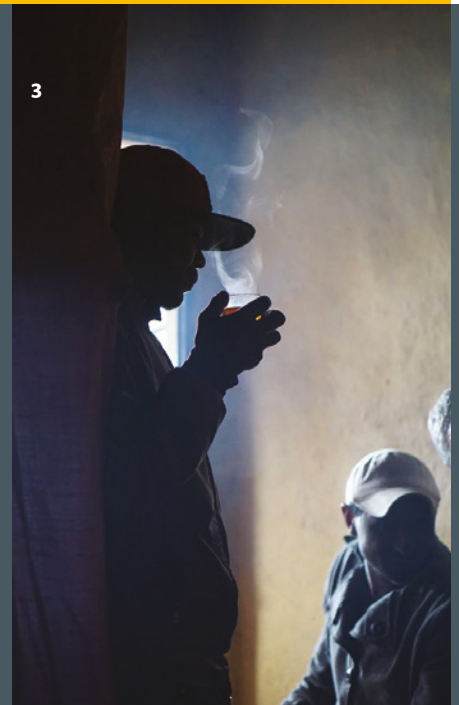


SMOKE SIGNALS

The smoky cultural phenomenon that's being called into question.



Smoke is bad. Smoking cigarettes is bad for our health. Smoke pollution is bad for our health and for the environment. In the modern Western world, there is little positive to be said for smoke.

The opposite, however, is true in the country of Ethiopia. Here, whilst cigarette smoking is not prevalent, smoke that is produced from burning a number of long recognised plant substances is engrained in the culture. It is used for healing, cleansing, purifying, scent, the daily ritual of the coffee ceremony, and even exorcism.

It's a fascinating cultural phenomenon that is attracting the attention of two Southampton researchers from two very different areas of expertise – Dan Levene, Professor of Semitics and the History of Religion, and David Phillips, a professor from the Department of Medicine.

Thanks to a mutual interest in Ethiopia and through their respective areas of interest, Dan and David have joined forces to better understand the significance of smoke within Ethiopian culture, as well as its impact on citizens' health. The work also involves several Ethiopian collaborators and universities.

Having both spent a lot of time in Ethiopia, they found the use of smoke in everyday life is impossible not to notice.

David explained: "There are a lot of cultural misunderstandings and clashes between modern medicine and traditional beliefs. There are also many areas where there is an intersection between culture and tradition, and modern medicine. This is a unique

collaboration – Humanities and Medicine coming together to better understand the culture of smoke and its impact."

The power of culture

Prior to investigating the impact of smoke on health, David's medical research has focused on the health problems in Ethiopia.

"While medicine has made great strides in controlling the major infectious diseases typical of the tropics, the country now faces an increasing problem from the emergence of Western diseases such as diabetes and heart disease," he said.

Although people in Ethiopia are beginning to get better access to treatments for these diseases, attendance at outpatient clinics is still poor, and a major problem is something called Loss to Follow Up, or LTFU. This is when a patient seeks initial advice and treatment, but then fails to attend any follow-up appointments or to take the prescribed treatment. Although there are a number of reasons for this, Dan and David have found that the communities' cultural beliefs are a major contributor.

Dan, who spent two years of his childhood living in Ethiopia, explained further: "A big issue that David and I found common ground on was poor patient engagement and high rates of LTFU. So, in a typical rural population, only about 15 per cent of the affected patients find their way to a clinic. Of those 15 per cent who get there and get a diagnosis, 65 per cent of them stop treatment within a short time. The problem is a whole panoply of alternative indigenous treatments that are often more available, are deeply culturally embedded and which they get involved in instead."

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1 A market stall selling materials to burn for smoke

2 Local Ethiopian artwork depicting smoke

3 In a coffee shop near Addis Ababa

4 A domestic kitchen in a private home

5 Making the traditional equivalent of bread, known as injera



The Force of Faith

<https://youtu.be/8xgKhQQUrbo>



Smoke and Fumigation in Ethiopia

<https://youtu.be/MKonZ5xo8Fw>

“If someone comes to a clinic and is told ‘you need to take pills for the rest of your life’, they will say ‘but the traditional healer said that he can cure me in two weeks,’” added David. “The local word for ‘pill’ also means ‘cure’, so they expect to take a pill and be cured. So, instead, people turn to holy water, witchcraft, herbal medicine or the use of smoke.”

In 2015, David and Dan won a grant from the Wellcome Trust to research the issues of LTFU and Ethiopians turning to alternative medicine and treatments.

Dan said: “It’s not just Ethiopia not understanding modern medicine, it’s modern medicine not understanding indigenous ways of thinking.”

Using their Wellcome Grant, David and Dan published a paper exploring the impact of traditional beliefs on the success of modern medical care in Ethiopia, and made a film called *The Force of Faith*.

“This is a unique collaboration – Humanities and Medicine coming together to better understand the culture of smoke and its impact.”

Professor David Phillips
Department of Medicine

Seeing through the smoke

Since their work on LTFU, their focus has shifted to the subject of smoke. Smoke is not regarded as a health hazard in Ethiopia – in fact it’s seen as the polar opposite.

“Smoke is used as a purifying or cleansing agent in Ethiopia,” said David. “If there is a sick child, or someone has a sore throat, they will light a fire and fill the room with smoke. Fever is regarded as something you have to smoke out.

“At the moment there is a big push in Africa to reduce air pollution. As few people have cars, the main focus has been on reducing involuntary exposure from the use of open fires in homes. However, being in Ethiopia, we realised there is a big cultural dimension that people have ignored.”

The country has a wide spectrum of materials that are burned to produce smoke for a whole variety of reasons – fumigation against insects, treating illness or skin problems, burning incense, for exorcism, or to promote health and beauty in women.

“But the potential health impact of creating smoke is completely ignored – the mindset is that it’s part of the way of life,” added David.

The pair have recently been awarded a grant of £10,000 from the Association of Physicians to research the prevalence and use of smoke in markets and private homes. They have visited the Wollo province of Ethiopia and its

capital city, Dessie, where they have so far surveyed 300 people.

They have also collected a variety of materials from the Ethiopian markets back to the UK that include barks, grasses, leaves and incense. These are being examined at a specialist laboratory where the equipment is available to burn materials and examine exactly what is coming off them.

“Smoke is pervasive,” said David. “Seventy per cent of households use smoke – it’s part of their culture. They refer to ‘smokes’ in the plural, as they use smoke for different purposes. It has taken us a long time to get our heads around it, because we are so conditioned in the West that smoke is bad.”

Dan and David are in the process of writing an extended paper on their findings so far, and are also working on another short film.

David concluded: “This issue has historically been ignored. We want to learn more about it, as it’s a cultural phenomenon that is potentially impacting people’s health. We want to bring it to people’s attention, whilst bearing in mind that it’s culturally very sensitive.”

