
Guidelines for Catholic Schools in South Africa Relating to Students Who Might Be Receiving a Traditional Ancestral Calling

1. Purpose of these guidelines

The intention of these guidelines is to provide leaders in Catholic schools and their communities, with context, guidance and direction in engaging with learners who are specifically undergoing phenomena ascribed to a calling from the ancestors to become a traditional healer. The guidelines acknowledge the reality of learners in our schools receiving an ancestral calling, but take no position on encouraging or discouraging the phenomenon. Nor do these guidelines deal with situations of illness such as epilepsy, hyperthermia, etc.

These guidelines seek to comply with the inclusive ethos and values of Catholic education for the common good, and to ensure that the school complies with the Bill of Rights and the Constitution. The overarching principle of these guidelines is to protect and safeguard the children and adults in our schools, and to align the schools' response with the policies governing both Public Schools on Private Property and Independent Schools.

2. Background

2.1 Brief introduction to the role of the ancestors in South African traditions.

In traditional African societies, ancestors play a very important role in the life of a family (or clan or ethnic group.) The ancestors (sometimes known as the 'living dead' or 'shades') continue their involvement in the life of the family, and the ancestors are included in the important events of the lives of their descendants. Their roles include giving guidance, protection, blessing, success, health and fertility, etc. to their descendants.

At significant events, families offer libations to their ancestors in the form of spilt drinks, snuff, blood of a sacrificial animal, or food.

Ancestors communicate to their descendants in various ways.

It can happen that an ancestor withdraws his or her protection from his or her descendants if he or she is displeased that the expected ritual respect is not being paid. In this case, misfortune may descend upon the descendants, which can only be reversed when the ancestor is appropriately appeased.

A traditional healer / diviner might be engaged to help to diagnose the cause of the misfortune. The prescribed remedy is frequently to celebrate a ritual in honour of the aggrieved ancestor. It must be emphasised that while there are similarities across many countries and ethnic groups in our region, each family has its individual relationship with its ancestors, and no blanket statement can be made in a document of this nature.

2.2 Christianity and the Cult of Ancestors

Many Christians participate in the cult of their family ancestors. This illustrates how the line between cultural practice and religious observance becomes very fuzzy in the context of

ancestors and Christians. “For both Christians and African believers, the sacred and the profane interpenetrate. There is no discontinuity between the two realms.”¹ Many Christians find no difficulty in simultaneously venerating their ancestors and attributing power to them, and worshipping the God of Jesus Christ. If in one system they do not find solutions to their problems, then they turn to the other system.

This raises questions, which are beyond the scope of these guidelines, concerning multiple-religious belonging (which is becoming more and more commonly recognised), and syncretism (which is generally not regarded as a good thing.)

2.3 Teaching of the Catholic Bishops of Southern Africa:

Archbishop Tlhagale wrote that “African traditional belief is not necessarily intrinsically incompatible with Christian belief.”² However, the teaching of the local Church is clear that there is a danger of confusion and misunderstanding. The two “both defy blind integration.”³ Archbishop Tlhagale points out that people who operate in both belief systems run the risk of divided loyalty, and compromising “exclusivist monotheism” by attributing power to the ancestors. He writes that this “reveal[s] a poverty of faith in *divine providence*.”⁴

In 2006, the Southern African Catholic Bishops’ Conference published a pastoral statement on “Ancestor Religion and the Christian Faith.” While focusing primarily on the unacceptability of Catholic priests and religious becoming traditional healers, the statement offers sound advice that may inform anyone considering the vocation a traditional African healer. A major concern is that the ancestors and their cult should not be a source of fear, because God alone is all-powerful. God alone is the source of all healing. Only God is to be worshipped and adored. Like the saints, the ancestors may be venerated, and we ask them to intercede on our behalf to the all-powerful God. The bishops strongly oppose witchcraft, fortune telling, magic medicines, and simony (demanding money for spiritual services.) Our devotion to our ancestors should involve praying that they may be purified, and find their final home with Christ in heaven.⁵

2.4 Brief introduction to traditional healing in Southern African traditions

Every society has people who are trained in the arts and sciences of healing. Indigenous knowledge systems incorporate ‘African’ ailments, diagnosis of these ailments, locally sourced plant and animal products, etc.

As in Western and Eastern medicine, the African tradition has practitioners with different specializations and techniques.

Consultation: for the person suffering from an ailment, the consultation with the healer is often an affirming, encouraging experience. The traditional healer takes time over the consultation, often using ritual objects, music and vernacular language, and always enquiring about the social and familial relationships of the patient, which might have a bearing on the ailment.

¹ Buti Tlhagale, “Diviner-Priest in the Catholic Church” Draft unpublished paper, 2005, 4.

² Buti Tlhagale, “Diviner-Priest in the Catholic Church” Draft unpublished paper, 2005, 21

³ Buti Tlhagale, “Diviner-Priest in the Catholic Church” Draft unpublished paper, 2005, 8.

⁴ Buti Tlhagale, “Diviner-Priest in the Catholic Church” Draft unpublished paper, 2005, 13.

⁵ See: SACBC “Ancestor Religion and the Christian Faith” Pastoral Statement of the Southern African Catholic Bishops’ Conference, (Pretoria: 11 August 2006.)

While Western practitioners consult a textbook about an illness, some African healers diagnose the ailment by performing a ritual in which they call upon ancestors to reveal the cause of the ailment. This is called 'divination.'⁶

Prescription: In the Western system, the prescription for the malady may involve taking manufactured medications, or a surgical intervention, specific physical exercises, etc. In the African system, the prescription can often involve ritual performance – alongside the taking of a remedy, or wearing of an amulet, etc. Sometimes some established “Western” medication might be prescribed for a patient in conjunction with the ritual activity.

Overall the experience of visiting a traditional healer can feel less alienating, or more 'holistic' than receiving treatment a Western clinical setting where one is given a few minutes to describe the problem, probed or examined for only physical symptoms, receives a script for what medicines to take, etc., and told to report back after a certain time if the symptoms persist.

More and more frequently, particularly since the onset of the HIV-AIDS pandemic, traditional healers work alongside “Western” healthcare professionals.

While the diviner is exercising his or her craft, the effectiveness of the ritual is enhanced if he or she remains sexually abstinent.

3. Vocation of a traditional healer

Generally the vocation of a traditional healer is a vocation for life. In many cultures, to be a traditional healer is not a vocation one chooses for oneself. The gift of healing is most often passed on from one generation to another, often down the family line after the ancestors have identified a member of the family who should inherit the gift.

The calling comes in a communication from the ancestors – frequently in dreams or visions or hearing voices, sometimes accompanied by mysterious illnesses. If the descendant is reluctant, or feels unprepared to follow the calling, the ancestors might become insistent: attempting to impose the calling to be a traditional healer. In this case the behaviour of the person being called may be disturbed by recurrent dreams, or misfortunes, seizures or convulsions, or episodes of possession by the ancestor, or sicknesses that defy western medical intervention.

As they are ordinary, fallible human beings, ancestors can be negotiated with, or appeased, and the calling can either be revoked, or postponed until the person being called is mature enough. This negotiation is not violent, and is conducted in a ritual way by the family of the person being called.

While there is a widespread belief that an ancestral calling is inevitable, Archbishop Tlhagale insists that ancestors are not superhuman, and have no moral force to compel descendants to do anything against their will.

3.1 Training and initiation of traditional healers:

The training of traditional healers is both scientific – learning the available plants and remedies – and spiritual – understanding and interpreting the movements of the spirits.

⁶ Archbishop Tlhagale is dismissive of this kind of 'diagnosis' as he writes: “Diseases and misfortunes are willy-nilly perceived as the result of disturbed or broken relationships between family members or between a person and his or her ancestral shade or simply as a result of invasion by a hostile spirit.” (p.13.)

This is learnt during an apprenticeship to an established healer (the *gobela*), or in a 'novitiate' alongside other aspirant traditional healers. The period of training, often three to six months, frequently involves a period of ritual isolation and purification, during which the initiate must abstain from certain activities and personal preferences. This may include forgoing sexual activities even if they are married, certain foods, contact with the outside world, visits from friends and family, etc. Specific rituals and clothing may be prescribed during the period of apprenticeship.

The training can be expensive, and can involve significant sacrifice on behalf of the family of the initiate.

The *gobela* will insist that the initiates be totally obedient to the ancestors and to him or her, and cannot safely go against them. However, at no time during the initiation process does an initiate abdicate his or her autonomy, rights and obligations as a citizen or a moral agent.

4. In the school environment

4. 1 Ancestral call of learners who are still in school

The work of a traditional healer frequently involves dealing with intimate secrets of the people consulting them. The vocation requires wisdom and discretion, as well as significant human maturity.

Traditionally, the ancestors do not normally select a young person to become a traditional healer.

In exceptional cases, the call to become a traditional healer comes to a younger person who might still be at school. In this case, the family may either permit the young person to undergo the training, but then ask the ancestors to postpone practicing until the person is more mature, or request the ancestors to delay the initiation until the child is more mature.

In either case, she or he may come under significant psychological stress. The thought of this call may be experienced as very disturbing of the young person's normal routine, and might manifest itself in distressing loss of control of their physical faculties.

It has happened that learners go into convulsions, or speak with unusual voices, or language that may be perceived as violent, abusive or threatening. This can disrupt the orderly running of the class, religious service, or recreation period. It might give rise to group hysteria, copy-cat episodes by other learners, or prove contagious in one way or another.

This may cause anxiety for other learners or teachers who find it difficult to manage the event.

4.3 Principles that should be followed

The following principles, many of which are based on existing best practices in our schools, should guide schools in relation to learners undergoing such calls:

The foremost concern is ensuring the safety of all children and protecting them and the school community from any potential harm.

- As the circumstances permit, the safety and privacy of learners who are experiencing such episodes, etc. should be ensured.
- The learners should not be teased or bullied by their schoolmates, or discriminated against by their teachers.
- The parents or guardians of the learners experiencing the episode should come to the school to take care of their child.
- The vocation of the learner should be discerned in tranquility and freedom by the learner in his or her family environment. The school respects the discretion of the parents or guardians, and their engagement with their chosen healthcare professionals.
- In these matters, the school does not claim expertise, give guidance, offer referrals, or make vocational choices on behalf of the learners.
- The principle of freedom of religion applies: Learners in Catholic schools are of many faiths or no faith at all. It is not the purpose of Catholic education to impose the Catholic faith on learners.

- No traditional healing consultations are to take place on school property.
- The principle of freedom of speech is exercised within parameters that prevent other learners from feeling unsafe, abused, or threatened.
- In the interest of teaching and learning, the orderly conduct of the school environment should not be disrupted.
- If the episodes persist, the learner does not attend school, and returns to school once the issue is resolved in the context of the family and their chosen healthcare professionals.
- In appropriate forums, discussion about traditional healing and vocation should be normalized, so that the learner experiencing these episodes does not become an object of curiosity or excessive attention.
- Genuine ancestral callings are not associated with “Satanism,” and do not require an “exorcism” of the learner suffering from these episodes. There are appropriate diocesan authorities who alone diagnose and conduct this specialised and exceptional ministry.

*Guidelines issued by the National Catholic Board of Education
January 2024*