Psychotherapeutic Values of Igbo Healing Practices: The ‘Umunna Psychotherapy’

Innocent U.O. Ejiofo,
Department of Psychology, University of Ibadan, Nigeria
Email: udobuchinno@yahoo.com

Abstract
It had been observed by some researchers that psychotherapy should include effective emotional healing activities of African traditional healers, religious faith healers, and African originated forms of psychotherapy. This has not been achieved. To this effect, this study investigated how the Igbo healing practices can be harnessed into psychotherapy interventions and techniques. The main argument here is that Igbo traditional healing practices both the cultural and religious, have definable psychotherapeutic values; hence, the need to provide some theoretical and practical bases for recognition and adaptation of these practices into general and specific forms of psychotherapy.

The research adopted a qualitative approach based on key informant interview (KII) of four purposively selected native doctors, four spiritual kings and four clergy men: two Catholic priests and two Protestant pastors from a purposively selected local government area in Anambra State, Idemili North, in the Southeast Nigeria. Intensive structured interview method, where seven specific questions were used to elicit information as concerned both the spiritual and traditional ‘psychotherapeutic practices of the Igbo people’ was adopted. The information gathered were thematically analyzed based on the information of the participants, principles of Gestalt psychology and macro ethical categorizations, and the general Igbo philosophy and world-view, especially as express in idioms, names and proverbs; and in comparison to euro-western views of psychotherapy.

The results revealed that ‘psychotherapy’ had been in existence in Igbo cultural traditions for a very long time; having diagnosis (includes listening, questioning, examinations, consultations, divination) and interventions (involves sacrifices and ikpu alu, among others) as its major procedural parts. It also revealed the Igbo Concept and Sources of Psychopathology, and Some Qualities that are Common to Most Igbo ‘Psychotherapists’. It also revealed that the most popular technique in use is the ‘Umunna’-centered technique. Cultural aptness, acceptability, affordability, availability, effectiveness, low cost, inclusivity, wholesome restoration, zero percent chance of relapse and adoptability were found as some major advantages of Umunna ‘psychotherapy’. It was also observed to provide high levels of psychological, spiritual and social supports for the clients, and these in turn, lead to high restoration of eudemonia within a calculated period, both of the client and his/her umunna. Though simple and unique, it covers a wide range of psychotherapeuticism. However, the issue of confidentiality is of no interest to the Umunna psychotherapy.

Based on the values found, the study recommends Umunna ‘psychotherapy’ to all psychotherapists, both as a type and a technique, and both within and outside the Igbo cultural regions.

Key Words: Umunna, Ogwugwo, Dibia and Psychotherapy.
Introduction

Some researchers have highlighted the need to recognize and integrate traditional healing practices into modern psychotherapeutic procedures. Madu, (2013, pp. 11 & 13) observed that “we should be broad-minded on our definition of psychotherapy to include not only the universal principles of human behaviour inherent in the western oriented methods but also some effective emotional healing activities of the African traditional healers, religious faith healers and the in-African-originated forms of psychotherapy”. This is not surprising because it had been observed that such traditional healing practices have the same therapeutic values that modern psychotherapy offers humanity. The goal of psychotherapy is, to a large extent and not solely, to provide cognitive and emotional support towards altering beliefs about behaviors associated with psychopathology. In other words, most psychopathological cases are derived from certain beliefs and practices held by individuals across cultures and traditions. It is also a major aim of psychotherapy to ‘heal’ wounded life and restore life to depressed and frustrated individuals. These two major purposes, inter alia, are achieved too, through Igbo healing practices.

To this effect, the healing practices of Igbo culture, both the spiritual and traditional and their understanding of psychopathology need to be paid closer attention since it is always necessary to make a link between etiology, assessment and treatment. To achieve this therefore, one still needs to revisit the Igbo general view on Psychopathology, the general causes and the intervention. This work investigated this in an Igbo setting, Idemili North local government of Anambra State in Eastern Nigeria.

Like of many other parts of Africa, traditional religion was at the centre of Igbo identity and it was rightly said of them, their religion is their very existence and their existence is their very religion (Ejiofo, 2002). An Igbo person, like many other Africans generally, has no life different from his religion. Hence, it was not surprising to observe that the challenges of Christianity, secularization, modernity, science and technology did not succeed in uprooting Igbo Traditional Religion (ITR), albeit diminished. A major therapeutic aspect of this ITR is a strong belief in the healing power of ‘Chukwu’ directly or through their representatives: ndi Ezemmuo na ndi Dibia (the traditional chief priests and the native doctors). Very influential also in their healing method is what they believe that ‘caused’ the ‘ill-condition’; hence the need also to discuss the Igbo concept of psychopathology. At present, the role of clergy has also been observed in the healing practices of the Igbo people; and this is the one reason why this work has deployed two catholic priests and two protestant pastors as participants in the study.

Statement of Problem

Igbo culture had ways of handling psychopathology. These included all forms of effort to get the disturbed mind settled like using leaves and roots, consultations from the ancestors (Igba afa), psychosocial activities, divinization, sacrifices, and some others. Till today, all of these are still in used and some additions being made depending on the ‘psychotherapist’ in question. The clients always have choices to make. Indeed, Ebigbo and Ihezue, 1981, reported three kinds of clients in the black region of the African continent: the traditional, the mixed and the western oriented types. Their acceptance of African forms of psychotherapy varies and very low
One is then tempted to ask, why do many Africans and of course Euro-Americans generally refuse the African originated forms of psychotherapy, while they swallow hook, line and sinker, any form of psychotherapy that is Euro-American originated?

Both their traditional and religious practices and their understanding of psychopathology have been helping ndi Igbo to handle all their mental health challenges. This however, had not been without some attendant difficulties. Furthermore, the advent of modern psychotherapeutic procedures appeared to have reduced and undermined the age long Igbo traditional healing practices. But it seems, at the same time, that it is offering some help towards alleviating the difficulties encountered in Igbo traditional understanding of and intervention on psychopathology. It also appears that the modern idea of psychotherapy is not well accepted among many ndi Igbo for some reasons. Yes, granted that no one doubts the influence of euro-western culture, one other major reason for the non-acceptance is that the clients and their relatives do not understand those psychotherapeutic interventions and managements. Efforts had been on to explain them: Harmony Restoration (Ebigbo, 1995), Ubuntu, and Meseron (Ofovwe, 2005). Ubuntu was reported by Nefale and Van Dyk in 2003 as a South African psychotherapeutic concept which is both religiously and culturally based; and refers to a broad sense of oneness and cooperation in a given community. While these have some merits, they are still having serious challenges. Ejiofo, U. I., 2014, discussed the issue of Umunna Centered Psychotherapy but with limited participants and was not even in details. Hence, there is still the need to investigate more into the psychotherapeutic values of Igbo healing practices with the Umunna centered psychotherapy as a reference point, for better understanding. This, hopefully, would result to better acceptance of the practices among the human populace.

Research Questions
This study proposed to provide answers to the following questions: Do the Igbo cultures have specific understanding of psychopathology and unique healing practices? What are the roles of the clergy and the traditional Igbo ‘psychotherapists’ healing activities, spiritual or otherwise? What is the Umunna centered psychotherapy and what specific advantages does it have? Are there some values psychology can adopt from the Umunna centered psychotherapy in order to improve or add to the general realm of psychotherapy? Are there some disadvantages of the Umunna psychotherapy that need to be handled?

Purpose of Study
The major purpose of this study therefore was to examine the psychotherapeutic values of Igbo healing practices with deeper attention on the Umunna centered psychotherapy. This would be achieved by investigating the roles of the clergy and the traditional Igbo ‘psychotherapists’ in the whole activities of healing and wellbeing. It would also explore the Umunna centered psychotherapy and what specific advantages it has. It would then study how such advantages and values can be adopt in order to improve or add to the general realm of psychotherapy. Finally, it would examine some disadvantages of the Umunna psychotherapy and see how they can be addressed.

Significance of Study
This study is original in the sense that it is the very first work to emphasis on the
importance of Umunna centered psychotherapy. Its major significance is on providing scientific records of the values and advantages of the Umunna psychotherapy. Again, some false and irrational beliefs among the Igbo people would be eliminated and this would go a long way to put an end to some false healing methods among the people, while improving the good ones. This certainly would lead to a better mental health for the people. This study would also achieve scientific approach to Igbo understanding of psychopathology leading to improvement on other psychotherapeutic interventions among ndi Igbo. The study would also improve the general practice of modern psychotherapy by providing some Igbo psychotherapeutic ideals it may imbibe.

Concept of Psychopathology
The term psychopathology has been defined from many angles by different schools of psychology. Common to almost all the definitions is the acceptance that psychopathology can be a study or a health condition. Etymologically, it is derived from two Greek words and one Latin word: psyche, pathos and logos, meaning mind, disease and study respectively. Literary therefore, the word ‘psychopathology’ means the study of and/or the disease of the mind. Colman, (2003) defines psychopathology as the study of mental disorders; another name for abnormal psychology. Schwarz, et al. (1993) defines psychopathology as the part of psychology that deals with abnormal workings of the mind; an abnormal psychological condition. This particular definition brings out the two aspects of the term: a discipline and a condition.

From the point of view of philosophy of psychiatry, the term psychopathology is used in a variety of contexts. Mostly, it refers to the philosophical and scientific study of mental disorders to denote behaviors or symptoms that are indicative of mental illness, such as hallucinations and delusions. In the current DSM and ICD, four major characteristics are generally associated with this kind of condition despite the views of different perspectives: deviance, distress, dysfunctioning and dangerous. In brief therefore, one can conclude that psychopathology is the scientific study of the origin, development, manifestation, causes, classification and treatment of behavioral or mental disorders.

The earliest explanation of what is now termed psychopathology was an idea of possession by evil spirits and demons. This idea was used to explain all forms of bizarre behaviors associated with mental illness or any other seeming behavior that was not within the knowledge of the then world. The wrong understanding of the condition also led to wrong use of intervention mostly, a tortured and even trephination in an attempt to drive out the demon, Morgan, (2006). From the eighteenth century, better understanding based on medical perspective ushered in better interventions. This medical perspective of psychopathology continues to the present day to inform the intervention employed.

Morgan, (2006) observed that in everyday life, the terms insanity, mental illness, psychopathology, emotional disturbance, behavior disorder, mental disorder, abnormality and psychological disorder have roughly similar meanings. All are often applied to behavior that is highly unusual. According to Omoluabi, (2009) however, Psychopathology as a concept is different but much related to ‘Abnormal Psychology’, ‘Clinical Psychology’ and ‘Abnormal Behavior’. Models of Psychopathology include statistical, sociological, medical, legal, ideal, nuisance,
unpredictable, personal distress, objective evaluation and theory-based models.

**Concept of Psychotherapy**

In defining Psychotherapy some researchers approach it from professional or practical point of view, while others see it as all-encompassing concept. Etymologically, the term ‘Psychotherapy’ is derived from two Greek words: psyche and therapeia, meaning, mind and treatment, service or cure, respectively. Psychotherapy, literally, means treatment, service or cure for the mind.

For Eysenck (1952), psychotherapy is the use of psychological theories and methods in the treatment of psychiatric disorders. Davidson and Neale (1996) defined psychotherapy as a primary verbal means of helping troubled individuals change their thoughts, feelings and behavior to reduce stress and achieve greater life satisfaction. Colman (2003) defines psychotherapy as treatment of mental disorders and allied problems by psychological methods. Schwarz, et al. (1993) defines psychotherapy as treatment of mental illness by hypnosis, psychoanalysis and similar psychological means. Day (2004) sees Psychotherapy as the systematic application of techniques derived from psychological principles by a trained and experienced professional therapist, for the purpose of helping psychologically troubled people. Madu (2013) sees psychotherapy as the process that enables people to express their feelings in protected environment to a person trained to listen with understanding and compassion. The process helps people reconnect with and honor their roots, affirm their identity and develop healthy ways of being in the world. From the foregoing, it can be observed that psychotherapy is a process of improving the mental wellbeing of mentally disturbed individual.

Psychotherapy has a developmental history from Psychoanalysis (Freud 1920s) through Behaviorism, Humanistic and Cognitive to the Modern combined psychotherapeutic interventions at the present. It has many modes of expression, many techniques and is of many types. The major aim of psychotherapy is to improve mental or psychological wellbeing of human individuals. In Igbo culture however, psychotherapy is provided majorly by the traditional and Christian priests and kings through faith-healing and traditional healing practices. Before delving into these properly, this study discussed the Igbo World View, Igbo Concept of Psychopathology, and the Sources of Psychopathology according to the Igbo Beliefs.

**Igbo World View**

According to Mbiere, (2014), Igbo people are located in south-eastern Nigeria, with a population of over 50 million.... The Igbo people of Nigeria are actually those whose natural homes are in Igbo land; their language and culture are called Igbo, thus Igbo language and Igbo culture. Indeed the word ‘Igbo’ is usually used in three senses: to refer to the territory (Igbo land, the states are Abia, Anambra, Delta, Ebonyi, Enugu, Imo and Rivers), to the speakers of the language (the Igbo people) and to the language itself (Igbo language).

Nigeria is a wonderful country with a complex and fascinating history and culture. Igbo is only one out of about 250 ethnic groups in Nigeria, albeit, one of the three major ones, including Hausa and Yoruba. According to Williams, (2008), Igbo people are one of the largest and most influential ethnic groups in Nigeria. One characteristic almost all Africans share is communality.
Africans are community conscious people. Respect for human life and for one another especially for the elders is another catching quality existing almost across all African countries.

Mbiere, (2014) observed that one can always tell the spirit of a people by the qualities they admire. Ndi Igbo are known for their hospitality, caring for the sick and the aged, friendliness, safeguarding and protection of human life, health care, sympathetic, hard work, tolerance, courage, virtuous, communal living (umunna) and integrity; indeed, ‘ezi afa ka ego’ – ‘good name is better than wealth’. The Igbo hardly ever resign to fate despite their belief in ‘akalaka’, destiny. To the ancient Igbo, discouragement is a sign of weakness; and for that, they hardly give up or get discouraged once they made up their mind on something. They believe in hard working and being content with whatever one has:

*Obosi apu Oru-ukwu ma Oru-ukwu atu Obosi n’anya*. These qualities make them successful anywhere they found themselves. Indeed it has been said that if you go to any part of the world and do not see an Igbo person better don’t spend one more second there. Some other characteristics of ndi Igbo are discovered in their philosophy of life.

To understand an Igbo individual, his behaviors, traditions, beliefs, identity and practices, a brief Igbo world-view is both significant and necessary. The Igbo understanding and interpretation of the world is, like the Gestalt’s Psychology, holistic. This holistic nature involves virtually, all things about him, from his conception of himself, his immediate environment to the whole world. Like the macro categorization in ethics, it is all embracing. According to Nwala, (1985) the Igbo worldview refers to the complex of beliefs, habits, laws, customs, and traditions of the Igbo people, which implies among other things, their overall view of reality, the universe, life and existence, their attitude to life and to things in general. A critical look at the Igbo world-view would throw light on the rationale of their philosophy. Everything about them is meaningful. Their understanding of reality is connectedness, - cause and effect, ‘*a kwaa agadi nwaanyi ajo aka, ajo ikwu apuo ya n'onu*’. The Igbo traditional understanding of the world and reality (the Igbo cosmology) has a large scope. However, since the concern of this research was, ‘how ndi Igbo study the disease of the mind in relation to the causes, prevention and cure, this was scoped down to their views on psychopathology, psychotherapy and faith healing.

**Igbo Concept of Psychopathology**

*Ndi* Igbo cherish health and value life above every other thing. They do everything possible to keep healthy and avoid illnesses or even death; hence the concept of *Ndakaaku*, (also *Ndukaji*) meaning, life is greater than wealth; and *Mmandu*, meaning, the beauty of life or human being. Complete health for *onye* Igbo is holistic: body and mind. Physical health is not a mere existence but full living: *nke a i di, o bu ndu?* They do not hide illness; for them, ‘*onye zobe oria, oria ezobe ya*’ (if one hides illness, illness would hide the person). *Ndi* Igbo believed in the variety of ‘*oria isi*’ – ‘*ara di n'udi n'udi*’, there are different kinds of insanity’. One misunderstanding they have about insanity is that once an individual suffers from mental illness, he or she would hardly be completely normal again: *dibia gwochaa onye ala, o naghi akwusi ntamu*.

An informant, Dibia Agunaechamba, observed that what *ndi* Igbo considered to be psychopathology, strictly speaking, do not involve some emotional problems like anxiety and distress. These, for them, were
daily ‘normal’ occurrences, which at most, needed some family attention. Any health condition that did not involve the ‘psyche’, and or serious bizarre behavior, which they generally described as ‘oraisi’ (insanity or ‘madness’ in the common parlance: expressed in ‘iwiala’, ‘isimgbaka’, ‘alaopu’)) was not considered psychopathological. It was majorly this condition or any other serious physical ill-health conditions (oria ahu) that were considered as needing the attention of the Ezemmuo or Dibia. Some dibia specialized in oria ahu while others specialized in oria isi and many still intervene in the two.

Iroegbu (2005) refers to it as behavior at odds with the expected proper behavior in the household and society. It hinders appropriate sensory interaction and thinking. People considered sane are meant to be able to carry on their usual daily cores, balance emotions, handle problems in a positive manner, develop self respect and show deference as well as take appropriate initiatives. Those trapped by insanity experience a significant impairment of thought, emotional instability, distorted perception, wrong orientation, and confused memory, even live with inability to meet the ordinary demands of life. Common warning signs of insanity are many and varied. A person may exhibit one or several symptoms of incapacitation, such as withdrawal from contact, chronic fatigue, confused or altered thinking, inappropriate expression of emotions, and loss of touch with common reality. Other such mental troubled signs include distorted ability to cope with challenges, inability to take care of oneself, one’s needs, one’s display of self, as well as insensitivity to violence towards self or other, and exhibition of delusive and hallucinating mannerisms. He further observed that insanity signifies that society has failed to properly handle its inner conflicts and problems. Where that is the case, it is assumed that it thereby gives a hole for the evil forces to penetrate and derail the weakened person and his or her network, undo his or her identity and sense of responsibility, morality and honor. This shows that insanity is largely an incidence onto which a community transfers its own weaknesses, paradoxes, difficulties, while at the same time using the insane to heal or recover.

Sources of Psychopathology among ndi Igbo

Mbiere, (2014) observed that like every African’s world view, the Igbo man employs myths to express and explain his vision of the world and the universe in general, for example … the sense of good health, the reasons for sickness…. It depicts also in a special way the people’s quest for survival. This quest for survival is embodied in the search for good health, and presupposes an awareness of the sources of trouble, which can also be taken to be both terrestrial (human) and supra-terrestrial (spiritual). Making an inclusive list of what ndi Igbo considered the sources of psychopathology, [Madu & Ohaeri (1989), Madu, (2013)] included punishment from the gods for evil done, a wicked eye look, a curse, witchcraft, an offence against the gods, a disruption of harmony in one’s earlier life, jujju (native charms), natural causes, break of taboo or native customs, a disruption of social relationships, angry ancestors, evil possession, possession by the devil, or an intrusion of objects. Madu (2013) also writes that research studies conducted in the more recent years suggest that most of the Africans in the past (and many even at present) believed that sickness originated from one or a combination of the above.

An informant, an Ezemmuo, revealed that in Igbo world-view, there are five major
sources of psychopathology and these include: Taboos, Witchcrafts, Courses, Charm and Destiny (the most powerful source). Generally, there are certain actions ndi Igbo considered as constituting taboos. Specifically, these relate to human beings, like murder or giving birth to twins; animal, like killing or eating of pythons; speech, like vowing to kill somebody and the person finally dies; object; behavioral and place, like entering into a masquerade arena if you are not initiated. Witchcrafts are generally seen from two major angles: witches and wizards, and they are those who were by nature believed to have the ability to inflict evil on others. Charms (generally called Ogwu, which is also a name given to drugs generally in Igbo culture) as source of psychopathology is some physical materials to be accompanied by some specified words prepared by a dibia for somebody to use against another person. The idea behind course as a source of psychopathology was based on the power of speech. Words were believed to be very powerful and effective. Destiny is considered the most powerful source of psychopathology in that the above mentioned four sources can only affect someone if his or her destiny is not strong. This is portrayed in the following expressions: ‘Mmadu abu chi ibe ya’; ‘Onye chi ya mu anya, ihe anaghi eme ya’; ‘Onye kwe, chi ya ekwe’; ‘Ihe onye na chi ya kpara’, as already explained.

Concept of Faith-Healing (Fide-therapy)

Faith generally, is a condition that enables the human individual to succeed in life, giving meaning to his or her existence. Faith has to do with beliefs, cultures & practices accepted by an individual. The power and efficacy of faith is recognized in all therapeutic interventions. The Chambers Dictionary defines faith as trust or confidence; belief in the statement of another person; belief in the truth of revealed religion; confidence and trust in God; the living reception of religious belief. Encyclopedia Britannica (1975) defines healing as the diagnosis of the cause of evil and mental and physical sickness, and the development of techniques for its cure. According to the Catholic Encyclopedia, Faith Healing is an attempt to use divine power as a natural curative agent that is hindered only by insufficient confidence on the part of the sufferer.

In general, believers in one religion or another had claimed that they have their illnesses healed without any medical care but through prayers and beliefs that God would heal them. Some have particular rituals they follow in order to achieve healing through faith while others do not. Generally, faith healing is dependent upon three persons: the sick, the relative, the healer and God or the gods, who must always be present. Sometimes, individuals’ have claimed to receive faith healing without any ‘healer in sight’ who has administered the healing. In some others, not just that the healer must be present, he or she must also have some other ‘tools’ in addition, which are considered as channels through which God works in order to effect healing. This study described as faith-healing, health restoration and the process involved in achieving it through religious beliefs and practices rather than through medical treatments. Here, faith is seen as being adequate in producing an expected result of wellbeing for an individual who is disturbed.

As a concept natural to every age and culture, there is no particular order faith-healing follows. The consideration is on what makes a particular restoration to be termed faith-healing: that a sick person is restored through some expressions of beliefs, whether by the individual himself,
his relatives and/or a healer, without any medical intervention while trusting that God would do it. Hence, faith-healing is also called divine healing or divine cure. The situation must have proved to be a condition normal body defense mechanism could not restore. Faith healing has a real effect: an individual who was previously ill is ‘seen’ no longer ill. The whole idea is based on the strong belief that faith can suspend natural laws.

Faith-healing, however, is still an issue science considers absurd because it is not replicable. For the scientists, it is dangerous to believe in it especially when it prevents an individual from seeking medical interventions since more serious health condition may arise if the expected faith-healing did not result. Making absurd of this scientific position however, Barber, (2011) argues that ‘a placebo resembles faith healing; yet faith healing is usually considered more a matter of belief in magic and the supernatural rather than confidence in the science of pharmacology. From a scientific perspective, faith healing is unexplained, incomprehensible, and should not work. Yet it does work. The same is true of drug placebo effects, of course. Scientists recognize that there are placebo effects but have trouble accounting for them. If you grew up in a superstitious country, chances are you experienced faith healing’. It is therefore only if and when one decides to experience faith-healing relying on supernatural powers that he may achieve it; hence, this is considered a spiritual therapy for those who believe. Faith in divine healing, in addition to use of drugs and or psychotherapy have proved effective intervention in restoring wellbeing. This becomes the meeting point between medication, psychotherapy and faith-healing. It is however observed that the tool of faith-healing, like any other tool, can also be abused by charlatans.

**Igbo Concept of Psychotherapy and Faith-healing (ogwugwonso)**

The whole idea of psychotherapy and its practice in Igbo culture of Nigeria in Africa stemmed up from her beliefs on the causes of psychopathology and her trust in the healing power of the maker of the people, ‘Chi okike’ (God the creator) also called ‘Chi-ukwu’ (mighty-God). They also believed that other major and minor gods can restore health too. These informed their belief in and the practice of faith-healing and general psychotherapeutic interventions. The term ‘ogwugwo’ is used by ndi Igbo to denote healing that is total and ‘ogwugwo nso’ means faith healing. Ogwugwo involves all the processes followed in order to cure any ailment, be it physical or spiritual, and the result of such processes. According to Iroegbu, (2005), paths and phases of aetiology and treatment of the insane involve many diverse rituals, as well as medicinal root and herbal treatments. Ndi Igbo indeed, easily consume pharmaceutical drugs. And yet, most people do rely on indigenous expert healers and folk remedies for more than half of their health needs, and most strongly in cases of lasting illness and when insanity, ara, is at the horizon. These indigenous expert healers are called *ndi Ezemmuo na ndi dibia*. For Mbiere (2014), a dibia is both a restorer and a transmitter of life, a healer, medicine man/woman and priest. The healer is one who blows away and binds the maleficent forces and crises that disturb the individual and society. Healers engage in a great number of ritual and healing activities to address ailments, illness, social and cosmological disorders. A healer’s fame rests on his level of training and the form of expertise. A dibia is elected
to this function by the great medicine deity, known as agwu.

Ndị dibia are generally categorized into three major groups according to their training and area of specialization: general nature, physical illnesses and mental illnesses. Some however combined the three functions. The one involved in handling mental illnesses is Dibia Ara (Insanity Doctor), who may also deploy the services of Dibia Afa, or Dibia Ogbaaja (Divination Diagnosis Doctor); Dibia Amaosu (Witchcraft Doctor); Dibia Anyaodo, or Ezemmuo (Priestly Doctor); Dibia Mkporogwu (the herbalists). There was also a belief in the strength of akpan-wadibia (the bag of a medicine man); which include the medicinal content, all available tactics, expertise and experiences a dibia has at his disposal. They also identify the power of a dibia sometimes to the fate or destiny of the sick one: ‘na dibia ana-agwoka bu na o zuru oria na una ya’, a dibia is powerful because he meets a disease when it was about to go from the sick one.

Despite the great powers of dibia, greater than dibia in everything, healing insanity inclusive is Chukwu, hence the Igbo popular name: Chukwukadibia, (God is more powerful than the Dibia). Ndị Igbo says, ‘ome ihe jidekwo ogu, n‘ihi na Chukwu ka dibia agwo oria’, have a good conscience since God heals more than the dibia.

Ndị Igbo believed very strongly that ‘mgbochi oya ka o gwugwo ya mma’ – prevention is better than cure. This is why they do everything possible to avoid any form of illness, whether of the body or of the mind. Because they believed that God is author and sustainer of life (Chiokike na Chijindu.), they believed that being at peace with him would eliminate any form of sickness. They made sacrifices to Him and other gods (even with human lives), worshiped Him and other gods anywhere and in anything they suspected their mighty presence (some animals, some natural structure like rivers) and venerated their ancestors. This is why onye Igbo (an Igbo person) appreciates moral living and believed strongly that ‘ezí afa ka ego’- good name is better than wealth; since ezí afa attracts wealth and health from God and the gods. Onye Igbo would do all within his power to maintain a cordial relationship between himself and the spirit world. Himself here, include all about him: his immediate and extended family members, his clan and his whole town; this is because they believed that ‘otu mkpisi aka luta mmanu, o zue oha onu’ – literally meaning when a single finger gets in touch with palm oil, it spreads to all other fingers. By implication, it means that if an individual commits any taboo, the wrath of God or the gods may visit the whole community.

When however they discovered that sicknesses did not leave them despite all they did to prevent them, they, like the Jewish people, came to the conclusion that sicknesses were associated with the punishment of the God or gods on the hidden sins individuals committed unknown to the community. (cf. John, 9: 2). The next issue was what must we do about the sick ones? Based on the causes they believed they have found, they held that the solution was ‘ikpu alu’ – literally meaning, removing the sin. The only way to do it then, was still to appease God and the gods; and the best way to do this was offering sacrifices and more sacrifices! They, who had the ability to commune and communicate with God and the gods, sought his face and discovered his healing powers in ‘afifia na mkpologwu’ – (leaves and roots). Iroegbu (2005) had also reported that, Igbo healers summon the belief that
certain trees can overhear and record conversations, sounds and signals, and therefore they conceive of them as dwelling places and domains of extra-human forces. Trees and humans interact in rituals involving birth, growth, marriage, health, illness and death. One of the informants, a dibia, Ezekwemkpologwu, observed that the word of God in Ezekiel 47 about the healing power of some leaves was running in our culture before we knew the Scripture. The healing power was also discovered in ‘nzu na aja-ala’ (chalk and earth sand). More importantly however, the healing powers were also extended to those who represent God and the gods, ndi Ezemuo na ndi Dibia. Their touch, words and tools had the ability to cure the people even in the absence of the above named materials.

There were also some major ways to ensure maximum health, maintain wellness or restore them when lost. The Igbo culture, like of many other Africans’, places the human person at the very center of the world and even of his own destiny: onye kwee, chi ya ekwee, (if one accepts something, his ‘personal god’ or guardian angel will also accept it). Despite this human centeredness, the Igbo recognition and respect for the spiritual world, and the role of God and the gods in the life of every individual is supreme: Onye chi ya mu anya, ihe anaghi eme ya, (if one’s personal god is watchful, no evil would befall him). This expression is actually used in acknowledging the fact that no matter what the enemies, witches and wizards would want to inflict an individual with, once his God is alive, it would not work; hence the absolute desire of every Igbo person to be in good terms with God and the gods. It is also believed that some psychopathologies are the manifestations of agreements between the individual and his creator before s/he was born: o bu the onye na chi ya kpara, - the ill-condition is an agreement between the individual and his personal god.

Weak referral services from some Clerics, Ezemuo and Dibia constituted serious danger to the development of psychotherapy among the people. This explains why many clients die in the hands of the so called therapists, psychotherapist and faith-healers. Each doctor, each priest, as well as each method of healing were termed ‘ogwonnuoya’ (the one-for-all ideology).

The original and traditional religion of ndi Igbo is ITR (Igbo Traditional Religion) which was a part of ATR (African Traditional Religion). Christianity was not known to the fore parents of the present ndi Igbo till the advent of white men in the year 1841. The then ancient Igbo religion and traditions are known as Odinaani, or Odinaala, which involved their religion, culture, tradition and all other general practices. In Odinaala Igbo, the Supreme Being is called ‘Chukwu’ who created the world and everything in it, and continued to have power over it. This is the basis of faith-healing in ancient Igbo traditional culture. Faith healing sprang from the traditional belief that God who creates all life and takes care of all life; God, who has power over life, health, healing sickness and death, can grant any to anyone at any time especially when he is appeased with sacrifices. He alone, is the ‘Ogwonnuoya’ in Igbo traditional culture. In Igbo tradition religion (ITR), faith healing is majorly considered to be an act brought forth by Ezemuo or a dibia, through communication with the gods. Often, some rites involving divination, gestures, incantations and/or sacrifices are used. It is basically considered to be a non-medically based cure to malady, a spiritual therapy.
**Umunna Psychotherapy**

The term umunna is an Igbo word resulting from the combination of two nouns: umu, meaning children and nna, meaning father. Literally, it means the children of the father. In Igbo traditional families, the ‘Nna’ of the house normally married as many wives as he believed he needed and could maintained. Indeed, the more wives one got married to which normally resulted to more children, the more prestigious the man was considered. *Umunna* can then be seen as patrilineage comprising of children of a particular male-line who is the founding ancestor, whose name generally, the umunna is identified with. The umunna is headed by the eldest male in the patrilineage, generally called the ‘Diokpa’, a short for ‘diokpala’, literally means the first male born in a family. Ilogu (1974) and Ndukaihe, et al (2006), observed that *Umunna* is the most important pillar in Igbo traditional societies. Despite this etymological and literal meaning, the word ‘Umunna’ has been extended by implication to include all the extended families to almost sixth and seventh generation. Loosely, the word can be translated with the term ‘clan’.

The strong belief that we came from the same father was the basic principle behind the Umunna-centered psychotherapy. It became a religious and a paternal duty of each individual to care for the wellbeing of the other. It was believed that the health problem of any particular individual was a health problem of all. The management of such issue therefore, considered everything it may cause on the general community. This is expressed in the ideology, ‘biri ka m biri’ – live and let live, which influences an Igbo person’s relationship with any human being anywhere. This shows itself in the practice of being involved in the management of any individual’s health challenge, bunubunu; and then the Clerics, Ezemmuo and Dibia in more challenging psychopathological issues.

Umunna ‘psychotherapy’ is a form of ‘psychotherapy’, where the condition of the client is the concern of the umunna. Depending on the degree of the psychopathology, the client is sometimes separated from the umunna (to the healer’s centre), but at the same time being taking care of by the umunna, with the general good of the umunna utmost in the mind of the healer. It is considered both a type and a technique of psychotherapy. As a type, it is a therapy provided by every member of the umunna to any troubled member. Putting this in descriptive terms, Mbiere (2014) writes that the actual healing in traditional Igbo society is expressed well in the traditional health care of the sick and requires a personal intervention, family, community and the dibia to cure one of any sickness. Iroegbu (2005) observed that a physical (biomedical, pharmaceutical) cure is to be paralleled by a community-based response and appropriate healing of the illness. One of the informants, a dibia observed that ‘oria bu nke umunna; ogwugwo ya diiri umunna’ – the illness belongs to the clan; its healing is the duty of the clan. Indeed, *ndi* Igbo generally see it as a duty of every individual to look after any sick person, hence the aphorism: nlekota onye oya ka ogwugwo ya (caring for the sick is considered greater concern than the cure).

As a technique, Umunna ‘psychotherapy’ involves the intervening activities used by the Igbo traditional healers in restoring psyche disturbed individual. Umunna psychotherapy treats with respect and acceptance, the client, his beliefs and uniqueness. In matters of intervention and faith-healing of an individual suffering from insanity however, the faith or rationality of client was not actually considered, but that
of the relatives. This is because what an Igbo considered as psychopathology is a mental condition that would naturally, not allow the individual involved to express his or her faith being no longer in full control of his or her rationality.

**Diagnosis and Interventions in Umunna ‘Psychotherapy’:** the informants revealed the following as part of their healing activities: diagnosis includes consultations, incantations, divination and some modern techniques, while intervention involves sacrifices and *ikpualu*, among others.

**Consultations:** Umunna psychotherapy does not rely on symptoms alone, since they most times, are only indicators. The dibia consults some of the umunna members of the client especially the immediate family and discussed with them the history of such a condition in the family lineage.

**Divination:** is a consulting activity of a diviner who may be an Ezemmuo or a Dibia from God or the gods to get a solution to the challenges of the people. For Iroegbu (2005), divination involves going to ask extra-human forces considered wiser than human to obtain explanation. Ibopeople Support (2011), Igbo religion relies on divination to provide answers to problems and puzzles of daily life-experiences.

**Aja (Traditional Sacrifices):** are generally prescribed to be made to God, the gods or the ancestors after determining the causes of the psychopathology, as the remedies.

**Ikpu Alu:** is one of the major demands made on the umunna of the client when a certain psychopathological condition is believed to have been caused by committing a taboo.

In some cases, especially where the clergy are involved as the psychotherapist, *ikpualu* and divination are replaced with other activities: fasting, worship, almsgiving, prayers, anointing, laying on of hands, psycho-education, and even exorcism in some extreme cases where pathology is suspected to have been caused by evil possession. *Aja* (traditional sacrifice) is replaced by the Holy Mass.

**Use of some modern techniques:** it is necessary to observe that what the modern psychotherapist described today as dream interpretation, transferences, free association, analysis of defenses, and the likes have all been in existence in umunna psychotherapy. Indeed, Dibia Ezekwemkpologwu observed that ‘transference’ is one of the signs we use to know a client who has been treated before.

**Some major advantages of Umunna psychotherapy** include cultural aptness, acceptability, affordability, availability, effectiveness and low cost. It considered the wellbeing of many individuals, and many hands contribute to the wellbeing of the mentally sick. It grants complete restoration of the individual, nothing was hidden and no confidentiality was required. Making psychotherapy an umunna affair in this manner, guides against relapse. It is adoptable by any traditional therapist no matter his or her training and area of specialization.

**Some Qualities that are Common to Most Igbo ‘Psychotherapists’**

- **Patient listening without any prejudices:** the Igbo traditional healers (ITH) listen patiently to their clients and try to understand them without any labelling or prejudices.

- **Concern for the community as a whole:** the phrase ‘umunna psychotherapy’
emphasizes this quality of the Igbo psychotherapists. Like the Jews, they believed that it is better that one man dies than that the whole community perishes because of an individual. Believing that ‘e zue ezue kwanye nwannwa n’onunu, oliko odighi ya’ (once the community decides on the death of an individual no need going to court), they sadly allow the patient to his fate: ‘chi edego.

**Integrity and Character:** abuses of some clients by few psychotherapists are numerous as Pope, et al (2008) observed. The ITH however, see their psychotherapeutic roles as sacred duty, demanding integrity, character and trustworthy.

**Intelligent Observation:** they have a manner of asking questions that will lead a client to feel confident and open up to them. At the same time, they have ability to observe almost unnoticed the clues from the clients and paying close attention to unconscious mental processes and defenses, draw substantively upon them, to intervene rightly in the wellbeing of the patients.

**Insightfulness:** This helps them to bring their clients out of false beliefs or the irrational thinking and redirect them to reality.

**Spiritually knowledgeable:** they have ears that hear from divine and eyes that see spiritually.

**Close to Nature:** the healing power in nature is always revealed to those who are very close to nature. Wilder (1948) writes, ‘we must not neglect the most efficient of all psychotherapies and one which cures more patients every year than all the others put together: reality. The closer a physician comes to nature, the better his psychotherapy will be, regardless of the school he means to follow. The ITH are very close to nature.

**Interest in the wellbeing of the client:** the dibia has a concern and interest that goes beyond empathy and yet not sympathetic in the client and takes him or her as ‘one of us’.

Like of every other client-psychotherapist relationship, ethical issues and some other challenges are not left out. The general ethics of ITR guided the relationship in terms of moral standards and boundaries. Even though little in practice, they consult among themselves when in cross roads for some conditions they saw no need to consult the gods.

**Some Limitations of Umunna Psychotherapy:**

The environment is not always at its best.

There are not much of referral services.

Umunna centered psychotherapy is not much concerned with confidentiality.

Sometimes, clients are subjected to some inhuman treatments and condition like flogging. This particular practice, however, is no longer common today.

**Limitations of Study**

The study utilized self-reports which could be subjective and because the participants are very enthusiastic about the topic they might sometimes exaggerate. The study was also carried in only one out many local governments in Anambra State. This study therefore suggest that further research works be carried on Umunna centered psychotherapy in some other regions of Igbo land.
Conclusion
Umunna ‘psychotherapy’ has a high psychological and social support for the clients; and this generally leads to high restoration of eudemonia within a calculated period, both for the clients and their umunna. It doesn’t just heal the client, it also heals his environment. Though simple and unique, it covers a wide range of psychotherapeuticism. Umunna Psychotherapy agrees with the Gestalt psychology and the macro moral categorization in ethics. Igbo psychotherapeutic practices have shown that faith in divine healing, in addition to use of drugs and or psychotherapy has proved effective intervention in restoring wellbeing. This becomes a meeting point between medication, psychotherapy and faith-healing. Two major concomitant findings were also discovered: the power of the mind over the body and the fact that there are many other sources of knowledge science is yet to investigate. The study recommends Umunna psychotherapy to all psychotherapists both as a type and a technique of psychotherapy. Umunna ‘psychotherapy’ has some values to give to and take from the modern psychotherapy and vice versa. The World Council of Psychotherapy, therefore, should structure all of her programs in a manner that must seek to liberate, promote and protect African views of psychotherapy and not intending to look down on, as something bringing them back, control or dominate it. One other practical implication is that the African psychotherapists themselves must be realistic with the culture of their people without allowing inferiority complex and any of its correlates to blind them from the need of their people and the values of what they have. We need to rediscover who we are irrespective of our euro-western worldviews, influences and orientations.

References


