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This thesis studies medical beliefs and practices in Ghana. Its aim is to analyse the kind of social interaction/social relations inherent in informal communication in health-seeking behaviours. The primary aim, however, is to look for people's social meaning of illness-- what sense they make of illness-- in the interplay between informal communication and health-seeking activities.

The study is based in Twuim, a rural fishing village in Ghana. It is descriptive, exploratory, and largely ethnographic in approach. The ethnographic data is based on more than five months of participant observation fieldwork and unstructured ethnographic interviews with 33 respondents.

Social relations and interaction are important in informal communication in the quest for therapy. The family emerges as the unit for therapy communication and social relations. Thus, three case studies are presented as part of the analysis of the family and therapy discussions.

This study shows that people make sense of illness through known relationships with people such as family members and care providers, and known cultural categories such as witchcraft/oracles and biomedical health care promotion. Through these mechanisms, the people derive their social meaning of illness largely from both natural and supernatural ideas about illness.

The analytical focus follows Arthur Kleinman's model of sector analysis of medical systems, which uses the structuralist approach. The other framework is the analysis of discourse, following Michel Foucault.

One of the main conclusions is a suggestion for the integration of biomedicine and traditional medicine in Ghana as a way to expand the country's health care resources.

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