanical studies where decoctions are used to treat pediatric ailments (Possa 7 Khotso, 2021). For example, Hypoxis hemerocallidea is noted for its anti-inflammatory and immune-boosting properties, commonly employed in African traditional medicine for various conditions (N'dongo et al., 2023).

Respondent 14 (T.K) notes on burning plants like peach tree. to produce smoke that children inhale for respiratory relief resonates with fumigation and inhalation therapies documented in traditional practices globally. The inhalation of herbal smoke to alleviate chest congestion is a method supported by ethno-pharmacological research, which cites similar practices for managing respiratory conditions in children (Ngole et al., 2023).

Topical application of herbal medicines such as smearing crushed herb-oil mixtures on the nose or skin areas as mentioned by respondent 5 (M.L), align with the documented use of topical preparations for treating headaches and skin diseases. The use of fats or oils helps the body absorb active ingredients better through the skin, a principle recognized in the study of natural medicines (Neuwinger, 2021).

The description by respondent 16 (P.M) about administering traditional medicines through small cuts, known as scarification or incisions, is a culturally sensitive but still practiced method in some African communities where direct application of herbal mixtures into the body is considered

essential for treatment efficacy (Mabitja et al., 2023). Finally, mixing herbal infusions with milk such as gazania krebsiana, reflects traditional practices where combination with other consumables influences acceptability and effectiveness of remedies (Possa & Khotso, 2021).

Together, these responses reveal a sophisticated knowledge system about different routes of administration that serve specific therapeutic purposes in children's care, consistent with contemporary ethno-medical literature.

#### **4.10.1 Decision-Making in selecting traditional Medicines for Specific Illnesses**

Decision-making process described by respondent 17 (M.A.L) reflects a culturally grounded and experience-based approach typical to traditional medicine practices. The first step of symptoms identification aligns with the biomedical diagnosis process, which highlights empirical observation of the child's condition as a basis for selecting treatment. This initial step is important in both traditional and modern health systems as it guides the choice of therapeutic intervention (Steel et al., 2025).

Respondent 17's reliance on ancestral knowledge passed down through family and community networks underscores the oral transmission of ethno-medical knowledge, which is common in many indigenous healing systems worldwide (WHO, 2025). The consultation with community elders when uncertain about specific remedies shows the collaborative and hierarchical decision-making frameworks within traditional health paradigms. Elders function as custodians of specialized knowledge and experience, validating treatment choices based on collective historical effectiveness rather than solely on scientific evidence (Ngole et al., 2024).

The ways of making decisions shows a blend of knowledge where doctors look at symptoms and also consider traditional healing practices that the community trusts. It highlights the importance of learning from experience and respecting the community's role in choosing treatments. This approach points to some challenges discussed in research about how traditional knowledge, often shared through stories and specific to a culture, fits with the evidence-based methods used in modern healthcare (Steel et al., 2025; WHO, 2025).

The process also highlights the social and relational dimensions of health decisions in traditional contexts, where health care is mediated through networks of trust and shared cultural individualistic model prevalent in biomedical care (Ngole et al., 2024).

#### **4.10.2 Challenges on Acquisition of Herbs**

Respondent 7's observation on the challenges in sourcing traditional herbs points to ecological and socio-economic issues affecting the availability of medicinal plants (M.J.M). The decline in herb availability in home gardens, attributed to environmental changes such as climate change, habitat loss and overharvesting, reflects a widespread problem documented in several African contexts, as reported by Pascalinah Kabi on Public Eye, 2021. This scarcity forces families to rely merely on purchasing remedies from local markets, which can impact the authenticity, quality and accessibility of traditional medicines.

Scientific studies confirm that overharvesting and environmental degradation threaten the survival of many medicinal plant species, leading to reduced natural stocks and increased vulnerability of traditional healthcare systems that depend on these plants (Seleteng-kose, 2021; Dougnon et al., 2023). Climate change, including drought and altered rainfall patterns, further worsens this by disrupting plant habitats and growth cycles, reducing the availability of key medicinal resources (Public Eye, 202; Mutombo et al., 2023).

Moreover, reliance on local markets as secondary sources introduces challenges related to quality control, adulteration and higher costs, which may compromise treatment effectiveness and patient safety (WHO Africa Regional Office, 2017). The challenges stressed by respondent 7 imply a need for sustainable harvesting practices, cultivation of medicinal plants and regulatory frameworks to protect biodiversity and ensure consistent access to traditional remedies. Therefore, the data reflect critical environmental and systematic barriers affecting the acquisition of traditional herbs, which require integrated conservations to preserve this vital component of healthcare.

#### **4.11 Key determinants of the Use of Traditional Medicines in the Treatment of Child Ailments in Lesotho.**

The decision to use traditional medicines for treating child ailments in Lesotho is deeply influenced by trust in these remedies and cultural beliefs. Respondent 5 (M.L) expressed a strong confidence in traditional medicines, emphasizing that these have been effectively used and passed down through generations, which reassures caregivers about their reliability. This trust is based not only on ancestral knowledge but also on personal observation of the medicines' effectiveness in treating common childhood ailments such as fever. Such confidence is supported by studies that highlight how experiential knowledge reinforces continued use in many African communities, where effectiveness seen directly plays a key role in healthcare choices (Lambert et al., 2025).

Moreover, cultural beliefs form a central part of these decisions. Traditional medicine is viewed as more than just a treatment since it represents a general approach to health deeply connected to nature and ancestral heritage. Respondent 5 (M.L) highlighted the belief that natural remedies, perceived as safer due to the absence chemicals found in modern pharmaceuticals, align with cultural values of respect for the environment and sustainable living. This feeling of identity and heritage linked to traditional medicine, strengthens preference for these treatments over conventional options. Research supports this perspective, noting that cultural and spiritual values underpin the persistent use of traditional medicine in many African settings, where people associate healing with natural elements and culturally sanctioned practices (Liu et al., 2024).

Such cultural trust and values often explain why caregiver prefer traditional remedies for children's ailments despite the availability of modern healthcare. The traditional health system embedded within community's way of life, providing accessible, culturally familiar and trusted care. This care, combined with the role of herbs as a symbol of cultural identity, makes it a primary choice for managing child illnesses in Lesotho (Clarkson & Eze, 2023).

##### **4.11.1 Influence of Family and Community's Opinion Over the Choice of Medicine**

Respondent 9 (M.L.K) highlights the influence that family and community have on decisions related to the use of traditional medicine. The support and advice from family members,

particularly elders like the respondent's mother, provide essential reassurance and confidence in using these remedies. This generational knowledge, passed down through families, creates a strong sense of continuity and trust, which strengthens the belief in the effectiveness of these treatments. This is consistent with studies indicating that family influence is a key factor in health-seeking behavior, especially in the contexts where traditional medicine is a norm. For instance, in Lesotho and other similar settings, parental advice and communal knowledge about traditional medicine greatly shape caregiver's preferences and practices (Chukwu et al., 2025).

Furthermore, respect and belief in traditional healers and their knowledge within the community add another layer of social validation that strengthens the acceptance and use of traditional medicines. The collective experience and discussions among community members about the benefits of these remedies create an environment of shared trust and reassurance, making individuals more comfortable with their use. This communal endorsement reflects cultural cohesion where health decisions are embedded within the broader social fabric and collective memory of the community (Lemke et al., 2024).

Such findings illustrate how family and community act as critical social determinants of traditional medicine utilization, providing emotional support, guidance and validation that influence treatment choices. This social dimension is fundamental to health behaviours in many African contexts, where collective wisdom and communal approval are valued as much as, or even more than, scientific evidence (Mokobo & Dlamini, 2023).

#### **4.11.2 Impact of Financial Situation on Medicine Choices**

Respondent 6 (M.M) explains that financial situations influence the choice to use traditional medicine, but often in a way that makes traditional remedies more accessible and affordable compared to health treatments. Because many herbs grow naturally in the community's environment, families can source them directly from their gardens or nearby fields without needing to spend much money. This lowers barriers to care for minor ailments, making traditional medicine an economically practical option for many households. This perspective is supported by research showing that in Lesotho and similar settings, affordability and availability of traditional medicines contribute to their widespread use, especially among low-income families (Lepule & Mothiba,

2025). Studies have found that these medicines are often preferred because they reduce out-of-pocket expenses associated with formal healthcare, which can be financially burdensome due to travel costs, fees and the high price of pharmaceuticals (Lepule & Mothiba, 2025).

#### **4.11.3 Challenges in Accessing Traditional Medicines**

Availability is a major challenge in accessing traditional medicines due to the natural growth cycles and environmental factors affecting medicinal plants. Respondent 11 (M.E.L) highlights that some plants used for treating children's illnesses like cough are not always available, especially during dry seasons, forcing alternatives. This scarcity is confirmed by studies showing that seasonal variations and climate conditions create fluctuations in medicinal plant populations, impacting traditional remedies' accessibility (Mabekebeke, 2023).

Respondent 4 (M.K) and 17 (M.A.L) emphasize overharvesting and commercialization as critical threads in accessing traditional medicines. Overharvesting by traditional healers and the wide community to meet growing demand often disregards sustainable harvesting practices, causing depletion of crucial medicinal plants. Researchers confirm that in Lesotho, unsustainable harvesting rates have pushed several indigenous medicinal plants towards scarcity and risk of extinction (Mabekebeke, 2023). Commercial interest exacerbates this by prioritizing quantity over quality, therefore herbs harvested for sale deplete natural stocks faster than traditional subsistence use. The commercialization of medicinal plants creates a market dynamic where some harvesters exploit resources purely for profit without conserving them for future use, leading to long-term resources depletion (Seleteng-kose, 2021).

The difficulties in accessing medicinal plants due to scarcity and commercialization also undermine the transmission of traditional knowledge, as respondent 17 points out. When younger generations observe the challenges elders face in obtaining key herbs, their connection to cultural practices may weaken, reducing interest and participation in traditional healing. Scholarly evidence supports this, noting that loss of direct contact with medicinal plants impact experiential learning necessary for passing on indigenous knowledge (Renoka, 2024).

## **4.12 Preservation and Transmission**

The data from respondent 8 (T.L) shows that knowledge of traditional medicines and health practices is deeply embedded in family and community traditions. The respondent describes learning about remedies through stories passed down from their mother and grandmother, emphasizing that this hands-on, experiential learning was essential for understanding not only the medicines but also the context in which they are used. This aligns with scholarly findings that traditional medicine knowledge is often transmitted orally through generations, with direct observation and participation playing key roles in acquiring skills (Kumar et al., 2022). Such intergenerational knowledge transfer fosters not only practical skills but also a respect and value for cultural heritage.

Additionally, the communal sharing of experiences among neighbours and friends, as described, creates a social learning environment that validates and reinforces the effectiveness of remedies. This collective knowledge exchange strengthens community bonds and serve as both source of practical information and cultural identity (Ndyomugenyi et al., 2023).

### **4.12.1 Sources for Traditional Medicines and Health Practices**

Respondent 8's account of learning traditional medicines and health practices deeply highlights the essential role of family and community in knowledge transmission (T.L). The vivid description of sitting with a grandmother preparing remedies reflects the importance of practical, hands-on learning that involves storytelling, demonstrating not just the use of herbs but the cultural context and values surrounding them. this approach is consistent with documented Basotho traditions where remedies are often passed down through oral narratives and experiential engagement, which enrich understanding far beyond mere ingredients (Mateete & van Wyk, 2011).

Moreover, respondent 8's mention of neighbours and friends sharing herbal experiences illustrates the communal nature of traditional health knowledge. this collective sharing during social gatherings strengthens trust in remedies and reinforces cultural bonds, creating a community-supported system of healthcare that is adaptive and democratic (Mateete & Van Wyk, 2011).

#### **4.12.2 Ways of Teaching Children About Traditional Medicines**

The data from respondent 3 (M.G.L), highlights two important ways children learn about traditional medicines. Primarily, elders and traditional healers as act key custodians of cultural wisdom, passing down knowledge orally through storytelling, shared experiences and practical demonstrations. This approach preserves important medicinal knowledge as well as helping children appreciate the cultural significance of healing practices. The presence of elders encourages respect for age and experience, fostering a deeper connection to community heritage (Alemu et al., 2025).

Additionally, formal education supported by families plays an important role. Sometimes families invest in resources like livestock to hire knowledgeable individuals who provide structured teaching about traditional medicines. This paid mentorship system emphasizes the value placed on traditional knowledge and ensures that children receive high-quality instruction that goes beyond what written materials can offer. Such formalized transmission contributes to sustainability of traditional medicine knowledge by combining experiential learning with systematic education (Melby, 2021).

Together, this dual approaches, the informal oral transmission through elders and the formal structured teaching through mentorship, enable children to acquire comprehensive knowledge about traditional medicines. This combination also reflects efforts to sustain these practices amid changing social contexts, ensuring the cultural and practical value of traditional medicine remains relevant in child healthcare (Towns et al., 2014).

### 4.12.3 Changes in Knowledge Transmission Over Generations

Respondent 17's reflection on changes in knowledge transmission highlights the cultural practice known as "Thakaneng", a traditional gathering during winter months where boys and girls spent times separately with older men and women to learn about cultural heritage and traditional medicines. Such specific gathering imparted children deeply in their cultural identity and values through direct interaction with elders (M.A.L).

Storytelling, as emphasized by respondent 19 (M.A.M), was also central in these learning experiences. Narratives shared across generations conveyed not just the methods of traditional medicine but also the moral values tied to nature and community health. These stories served to keep the knowledge alive and meaningful, beyond mere information, fostering a connection to family history and cultural ethics (Renoka et al., 2024).

However, the respondents note that modern influences have changed how children access this knowledge. This shift has resulted in more superficial understanding for traditional medicines, as rich context, stories and experiential insights are harder to convey through short videos or online posts (Respondent 18, M.L.L). The frequency of in-person teachings has diminished due to modern education demands and the internet's overwhelming availability of information, which sometimes overshadows oral traditions (Respondent 18, M.L.L).

These shifts reflect documented challenges faced by many indigenous communities where digital platforms offer new but limit modes of knowledge transmission. While useful for reach and preservation, these platforms do not yet fully replace experiential learning that formal cultural gatherings and storytelling provide. The "Thakaneng" rite exemplifies a structured, communal space designed to pass down not only facts but also the values and respect essential to traditional healing practices, now challenged by modern lifestyle and digital consumption habits (Sepeng, 2007).

Overall, traditional knowledge transmission has evolved from immersive, ceremonious cultural gatherings like Thakaneng and rich storytelling to a hybrid system where social media plays a growing but incomplete role. This evolution brings both opportunities for broader dissemination and risks of diluted understanding, highlighting the need to balance modern technologies with marinating authentic, experiential learning that connects children to their heritage historically.

#### **4.12.4 Causes of Changes in Traditional Knowledge Transmission**

Modern technology, particularly smartphones and internet access, has revolutionized information acquisition for children. Respondent 2's insight about youth being more connected digitally than culturally resonates with findings that social media and digital devices create distractions, reduce attention spans and shift priorities toward trending online content rather than deep engagements with elders in cultural learning (Mkhize, 2025). This aligns with broader research indicating that digital technology both facilitates access to knowledge and threatens traditional modes of transmission, which rely heavily of face-to-face, oral interaction and experiential learning (Osborne et al., 2015).

Secondly, the prioritization of western education and modern careers is a dominant factor shaping contemporary knowledge dynamics. Respondent 15 rightly points out that formal schooling is often perceived as the key to success and upward mobility, leading to a deprioritization of traditional knowledge. This is supported by studies showing how formal education systems frequently undervalue indigenous knowledge, labeling it as outdated or irrelevant, thereby discouraging youth from investing time hands-on cultural practices that require patient and communal participation (Lekoko & Modise, 2011).

Thirdly, globalization introduces competing worldviews and medical systems that question the efficacy of traditional healing methods, as respondent 19 indicated. Exposure to modern pharmaceuticals and global health trends reinforces perceptions of traditional medicine as less effective, reducing its usage and the transmission of associated wisdom. This influence encourages younger generations to adopt modern health practices, sometimes neglecting the practical and cultural benefits and indigenous remedies (Renoka et al., 2024).

Lastly, environmental degradation compounds these cultural challenges. As respondent 14 stated, overharvesting medicinal plants compromises the sustainability of traditional healing resources. Scientific analysis of indigenous knowledge among Basotho herders confirms that environmental interaction underpins cultural learning and survival strategies, but declining natural resources erode hand-on educational opportunities (Makoa & Zwilling, 2005). Therefore, the depletion of

herbs essential for remedy preparation impacts direct learning and the transmission of practical knowledge from elders to youth.

#### **4.12.5 Keeping Traditional Knowledge Relevant for Today's Children**

Respondent 20 (M.F.M), emphasized an important role of actively integrating traditional knowledge into children's daily live though storytelling. This approach makes cultural practices relevant by connecting them with children's modern experiences, such as relating traditional remedies to what they learn about health in school. By doing this, children begin to appreciate that traditional knowledge is valuable and coexist with modern scientific understanding, rather than being seen as old-fashioned or irrelevant. This method aligns with research showing that storytelling rooted in culture supports children's language development, literacy and cognitive growth, especially when the stories connect to their lived realities (Ntwalana & Matiso, 2024).

Moreover, fostering children's curiosity by encouraging them to compare and question both modern and traditional treatments cultivates critical thinking and adaptability (Respondent 20, M.F.M). This nurtures respect for cultural heritage while valuing new knowledge, helping youth understand that traditional remedies can be adapted and are not discarded in the face of modern advancements. Research supports that this inquiry-based approach deepens children's engagement and critical understanding of multiple knowledge systems (Shroeder et al., 2023).

Additionally, involvement in community events where traditional healers share their knowledge provides as interactive and social learning environment (Respondent 20, M.F.M). Engaging directly with elders allows children to experience cultural learning firsthand, which has been found essential for preserving indigenous knowledge across generations (Abebe, 2024).

In essence, respondent 20's strategy combines storytelling, curiosity-driven learning and community participation to keep traditional knowledge vibrant for today's children. This integrated approach aligns with emerging educational practices that blend indigenous knowledge with formal learning to support overall development and cultural sustainability. It recognizes that traditional knowledge can coexist with modern science, encouraging children to see value in both and adapt them flexibly in their own lives (Allen & Landone, 2020; Ntwalana & Matiso, 2024).

#### **4.12.6 Challenges in Preserving Traditional Knowledge and Solutions**

The data highlight significant challenges in preserving traditional knowledge, especially among younger generations. Respondent 7 (M.J.M) points out that modern lifestyles heavily influence young, who tend to prefer quick solutions offered by modern medicine over traditional practices. This shift is amplified by the abundance of information available online, which overshadow the wisdom passed down by elders. The ease of accessing digital content often competes with the slower, more immersive learning involved in traditional knowledge transmission, making it difficult for cultural heritage to hold the younger generation's interest (M.J.M). Scholars agree that such digital dominance reduces the opportunity for meaningful engagement in experiential and oral learning, weakening the intergenerational transfer of indigenous knowledge (Osborne et al., 2015).

Another challenge mentioned is the breakdown of community unity due to urbanization and isolated lifestyles. Respondent 7 explains that as people move away from rural areas or adopt more individualistic ways of life, the communal gatherings that were once central to sharing and teaching traditional practices occur less frequently. This erosion of social cohesion diminishes the natural and experiential learning environments that are critical for younger people to absorb traditional wisdom (Respondent 7, M.J.M). research affirms that communal participation and social interaction are fundamental in indigenous knowledge systems, and their decline hampers cultural continuity (Lekoko & Molise, 2011).

To address this challenges, respondent 20 suggests integrating traditional knowledge into formal education curricula. By including indigenous medicine and cultural practices alongside modern health education, schools could foster pride and appreciation for both systems, creating a bridge between cultural heritage and contemporary knowledge (Respondent 20, M.F.M.). This approach aligns with scholarly recommendations advocating for curricular inclusion of indigenous knowledge to improve cultural relevance and maintain heritage among youth within modern education frameworks (Renoka, 2024).

## **4.13 Linking Key Themes Identified to the Indigenous Women Standpoint Theory**

### **4.13.0 Introduction**

Below is the discussion of the key themes identified in the collected data, which also align with the concepts in indigenous women's standpoint theory.

#### **4.13.1 Cultural Knowledge and Practices**

The study highlights the significance of cultural knowledge and practices as foundational elements in improving child healthcare in Lesotho. Respondents shared a variety of traditional practices that are deeply rooted in their cultural heritage. One participant noted, "in Basotho culture, preparing a woman for childbirth involves a variety of traditional practices and remedies known as *pitats*". This statement shows the diversity and richness of indigenous practices that are tailored to the unique needs of families and individuals.

The concept of cultural knowledge emphasizes that these practices are not merely rituals but are filled with meaning and purpose, reflecting the community's values and beliefs. The respondent's mention of different remedies like soot cooked with wild rhubarb shows how traditional practices vary between families, underscoring the importance of personalization in maternal care. This aligns with indigenous women's standpoint theory, which posits that the lived experiences of women are critical in shaping health practices and beliefs (Coates et al., 202; ATPS, 2017).

#### **4.13.2 Personal Experience**

Personal experience is very important in the perception and use of traditional medicines among rural women in Lesotho. Many respondents articulated their trust in traditional remedies and this trust is often rooted in their own experiences and the shared experiences of their families. The emphasis on personal experience indicates the indigenous women's standpoint theory's assertion that individual and collective narratives are valid sources of knowledge. As women recount their successful use of traditional remedies for common ailments, they reinforce the credibility of these

practices within their community. This personal connection fosters confidence and empowerment reflected on indigenous women's standpoint theory, allowing women to assert their preferences in health management, especially when it comes to their children's health (Moreton-Robinson, 2013; ATPS, 2017). The Indigenous women standpoint theory emphasizes the importance of women's voices in health decision-making, indicating that empowerment is not just about individual choices but also about collective advocacy for traditional practice (Moreton-Robinson, 2013).

#### **4.13.3 Community and Relationships**

The role of community and relationships is paramount in this transmission of traditional knowledge. The study reveals that community bonds influence health practices, as seen in the desire for platforms that facilitate knowledge sharing. One respondent suggested, "creating a community platform where families can share their experiences... would be beneficial" (Respondent 9, M.L.K). This reflects the indigenous women standpoint theory's focus on the importance of social networks in shaping health behaviours. The collective wisdom of the community serves as a source of support, where individuals can learn from each other and validate their experiences. The communal aspect of healthcare emphasizes the interconnectedness of individuals, illustrating that health is not solely a personal endeavor but a communal responsibility that thrives on collaboration and shared wisdom (Coates et al., 2020).

#### **4.13.4 Resistance to Dominant Paradigms**

The study reveals a resistance to dominant healthcare paradigms, as other respondents expressed a desire for healthcare providers to recognize and respect traditional practices. This is evident in statements advocating for collaboration between traditional and modern healthcare systems. One respondent noted, "our ways can help doctors. If they know what we do, they can understand us better" (Respondent 7, M.J.M).

This resistance aligns with indigenous women standpoint theory, which encourages the validation of indigenous knowledge against western medical practices. The desire for integration rather than replacement highlights the importance of recognizing the value of traditional practices in contemporary healthcare. By advocating for respect and understanding between healthcare

providers and traditional healers, the community asserts its cultural identity and autonomy in health matters.

#### **4.13.5 Environmental Connection**

Finally, the study highlights the strong connection between traditional practices and the natural environment. Respondents discussed the sourcing of traditional medicines, noting that many herbs are found in their local surroundings, and this illustrates the reliance on local biodiversity for health solutions. This environment connection is important in indigenous practices as it emphasizes sustainability and respect for local ecosystems. Indigenous women standpoint theory recognizes that traditional knowledge is often tied to environmental management, advocating for practices that keep the balance between health and nature. By valuing the relationship between health practices and environment, the community highlights the importance of preserving both cultural heritage and natural resources (Coates et al., 2020).

#### **4.14 Conclusion**

This chapter has explored the role of indigenous knowledge systems in child healthcare within the context of Lesotho, particularly focusing on traditional practices and remedies. It highlighted how these practices have been passed down through generations, emphasizing the importance of storytelling, community engagement and the elders' guidance in preserving cultural heritage. The chapter also examined the challenges facing the transmission of traditional knowledge, including modern technology's influence, globalization and the overharvesting of medicinal plants. Additionally, it discussed how parents actively integrate traditional practices into their children's lives to maintain relevance, encouraging curiosity and connection to both traditional and modern health perspectives. The chapter also highlighted the need for collaboration between traditional and modern healthcare systems to enhance child health outcomes while respecting cultural beliefs. Ultimately there was an interpretation of data.

## CHAPTER 5

### Summary, Conclusions and Recommendations

#### 5.0 Introduction

This chapter serves as the concluding section of the study, providing a comprehensive blend of the investigation into how indigenous knowledge systems contribute to child healthcare in Lesotho. It summarizes the main findings, draw informed conclusions, offer recommendations based on the investigation. Additionally, this chapter acknowledges the limitations encountered during the study. The central aim of this chapter is to reflect on the extent to which the research objectives, established in chapter one, have been met. These objectives guided the study and focused on exploring on the role of indigenous knowledge systems in improving child health in Lesotho. Specifically, the objectives were to determine how traditional knowledge improve child health, assess rural women's perceptions towards traditional medicines, identify key herbal remedies used in treating child ailments, assess the determinants of the utilization of traditional medicines in the treatment of child ailments and examine the methods used to preserve and pass down such knowledge across generations.

#### 5.1 Summary of the findings

Nkoeng community members, especially traditional healers and women at the age of fifty-one years and above, were involved in a qualitative interview, which focused more on their experiences with traditional health practices. One of the main aspects of this research included how indigenous knowledge systems can be utilized to improve child health in Lesotho. The study identified several traditional practices employed in preparing women for childbirth, including the use of herbal remedies known as Pitsa, tailored to individual needs. These practices are completed with dietary recommendations such as the consumption of sour milk and traditional beer since they support maternal and child health.

Participants also highlighted the importance of specific rituals and behaviours that expectant mothers are encouraged to follow, such as avoiding direct sunlight and performing protective

rituals at social gatherings. These practices reflect the community's cultural beliefs in the spiritual dimensions of health, which are intertwined with physical well-being.

Moreover, the study revealed that integrating local knowledge with modern healthcare practices could improve child health outcomes. Respondents emphasized the need for healthcare providers to be educated about traditional remedies to facilitate collaboration between traditional healers and modern practitioners. This integration is aimed to create a more inclusive approach to healthcare that respects cultural beliefs while addressing medical needs.

In exploring the perceptions of rural women towards the use of traditional medicines for treating children's ailments, the study found that many respondents expressed confidence in the effectiveness of these remedies. They appreciated that these remedies are derived from natural resources, which contributes to their comfort and trust in using them. The study found that women feel empowered by their ability to prepare these remedies passed down through generations, viewing traditional herbs as an important complement to modern healthcare rather than a replacement.

The study also identified practical reasons for choosing traditional medicines over modern healthcare. Respondents highlighted the accessibility and affordability of these remedies, often found in their gardens or local fields, which eliminates the need for costly transportation to clinics. Additionally, the familiarity and cultural significance of these remedies fosters a sense of trust, making women more comfortable in managing their children's health with traditional practices. While they value traditional medicines, participants acknowledged the importance of seeking professional medical care when symptoms are unresponsive to home remedies, demonstrating a balanced approach to healthcare.

Apart from that, the study identified several key traditional medicines commonly used in treating child ailments in rural Lesotho. Traditional healers explained their preparation methods, which included boiling herbs to create infusion using smoke inhalation for respiratory relief and applying topical remedies for various ailments. This demonstrated a deep understanding of the therapeutic properties of local plants and the importance of careful preparation to enhance the effectiveness of treatments.

Participants also outlined a systematic approach to selecting appropriate medicines based on the symptoms presented by the child. They mentioned that they rely on both personal knowledge and communal wisdom passed down from elders to make informed decisions. However, challenges in sourcing traditional herbs were noted, including environmental changes and overharvesting. This often compelled families to purchase remedies from local markets.

Additionally, the study identified key determinants influencing the use of traditional medicines in treating child ailments in Lesotho. Central to this choice was a profound trust in these remedies, which participants attributed to general knowledge and observed effectiveness. Many respondents expressed that cultural beliefs reinforce their preference for natural remedies, viewing them as safer alternatives to modern pharmaceuticals. This connection to nature and heritage influenced their healthcare decisions.

Family and community opinions also emerged as strong factors in medicine selection. Respondents shared how guidance from family members, especially elders, cultivated confidence in traditional practices. In addition, participants noted that traditional remedies are generally more affordable and accessible than modern treatments since they are often sourced from local gardens and fields.

However, challenges in accessing traditional medicines were also highlighted. It has been indicated that the availability of certain herbs was affected by seasonal changes and environmental conditions, making reliance on specific plants risky. Overharvesting and commercialization were also identified as significant concerns threatening the sustainability of these resources. Respondents warned that the growing market demand for traditional medicines has led to the depletion of vital plants, undermining both community health and the transmission of traditional knowledge.

The research also explored methods for preserving and transmitting traditional knowledge regarding health practices in Lesotho. It has been highlighted that familial teachings and oral traditions are central to the understanding of these remedies. Many learned about them through hands-on experiences with parents and grandparents, fostering a deep respect for their cultural heritage. The communal sharing of knowledge further enriched this understanding, as community members exchanged experiences and insights about herbal treatments.

Apart from that, teaching methods for children included spending time with elders and traditional healers who serve as guardians of cultural practices. Some families even invested in formal education for their children, compensating knowledgeable individuals to ensure quality instruction. However, changes in knowledge transmission were noted, with fewer structured opportunities for learning such as the traditional “Thakaneng” gatherings. Modern lifestyles and the prevalence of social media shifted younger generations’ focus away from direct engagement with traditional practices.

Lastly, challenges faced in preserving this knowledge included the influence of modern technology, globalization and overharvesting of medicinal plants, which hindered both access to traditional remedies and the passing down of knowledge. Respondents emphasized the need for active integration of traditional knowledge into daily life and school curricula to keep it relevant for today’s children. By fostering curiosity and encouraging comparisons between modern and traditional treatments, families aimed to bridge the gap between past practices and contemporary experiences, thus, helping to sustain their cultural heritage.

## **5.2 Conclusions**

The study concludes that indigenous knowledge systems play a fundamental role in improving maternal and child health in Lesotho through culturally rooted traditional practices. The use of herbal remedies such as Pitsa, tailored dietary recommendations and protective rituals during pregnancy, reflects an overall approach that integrates spiritual and physical well-being. These practices continue to be highly valued within the community, contributing significantly to the preparation of women for childbirth.

The study also established that rural women possess a strong preference for traditional medicines in treating children’s ailments due to cultural knowledge, the natural origin of remedies, and their accessibility and affordability. Traditional remedies are regarded as a complementary resource to modern child health while maintaining a balanced approach by seeking professional care when necessary.

Several key traditional medicines were identified in the study, which were accompanied by detailed preparation methods that demonstrate a profound indigenous understanding of therapeutic properties. Nonetheless, challenges such as environmental changes and overharvesting have threatened the availability of medicinal plants, presenting obstacles to sustaining these traditional health practices.

The study also recognized that cultural trust, family and community influence, and economic considerations emerged as key determinants in the use of traditional medicines. However, environmental degradation and commercialization pose risks to the sustainability of medicinal resources and the ongoing transmission of traditional knowledge. Therefore, this highlights the need for protective measures to conserve both the plants and the associated indigenous knowledge.

Finally, the research concludes that while familial and communal oral teachings remain fundamental to preserving traditional health knowledge, modern influences such as technology and shifting lifestyles have created challenges to knowledge transmission. Active efforts to integrate indigenous knowledge into everyday life and formal education systems are important to sustain this heritage. Encouraging intergenerational engagement and bridging traditional and modern healthcare perspectives can help ensure the continuation and relevance of these valuable cultural practices.

### **5.3 Areas for Further Research**

While this study has provided valuable insights into the role of indigenous knowledge systems in child healthcare in Lesotho, several areas deserve further exploration. One area is the need for longitudinal studies that track the health outcomes of children treated with traditional remedies versus those receiving conventional treatments. Such research would provide empirical evidence regarding the effectiveness of traditional medicines, potentially influencing healthcare policies.

Another area for exploration is the cultural adaptation of modern healthcare practices. Investigating how healthcare systems can adapt their practices to incorporate indigenous knowledge without compromising medical standards is important. Research could focus on

frameworks for collaboration between traditional healers and healthcare professionals, leading to hybrid models of care that respects both practices.

Lastly, examining intergenerational perspectives on health practices could provide insights into how perceptions of traditional medicine evolve over time. By examining the views of younger generations, we can identify trends and shifts in perceptions regarding traditional knowledge. This understanding can help pinpoint effective strategies to revitalize interest in traditional medicine and ensure its continued relevance in modern healthcare. Ultimately, this approach can strengthen the bridge between past and present knowledge, improving the effectiveness of healthcare in Lesotho.

#### **5.4 Recommendations**

To effectively integrate indigenous knowledge systems into healthcare in Lesotho, the study proposes several innovative recommendations. First, it recommends creating Indigenous Knowledge Centers that could serve as community hubs for documenting, preserving and sharing traditional health practices. These centers might even host workshops, training sessions and health fairs, encouraging a community-driven approach to healthcare that respects traditional practices.

Integrating lessons on traditional medicine into school curricula is another important recommendation. This initiative would not only educate children about their cultural heritage but also instill a sense of pride in their identity. By incorporating local medicinal practices, traditional stories and the historical significance of traditional healing into subjects such as science, social studies and health education, schools can create a full understanding of the role of traditional medicine in the community.

Finally, the study recommends developing traditional medicine certification programs for traditional healers. Such programs would formally recognize the skills and knowledge of these healers, providing them with training in areas such as ethics, hygiene and patient safety. This training would emphasize the importance of informed consent and ethical practices, ensuring that healers understand the implications of their treatments. By establishing a recognized certification process, traditional healers would gain credibility within their communities and the broader healthcare system. These initiative could improve the overall quality of care, leading to improved

health outcomes for children and promoting a more culturally sensitive healthcare system in Lesotho.

## **5.5 Limitations**

The data collection for this research faced some limitations related to timing and cultural sensitivities. Firstly, the researcher collected data during winter harvest season, which meant that many community members were actively engaged in fieldwork and not readily available for interviews. This required waiting for their return, often in the evenings when women were occupied with cooking and other domestic responsibilities. This limited availability prolonged the data collection process and many have constrained the diversity of participant responses.

The researcher also noticed reluctance among some participants to share their traditional knowledge. Some believed that such knowledge is sacred and should not be freely disclosed without compensation, reflecting long-standing cultural norms around knowledge ownership. One traditional healer even requested a cow as payment in exchange for sharing information, emphasizing the perceived value of this knowledge and concerns about being published without proper payment.

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Appendix 1: Participants Information Table

**Name of village: Nkoeng**

<b>Respondents</b>	<b>Age</b>	<b>Sex</b>	<b>Highest level of education achieved</b>	<b>occupation</b>	<b>Date of interview</b>
Respondent 1 (M.E.K)	73	Female	No formal education	Not employed	21/06/2025
Respondent 2 (M.A.K)	59	Female	Primary education	Not employed	21/06/2025
Respondent 3 (M.G.L)	87	Male	No formal education	Not employed	21/06/2025
Respondent 4 (M.K)	60	Female	No formal education	Not employed	21/06/2025
Respondent 5 (M.L)	53	Female	Diploma	Primary teacher	21/06/2025
Respondent 6 ('M.M)	64	Female	Primary education	Not employed	21/06/2025
Respondent 7 (M.J.M)	80	Female	No formal education	Not employed	22/06/2025
Respondent 8 (T.L)	65	Male	Primary education	Not employed	22/06/2025
Respondent 9 (M.K)	68	Female	No formal education	Not employed	22/06/2025
Respondent 10 (M.L)	54	Female	Primary education	Not employed	23/06/2025
Respondent 11 (M.E.L)	51	Female	Primary education	Not employed	23/06/2025
Respondent 12 (M.T)	70	Female	No formal education	Not employed	24/06/2025
Respondent 13 (M.K)	63	Female	Primary education	Not employed	24/06/2025
Respondent 14 (T.K)	70	Male	No formal education	Traditional healer	25/06/2025
Respondent 15 (M.M)	53	Female	Primary education	Not employed	25/06/2025
Respondent 16 (P.M)	60	Male	Primary education	Traditional healer	25/06/2025
Respondent 17 (M.A.L)	55	Female	No formal education	Not employed	26/06/2025

Respondent 18 (M.L.L)	70	Female	No formal education	Not employed	27/06/2025
Respondent 19 (M.A.M)	65	Female	No formal education	Not employed	29/06/2025
Respondent 20 (M.F.M)	78	Female	No formal education	Not employed	29/06/2025

## Appendix 2: Interview Questions

Can you please tell me how traditionally Basotho prepare a woman for child birth?

What are the key things that a woman who is expecting a child should and should not do?

How can your local knowledge work together with modern health care?

What would you like to see happen to make this easier?

What do you think about using traditional medicines for treating children's sicknesses?

Why do you choose traditional medicines instead of going to a hospital or clinic?

What traditional medicines do you use when your child is sick?

How do you prepare these traditional medicines?

Do you grow them yourself or buy them from somewhere?

What makes you choose traditional medicines for your child's sickness?

Do you think your financial situation affects your ability to use traditional medicines?

Are there any challenges you face when trying to get traditional medicines?

How did you learn about traditional medicines and health practices?

What ways do you teach your children about traditional medicines?

Have you noticed any changes in how this knowledge is passed down compared to when you were a child?

What do you think has caused these changes?

How do you keep traditional knowledge relevant for today's children?

What challenges do you face in keeping this traditional knowledge alive?

How can these challenges be addressed in your community?



