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Article in *Journal of Social Sciences and Humanities Review* · November 2022

DOI: 10.4038/jsshr.v7i3.109

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African Trado-Medical Diagnosis and Treatments of Affliction in Ola Rotimi's *The Gods Are Not To Blame*

Akporherhe Friday¹, Udi Peter Oghenerioborue²

Abstract

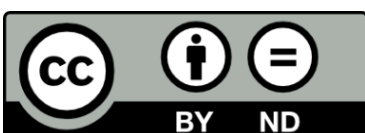
This study examines African trado-medical diagnosis and treatments of affliction in Ola Rotimi's *The Gods Are Not To Blame*. Though different studies have been done previously by scholars on treatments of diseases across the world, the aspect of trado-medical diagnosis and treatments of affliction in dramatic works has not been explored. This literary text is purposively chosen due to its contextual relevance and qualitatively analyzed. The study adopted the Freudian psychoanalytic approach which focuses on characters' psyche and the motivations responsible for their negative thoughts, emotions and actions as presented in the chosen text. It found that abominable offences attract the wrath of gods, evil spirits and ancestors which cause afflictions in African societies. However, non-scientific methods like divination and in-depth interviews and focus group discussions can be employed to diagnose the cause of the life-threatening disease while forms of treatment such as sacrifices, herbal medicines, counseling and so on are provided.

Keywords: Afflictions, divination, health, herbal, trado-diagnosis

Department of
Languages (English),
University of Delta,
Agbor, Delta State,
Nigeria

²uboboir@gmail.com

 ²<https://orcid.org/0000-0003-3910-9989>



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INTRODUCTION

There is apparently no society that is free from physical and psychological problems but the ability of health providers to diagnose and administer appropriate treatments to patients becomes paramount. Over the years, medical experts, researchers, health organizations, research institutes, government agencies and so on, have been in the forefront, exploring opportunities and effective means of educating the public about their health and literature has been identified as a reliable tool to achieve this specific goal. Literature which is a branch of Humanities plays a significant role in promoting human health in society across the world as shown in literary works of renowned scholars. Without mincing words, it can be employed by health educators in supplying vital information about certain diseases, causes, effects on patients and methods of treatment and management to health providers, health caregivers and the entire public. This therefore implies that there is an interface between Medicine and Literature. According to Downie (1991:95), medicine and literature interact, in the sense that, “novels, plays, poems or films can make a large impact on a student or doctor and develop intuitive understanding.” He further reveals that literature “enables us acquire insights into universal human predicaments. Study of this sort is more relevant to the concerns of a doctor, nurse or social worker than the study of

the more abstract disciplines of sociology, psychology or philosophy” (95). The foregoing submission affirms the significance of literature in the field of medicine as evident in fictional works of creative writers across the world.

In most traditional societies, sickness or mental illnesses could be caused by various conditions and these include supernatural, biological and psychological causalities (Ngobe, 2015:25). Whatever is the cause of physical and mental health problems in various African communities, the need to address them as signs and symptoms manifest in patients should be utmost priority. The main focus of healthcare providers and caregivers should be to diagnose the cause of ailments and restore health and psychological wellbeing of individuals in society. In African communities, serious sicknesses are quickly attributed to the anger of deities or gods of the land that patients might have offended through some abominable acts which they have committed. However, the help of diviners is unavoidable if the affliction is incurable even after making great efforts to address the ill-health of patients.

Divination is a traditional method of investigating the cause of any serious sickness threatening lives of individuals within a family or community and this practice cuts across all cultures. In Africa and other pre-scientific societies, divination is perceived as a spiritual means of



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investigating sicknesses or afflictions. The advent of science-based medicine which gave birth to the modern diagnosis in a/the laboratory could not prevent the use of divination, an aspect of traditional medicine which has become a vital part of the tradition and cultural practices of the people. This pattern of diagnosis is based on the psycho-spiritual investigation, and it precedes physical medical treatments. Matsepei and Madise (2003) while acknowledging Ngutor, Lumun and Terwase (2013:22) define divination as a method of consulting the supernatural in order to obtain information that is not normally available to human beings from them. This implies that divination is information gathering process that will help in discovering the cause of health problems in contrast to the western medical laboratories in modern health centres.

Similarly, Azongo and Abdulia (2014) state that divination refers to a set of procedures involving the art of using a ritual or ceremony to acquire information from the spirit world in order to predict the future. In some indigenous communities, this practice is the main means of spotting allegedly spiritual problems and prescribing remedies (cited in Azongo and Yidana, 2015:8). The focus of this study however is to investigate the application of trado-medical diagnosis in a cultural society engulfed with incurable sickness. This is contrary to modern scientific practice whereby

sicknesses are diagnosed by medical laboratory experts to know the actual cause before appropriate treatment of patients.

The concept of diagnosis is obviously alien to Africans but the cultural variance of this practice which is divination abounds in traditional communities. A large number of literary works of African writers like Efuia Sutherland, Wole Soyinka, J. P. Clark-Bekederemo, Ola Rotimi, Zulu Sofola, Ahmed Yerima, Femi Osofisan, CamaraLaye, Chinua Achebe, ElechiAmadi, NgugiWaThiong'o, and HelonHabila, to mention a few contain divinations and traditional treatments. Diagnosis, as a medical term, refers to the process of investigating the cause of health problems or sickness threatening the lives of patients. In the Western health care system, physical and mental illnesses are diagnosed through the use of medical laboratory but in traditional health practice, the cause of serious illness could be discovered through the help of traditional healers such as the diviners. Iddrisu (2017:53) found out that "across the African continent, sick people go to acknowledged diviners and healers; they are often called witch doctors in the West. In order to discover the nature of their illness in almost every instance, the explanation involves a deity or an ancestral spirit." In corroborating the foregoing viewpoint, Horton (1967) states that "the diviner who diagnoses the intervention of a spiritual agency is also expected to give



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some acceptable account of what moved the agency in question to intervene". Studies have revealed that apart from diviners, soothsayers, herbalists, midwives, and so on, traditional health providers' services are also sought by patients in the aspect of diagnosis.

Findings from the research carried out by Shizha and Charema (2011:167) indicate that "in most African countries, particularly in rural areas, traditional healers are widely consulted in the search for causes of distress and illness, and ritual cures are constantly performed to help the sick." However, the diagnosis of physical illness and mental health problems is mostly done by diviners who "are responsible for determining the cause of illness, which in some cases is believed to stem from spirits and other evil influences" (168). In this study, we shall examine the traditional method of diagnosing the causality of the infectious ailments in the chosen dramatic work and the forms of treatment adopted by the community in restoring health and psychological wellbeing.

Trado-diagnosis which takes the form of divination is an aspect of indigenous or traditional knowledge that cannot be ignored in this study because of its significance. Scholars defined Traditional Knowledge (TK) from various perspectives but they all convey meanings that foreground the purpose of this work. For instance, Odunuga and Ogunrinde (2015:11) explain indigenous knowledge as

"knowledge developed and held by the original inhabitants of an area and their use of it in daily life. It has to do with the beliefs, knowledge, arts and other forms of cultural expression handed down through generation." This implies that indigenous knowledge involves all practical aspects of culture that are inherited from past generations and must also be transferred for the growth of society. Fenta (2004) prefers the concept of Traditional Knowledge to Indigenous Knowledge which he defines as: "local knowledge that is unique to a culture and society. It is embedded in the community's practices, institutions, relationships and rituals. It is the total of the knowledge and skills that people in particular geographical areas possess and that enable them to get the most out of their natural environment" (25).

Various cultural practices are abound in traditional African communities which aid in promoting health and psychological wellbeing of individuals and families. As a matter of fact, Africans have traditional knowledge of medicine and various methods of application in society. Such knowledge is sometimes inherited from parents or learnt from specialists in an informal setting. In the view of Ubrurhe (2001:16), the praxis of traditional medicine is within the domain of three specialists-the medicine man, diviner and priest which include both men and women." They are regarded as traditional healers, representing a broad range of practices, including



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herbalism and spiritualism, as well as a range of individuals who call themselves diviners, priests and faith healers, among other terms (UNAIDS, 2000:9). In corroborating the foregoing, Ubrurhe (2001:16) acknowledged Metuh (1985) who established that “the diviner sees the spiritual and material factors involved in a given situation. The medicine man applies the remedies if they are within the scope of his mental practice. In other words, the diviner is a diagnostician-psychotherapist-spirit healer (cited in Ubrurhe, 2001:16). This study, therefore, examines how Africans employ their traditional knowledge of divination in diagnosing the cause of sickness and the prescription of treatments in restoring health and psychological wellbeing to individuals and society at large.

LITERATURE REVIEW

There are different studies on health problems and traditional methods of treatment in every society and these include Owusu-Ansah and Donnir (2017), Okpako (2016), Ngobe (2015), Al-Krenawi (1995), Ayazi (2006), Ubrurhe (2001) and Ejiofo (2015), and so on. For instance, Owusu-Ansah and Donnir (2017:396) examine some of “the cultural beliefs that affect psychotherapy in the Ghanaian context and the challenges experienced by the Ghanaian psychotherapists who were foreign trained.” The study reveals that Africans particularly the Ghanaians have “respect for indigenous beliefs

and practices” of healthcare (406). They believe that the treatments they receive from the traditional healers have both physical and spiritual effects hence patients combine the western and indigenous methods of treatments.

Okpako (2016) on his part investigated the cause of serious illness among the Urhobo people and found that Emuerivwin belief links serious ailments to negative behavioural patterns among patients in traditional society. According to the scholar *Emuerivwin* depicts the “belief that dead ancestors control morality among their descendants by their ability to inflict illness as punishment of sin,” and that “an acculturated descendant who commits such a sin may endure emotional distress and become seriously ill as a result” (1). Another research that is worthy of note is that of Ayazi (2006:120) which focuses on the application of psychotherapy in a non-Western society, through the exploration of the experience of a group of Palestinian therapist in Gaza, Palestine. The research reveals that:

“Among Gazas, beliefs concerning the causes of (and dealing with) mental illnesses range from very traditional and supernatural viewpoints to naturalistic conceptions influenced by scientific medicine. In both cases, mental illness is regarded as a sign of personal or family weakness, which is a contributing factor to the strong stigmatization associated with mental illness in Gaza” (123)



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Ayazi presents that the Gazan traditional healing system and the methods employed include the religious ritual of reading Koran, prescription of herbs and removal of an evil spirit by flogging the client with the help of his or her family members. Similarly, Al-Krenawi (1995) explores the dual use of modern and traditional mental health systems by the Bedouin of the Negev. He noted that "there are many common psychotherapeutic factors in both systems, among them ventilation, catharsis, and elements of individual, family, group and community social support" (74). The scholar found religious practice as one of the methods of addressing health problems in traditional societies, thus; "in all societies, religious approaches tend to exist side by side with naturalistic treatment of ailments with medicine. Yet in western countries, scientific medicine is clearly distinct from, and has largely replaced, religious healing" (79). All these works add value to the current study since they explore forms of health problems facing patients in traditional society and the methods of addressing them.

The study conducted by Ngobe (2015), however focuses on Swati traditional healers' conceptualization of causes and treatment of mental illness. The findings show that "causes of mental illness were attributed to multiple causes including, supernatural powers, harsh social conditions, genetic factors, other general medical conditions and the idea that disease could be a result of

retribution for the violation of moral injunction or taboos (48). Ngobe's work further illuminates the current study which examines the actual cause of the affliction in the dramatic text under study with a view to restoring health and psychological wellbeing in society. In the view of Moletsane (2004), treatment varies among cultures and that different cultures have different techniques of treating their patients. He further argued that most people in certain cultures believe in seeking treatment from their religious leaders/priests or traditional healers (cited in Ngobe, 2015:10).

Moreso, the research carried out by Ubrurhe (2001) shows that Africans particularly the Urhobo of Nigeria have their traditional methods of treatment. According to the scholar, "The African perception of the aetiology in traditional medicine underscores the role of each specialist. The medicine man basically heals through the utilization of medicine; the diviner through divination while the priest handles diseases emanating from guilt against the gods, ancestors and humanity which involve offering of sacrifice" (16). The scholar's reference to the role of diviners in traditional healing process is therefore given more attention in this study. Our focus is to examine the cause of affliction in traditional society through trado-medical forms of diagnosis, herbal treatment and management of sickness to improve health and psychological wellbeing of individuals and society.



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The study is library based so the literary text, Ola Rotimi's *The Gods Are Not To Blame* is purposively chosen based on its contextual relevance. The text is qualitatively analyzed using both descriptive and analytical methods.

THEORETICAL FRAMEWORK

This study adopts the psychoanalytic theoretical approach that focuses on the human psyche and the motivations that are responsible for negative thoughts, emotions and actions of characters in society as presented in the chosen literary text. Apart from the fact that the Freudian theory is applied to study the unconscious mind of any particular author and the effects of the work on the reader, this theoretical approach is used to analyse the repressed memories and events that influence the dysfunctional thoughts, negative emotional feelings and actions of characters in the narrative. In affirming the foregoing, Devardhi (2009:438) posits that the application of the psychoanalytic theory to "a literary text gives us a profound understanding of the unconscious of the author and in the study of characters and their actions in a literary text", and at the same time provides us with a thorough understanding of the nature of man in general. In corroborating the foregoing, the National Open University of Nigeria (2014) states that the theory focuses on "the characters of a work, analyzing their motives, desires and conflicts even though these characters

are fictional. Characters, as well as their underlying traits, are often drawn from real people and therefore can display some of the same psychological patterns" (252).

In advancing the argument on the application of this critical theory to literary works, the National Open University of Nigeria maintains that psychoanalysts analyse literature to reveal insights about the way the human mind works. It is based on the work of Sigmund Freud. It works well as a method of analyzing characters' actions and motivations. Psychoanalysis is based on the belief that all actions are influenced by the unconscious (250). It is against this background that this study will apply the psychoanalytic approach to examine Ola Rotimi's *The Gods Are Not To blame* to understand how the affliction in the Kutuje community triggers the characters' psychological and emotional pains and their reactions in the play.

Ola Rotimi and His Clinical Drama, *The Gods Are Not To Blame*

Olawale Gladstone Rotimi is a renowned African dramatist whose works have portrayed rich cultural heritage of his people apart from interrogating socio-cultural, economic and political disillusionments that characterize the postcolonial Nigerian state. Several of his plays speak volumes of the exploitation and dehumanization of the peasants by the oppressors and capitalists. Born on 13



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April, 1938, in Sapele, Delta State, Nigeria, Ola Rotimi became one of the greatest Nigerian playwrights and theatre directors. Apart from his popular play, *The Gods Are Not To Blame* which was published in 1968, the dramatist has other dramatic works which include *To Stir The God Of Iron* (1963), *Our Husband Has Gone Mad Again* (1966), *Kurunmi* (1969), *Holding Talks* (1970), *Ovonramwen Nogbaisi* (1971), *Invitation Into Madness* (1973), *If: A Tragedy of The Ruled* (1979) and *Hopes of The Living Dead* (1985), to mention a few.

Ola Rotimi's *The Gods Are Not To Blame* can be regarded as a clinical play because it addresses medical issues (problems) although in a traditional setting. As a clinical dramatic work, it will acquaint health providers, caregivers, researchers in mental health institutes and the public at large with the indigenous knowledge of diagnosis and the treatment of incurable diseases in traditional societies especially where the available western medical experts find certain health challenges difficult to manage. The play is an adaptation of Sophocles' *Oedipus Rex* but Rotimi transplanted it into Africa specifically the Yoruba ethnic nationality with the names and settings of the play reflecting Yoruba land. From the medical perspective, the play presents the resultant effects of afflictions threatening human lives as portrayed in the fictional Kutuje town and the effort made by the entire community to address the health problems to restore

good health and psychological wellbeing for the growth and development of society. In order to attain such a clinical goal, the cause of the affliction ravaging the community must be diagnosed and so the people employ the African traditional methods of investigation which are alternative to the modern medical laboratory.

Through the narrator in the prologue of the play, we are told that in the land of Kutuje, King Adetusa and his wife, Ojuola gave birth to their first child and the soothsayer, Baba Fakunle, the Priest of Ifa was consulted to know the future of the baby as custom demands. It was found that the child will kill his own father and marry his mother but to avert the "bad future from happening, the boy who is "the unlucky messenger of the gods" should be killed (3). The narrator further reports that, "the Priest of Ogun ties boy's feet with a string of cowries, meaning sacrifice to the gods who have sent the boy down to this Earth. Priest bears boy to Gbonka, The King's special messenger, and orders him to go into the bush with the little boy, to the evil grove" (3-4). Thirty-two years later, King Adetusa is murdered in mysterious manner and the people of Kutuje begin to suffer attack from Ikolu until the stranger, Odewale arrives from Ijekun-Yemoja to defend them from further invasions. He is given the greatest reward in the land by making him their king and he eventually marries Ojuola and both raise four children together. Eleven years later, a



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plague breaks out in Kutuje land claiming lives.

*Incurable Affliction in *The Gods Are Not To Blame**

The affliction in the play poses a great threat to human existence as it triggers psychic and emotional conflicts among the inhabitants of the community. This is seen in the lamentation, confusion and tension which characterized the lives of the towns people. The playwright reveals that Africans have their indigenous methods of treatment and management of health problems before the emergence of western healthcare system.

In *The Gods Are Not To Blame*, the land of Kutuje is engulfed with sickness and the inhabitants led by King Odewale make effort to restore health to every household. Odewale perceives sickness as a common natural occurrence that could befall every home. It does not spare anyone, the great and small, the king and his subjects, the rich and poor, can suffer from physical and mental health problems especially when it is caused by supernatural forces, hence, in the narrative, the King declares the presence of sickness also in his home, thus:

ODEWALE. My people. Children of our fathers. Sickness is like rain. Does the rain fall on one roof alone? No. does it fall on one body and not on another? No. whoever the rain sees, on him it rains. Does it not? It is the same with sickness.

You do me great wrong, therefore, to think that, like a rock in the middle of a lake, forever cooled by flowing waters, I do not know, and cannot know the sun's hotness that burns and dries up the open. Indeed, you do me great wrong, my people...

CITIZENS. (prostrating themselves).
We beg for forgiveness.

ODEWALE. No, no-do not beg. I have said nothing yet to prove me innocent of your charges, and already you beg for forgiveness. No, do not beg, I pray you, only listen. And listen well. I know your pains, my people. I feel your suffering too. Sickness is in your houses? Sickness has entered my palace too (10).

The above discourse shows that the sickness in the Kutuje village is not restricted to a particular family because communicable diseases usually spread, inflict emotional pains and cause sudden deaths of patients. In the play, King Odewale feels sympathetic to the health problems being experienced by the villagers, but he makes them understand that his own family is also afflicted with the disease whose cause is yet to be identified through diagnosis.

Trado-Medical Diagnosis of Afflictions

The concept of diagnosis is not alien to Africans, but the scientific practice is



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carried out in various ways provided reliable information required for the treatment and management of health problems of patients are attained. In traditional African healing centres, careful examination and questioning of patients and their family members are the two common methods of establishing the physical causality of diseases bytrado-physicians, diviners or medicine men. In the text, the playwright presents traditional methods of diagnosis which are practised in African society besides the availability of the western medical laboratories found in our health care centres. These include divination, use of oral interviews, personal historical record and confirmation of reports after the trado-diagnosis.

The practice of diagnosis is common in traditional healthcare system where the people believe that the cause of the ill-health of patients is extra-ordinary. That is, health problems emanate from angers or wraths of the gods of the land and so sacrifices should be made after confirmation of the actual cause of the affliction or health challenges. Without traditional diagnosis, it is almost impossible for a healer or trado-medical doctors to address serious health problems plaguing a patient or an entire community. Akpomuvie (2014) found that, “a disease could be physical or metaphysical. In traditional medicine, attempt is therefore made to look for both the physical and metaphysical causes of disease, hence the traditional healers appealed to both

scientific and metaphysical means in an attempt to achieve a comprehensive cure of any malady” (51).

It is obvious that Africans have a unique method of restoring health to families and the community at large and the only mechanism to know the causality is through traditional means of diagnosis. This is evident in the play as the SECOND CHIEF declares: “We have also sent for Baba Fakunle, the greatest of all medicinemen in this world. He will be here soon.” This statement is corroborated by the PRIEST who states that “We have sent Aderopo to Ile-Ife, the land of Orunmila, to ask the all-seeing god why we are in pain” (12).The above assertions affirm the diagnostic stage in traditional society where strange sickness or afflictions that sometimes result in death of people could be investigated by consulting oracles, diviners and so on, to ascertain the cause of such ailments. In the course of trado-diagnosis, which is the spiritual investigation, the history or remote cause of the health problem, the resultant effects and the appropriate treatments are brought to the fore. The trado-medical report brought by Aderopo who was sent to consult the Oracle of Ifa reveals the main cause of the health problem in the town of Kutuje. He reports that, “The Oracle of Ifa at the shrine of Orunmila has found the cause of thesickness and deaths now in our midst, and it has told me what the people can do so that there



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may be peace of mind again in every home" (19).

Africans, specifically the Yoruba have confidence in reports of traditional diagnosis provided by native healers such as the diviners and Rotimi has re-affirmed the role of Ifa divination in diagnosing the cause of sickness in Kutuje village. In consonance with this Olusegun (2017:14) posits that "Ifa is the only active mouthpiece of Yoruba traditional religion taken as a whole. To the Yorubas, without Ifa the importance of other gods would diminish. Ifa serves as an intermediary between the other gods and the people and their ancestors, and between the dead and the living." It is against this background that the playwright presents King Odewale as a character who is desperate to unravel the cause of the plague causing him psychological pains but Aderopo sees the trado-medical report as confidential, strictly meant for the King alone. The King insists that it should be disclosed to all:

ADEROPO. It is said that the secrets of a home should be known first to the head of the home. (Goes to Odewale to whisper in his ear.)

ODEWALE. (shoving him off). I refuse to listen alone. Speak openly, son, before all- a cooking pot for the chameleon is a cooking pot for the lizard! (19)

The message of the oracle consulted by the community through Aderopo illustrates the prognostic stage because

according to the report of the trado-medical diagnosis, patients' failure to address the root cause of their affliction will continue to be disastrous. The diviner's report portends more calamities which the inhabitants of Kutuje should endeavour to avert to restore good health and psychological wellbeing. The health reports presented in Yoruba land as documented in the dramatic work is peculiar to every ethnic groups in Africa.

Validation of Trado-Medical Reports

A vital aspect of traditional diagnosis in African settings is the validation of reports of trado-medical diagnosis (divination) as evident in the play. Africans usually validate reports in their traditional ways also through the help of other diviners, residing even outside their communities. This is to ensure appropriate treatments and management of ill-health situations and also to mete out punishment on culprits whose sins have caused the afflictions in society. The diviner has diagnosed the cause of the affliction but the King's quest for identity of "the carrier of the disease" and in some cases, the confirmation of the result (report) leads to further investigation conducted through in-depth interviews and focus group discussions involving the King and the Chiefs of the community. The issue at this moment is to discover the identity of the culprit, a murderer whose sins of murder and



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incest have been responsible for sickness in society.

The abominable acts of the suspect depict bacteria, germs, viruses or pathogens causing the unhealthy state of the entire villagers as in the case of Kutuje land. So, in order to address the serious health problem (of affliction), thoroughtrado-medical diagnosis must be carried out. King Odewale has been diagnosed as the carrier of the communicable disease that is threatening lives in the community, though not physically proven it has been identified through the help of the diviner who represents medical laboratory scientist in modern society. The text reveals that African traditional healers also carryout anamnestic exercise, which involves taking of medical history of the present illness of the patients and also to ascertain the social history of the diseases, current conditions and reliability of the reports to be submitted fortrado-medical intervention. The foregoing information should be considered before actual treatment of sick patients in order to improve mental health in communities. In corroborating the foregoing argument, Horton (1967) states that "in Africa, ill health endangers better life; therefore, healing in traditional African societies is the process of restoring life to its fullness. It has to do with the spiritual, social and mental wellbeing of an individual especially the harmony of the total human body"(53).

Furthermore, the tradomedical diagnostic process, Baba Fakunle, "the oldest and most knowing of all Ifa Priests in the world" is invited by King Odewale to disclose the identity of "the contagious patient" (murderer) responsible for the affliction claiming lives of people in the community. In the text, King Odewale clearly states the cause of the sickness in Kutuje town as reported by Aderopo, thus:

ODEWALE. There is plague in this land, and Orunmila tells us from Ile-Ife that the cause of this suffering is the presence of a murderer, one who murdered King Adetusa, the King before I became King of this land of Kutuje. Pray, tell, who is this murderer?

SECOND CHIEF. We beg of you, Old One, help us with your strange powers.

ODEWALE. Baba Fakunle, you have come well.

BABA FAKUNLE. Don't come near me! I smelled it. I smelled the truth as I came to this land. The truth smelled stronger and still stronger as I came into this place. Now it is choking me...choking me. I say. Boy! Lead me home away from here. (26-27).

The above dialogue gives an insight into the cause of the mysterious illness wreaking havoc in Kutujesociety. For instance, the soothsayer's refusal to



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speak in the gathering heightens tensions and triggers phobic-anxiety leading to the provocation of the King but due to pressure, he identifies Odewale as the murderer and “bed-sharer” for indulging in incestuous marriage with his own mother. At this point, there is confusion and so the King demands further investigation to know his own identity and the circumstances surrounding the death of late King Adetusa. Here, the techniques of in-depth interviews and focus group discussions were employed by the King and his Chiefs in order to unearth the murderer and cause of the plague in the village. During the process of gathering information to ascertain the cause of disease or affliction, the cooperation or help of patients, the patients’ family members, childhood friends, healthcare providers and other people who have useful information is essential.

In the course of investigating the murderer’s identity, Alaka, Odewale’s friend from Ishokun village and Gbonka, the special messenger to king Adetusa are cross examined. Ola Rotimi, therefore, creates King Odewale as a man who committed multiple crimes against the gods and people of Kutuje and they are regicide, patricide and incest, marrying his own mother. Serious offences against the gods in traditional African communities cannot be appeased with sacrifices until the offenders have made their sins known to members of the

public as portrayed by King Odewale in the play.

African Traditional Medical Treatments

There are various traditional methods of treatment of diseases in Africa but in this study a few of the techniques employed by trado-medical practitioners in the play will be examined.

(i) The Offering of Sacrifices: Africans strongly believe in ancestors and gods as supernatural beings influencing the lives of people in society. They have powers to heal sicknesses and afflictions apart from the fact that they bless those who are faithful to them. It is common in most communities to find deities or gods that are responsible for afflictions as the consequences of disobedience or evil machinations being perpetuated by citizens. They have to be appeased through sacrifices in order to restore good health to the people and improve growth and development in such communities.

The playwright imaginatively captures some of the Yoruba gods that ensure peace, safety and security, fertility, fortunes, long life and prosperity for all indigenes both at home and abroad. There are also gods or deities that protect people in times of war. In the text, the King got confused when the issue of sacrifices to appease the gods of the land is raised by one of his subjects. The first citizen perceives the



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cause of the afflictions in the land to be supernatural;

FIRST CITIZEN. Let us sacrifice ram to the gods.

ODEWALE. Sacrifice, did you say? To what gods have we not made sacrifice, my chiefs and I? Soponna, the god of the poxes? Ela, the god of deliverance? What god? Sango, the god of thunder and rain, whose showers can help wash away the evil in the soil on which we stand? What god have we not called upon to help us? (11)

The foregoing conversation reveals that Africans are extremely conscious of the significance of sacrifices which is among the responsibilities of diviners and soothsayers in society hence they send for anyone they perceive famous with experience to help in unraveling the mystery surrounding their ill-health problems and also provide remedies for restoration of good health. However, in the play, King Odewale becomes confused about the particular god to be appeased to restore good health to the community apart from the famous ones namely, Soponna, Ela and Sango. This implies that sacrifices could be offered to several gods of the land to put an end to the affliction.

(ii) Herbal Medicines as Treatment: A large number of Africans who live in rural areas depend largely on traditional medicines which they regard as alternative and complementary treatments to orthodox

medications. They take the traditional medicines either separately or together with the pharmaceutical medicines provided their health condition is improved. Ezekwesili-Ofilu and Okaka (2019:193) describe herbal medicine as “a special and prominent form of traditional medicine, in which the traditional healer, in this case known as the herbalist, specializes in the use of herbs to treat various ailments”. Africans strongly believe in the effectiveness of herbal medicine in the treatment of illnesses. Even where there are orthodox medicines prescribed to patients by medical doctors, some of them still take traditional treatment because of their trust in the healers.

In the dramatic text, King Odawale advises the villagers to seek herbal medical intervention instead of allowing their children to die of the affliction whose cause has not been discovered by traditional healers. He reacts to the lamentation of the townspeople, thus:

TOWNSPEOPLE. We are suffering my Lord, we are-

ODEWALE. Yes I know. But what have you done about it, I ask. You there-Mama Ibeji- what did you do to save your twins from dying? It is sickness that man can cure, not death. What did you do to cure their sickness? Nothing? Oh, I see, your body is too weak, your bones suddenly gone soft, you cannot move, you cannot go into



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the bush and cut herbs to boil for your children to drink. Is that so? Answer. 'The land is bad', you all cry, 'we suffer much, we die', you moan. Yet each one of you lies down in his own small hurt and does nothing (12-13).

The above dialogue shows that the affliction in the village of Kutuje is incurable because the conditions of patients deteriorate despite the efforts they have made. This calls for trado-medical diagnosis but King Odewale wants the people to treat themselves of the physical sickness with available traditional medicine extracted from, "Afuseeijeje leaves-", "Lemon-grass, tea bush. And some lime skins" (13). However, the SECOND WOMAN who depicts the voice of the womenfolk expresses her dissatisfaction over the efficacy of the phyto-resources: " I boiled some herbs, drank them, yet sickness remains...I and my household drank the medicine, yet we do not get better, my lord" (13).

Like sickness in the conventional healthcare system that takes time to be cured with orthodox medicine, Africans also believe that the application of trado-medicine takes time to function and address the ailments of patients being treated. In terms of preparation, the herbs must be boiled for a longer time to extract the medicine out of the plants. It has to be administered freely until the health of patient improves. The King activates the consciousness of the women about the nature of phyto-medicines which

like the orthodox drugs take some time to function. According to him, "to get fully cured, one needs patience. The moon moves slowly but by daybreak it crosses the sky. Keep on drinking the medicine; one day you will see changes. Patience (13). In traditional African communities, knowledge and certain material wealth may be shared together just as problems are regarded as collective challenges that must be addressed for the betterment of society.

In the play, the indigenous knowledge of herbal medicine and the method of application is shared among kinsmen-neighbours in as much as it improves the health of the patients in the community. In fact, it has to be administered freely until health improves. While people express their ignorance of the medicinal herbs, others complain of how to apply them in treatment:

FOURTH WOMAN. My trouble is that I drink medicine from herbs, my husband drinks it too. But the children, I don't know how to give it to them so that they can drink it all.

ODEWALE. By trying often, the monkey learns to jump from tree to tree without falling. Keep to trying. Now, everybody go home...try. Get together, form groups of threes-Ajanu- (13-14).

The King represents Africans who have confidence in the efficacy of traditional medicines especially the application of



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herbs in addressing health problems such as affliction. His view confirms the argument put forward by Hammond-Tooke (1989:14) that natural and unnatural causes of illness require the services of both modern and traditional healing” and that “different diseases occur in Africa especially in rural areas.” The scholar recommends the use of herbs to prevent and cure illnesses. The need to adopt herbal medicine as an effective measure for the treatment of sickness is clearly stated by King Odewale in the play: “So may it be. (Roughly.) up, all of you-into the bush! Go and get cutlasses- go on! Go and pick herbs from the bush, boil them, drink them. Get up, go on- in twos, threes, get up! ...Women stay at home and look after the children, make the fire, get boiling pots ready. Men, you all go!”(14-15).

The King’s action has shown that his family is not spared of the ravaging diseases in the community. This is depicted in his utterances while addressing the townspeople who are lamenting and wailing before him: “Abero! ...Bring me those herbs I cut from the bush last night. Everybody, come and see...I, with my own two hands, and alone in the bush...(Taking the leaves from Abero who has just entered with them.) these...see? My wife, Ojuola herself has boiled part of them for the household. This evening again, I head for the bush for more” (14-15). The affliction in the community cannot be addressed by individuals rather it requires collective efforts

especially of men whose duties are to get some herbs from the farm and hand over them to the women to boil. The playwright portrays an African society where there is absence of orthodox healthcare system and health providers. A common method of treatment as one can see from the play is the application of herbal medicine.

(iii) Counselling: This is verbal treatment that is given to patients who are suffering from physical and/or psychological problems. In time of sickness, whether caused by natural or supernatural agents, patients are often advised to maintain personal hygiene, proper feeding, good behaviour, self-isolation and provide caregiving services to one another. In some cases, a traditional healer or medical practitioner and caregivers provide important counsel to patients to improve their spiritual, physical, psychological and social wellness.

In the play, there are instances of scenes where pieces of advice are given to the TOWNSPEOPLE by Odewale in the areas of cooperation, patience and good behavioural patterns. The clinical goals of such counsel are to reduce the emotional distress of patients, increase their level of awareness about the danger of the sickness and implore them to unite against the common enemy, the incurable disease. For instance, Odewale counsels one of his subjects that, “to get fully cured, one needs patience. The moon moves slowly but by daybreak it crosses the sky. Keep on drinking the medicine;



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one day you will see changes. Patience”(13). The counsel of the King to the subject and his kinsmen in general is weaved with the African proverb that “The moon moves slowly but by daybreak it crosses the sky.” This implies that with endurance and determination one can achieve his goal. Odewale also advises his subjects to be determined and focused because “By trying often, the monkey learns to jump from tree to tree without falling. Keep to trying. Now, everybody go home...try. Get together, form groups of threes-Ajanu” (13-14). This connotes that every subject should cooperate and fight the disease instead of addressing the problems individually. Words are powerful expressions that can activate both sad and happy emotions depend on how they are used in society.

Psychological Effects of the Afflictions in the Play

Sicknesses in a family unit or community at large can trigger both emotional and psychic pains in the minds of the people, hence, King Odewale, his wife, Ojuola and other inhabitants of the Kutuje community experience emotional disturbances in the play. It is discovered that Odewale is “the carrier of the disease” that afflicts the entire community. His decision to kill his own father, the King of Kutuje and marry his mother is perceived as “a contagious disease” that must be eradicated or quarantined to restore good health and psychological wellbeing to society. His continuous stay in midst of people

causes pains and sorrow to others and not until he has been cured or exterminated, peace and happiness will cease to exist.

The text gives insight into the popular belief that if any member of a family is sick, then the entire household is also sick. Even though the sickness of other members might not be physical, they experience emotional and psychological pains, especially when much resources and attention of the breadwinners and caregivers are fully needed. The focus of the health providers, caregivers and other members of the family will be sought until the health condition of the patients improve. The King observes some of the signs and symptoms of infectious disease in the land to include vomiting, loss of appetite for food, fatigue, and so on. Diseases could be caused by fungi, viruses, bacteria and parasites, but the cause of the sickness in Kutuje village is mysterious, however, this can only be diagnosed by diviners who perform the role of medical laboratory experts in modern society. Sickness could lead to the untimely death of patients especially due to the lack of treatment and management.

Sometimes, psychological suffering leads to depressive symptoms, suicidal attempts, traumatic conditions, and so on. In the text, the playwright presents Odewale as a patient who is suffering from mental and emotional pains that require effective medical attention. He is bothered because his immediate



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family and the entire community experience strange ailments which have given him major concern. In fact, he has become emotionally disturbed and now suffering from insomnia, hence he laments thus:

ODEWALE. Now to answer your question. What have I been doing about the sickness in the land? Have I been sleeping? If so, I am sick in the head: for only a madman would go to sleep with his roof on fire (p. 11).

From the above statement, one can deduce that the King is experiencing psychological pains over the sickness that remains incurable in the land. This has created phobic anxiety in the minds of the people especially as a few death cases have been recorded since the plague struck the community. This confirms the assertion of Onu (1999) that a serious illness carries with it the underlying fear of death or permanent disability and constitutes a crisis which requires cooperative efforts both from family members and from health care providers (physical or spiritual) (cited in Akpomovie, 2014:53). Also in the play, Ojuola experienced emotional depression and because her psychiatric problem could not be addressed urgently, she committed suicide. This is the worst resultant effect of emotional depression which should be addressed in every community especially when the offence committed goes contrary to societal norms. It is pathetic that after King Odewale gouges his own eyes as reported by the First Chief, he went into

exile with his four children. Their exit from the community depicts total eradication of the infectious disease causing sickness and untimely death of people especially the children. In African communities, evildoers are often banished to pave way for peace and progress.

CONCLUSION

The study shows that there is an interface between literature and medical intervention in traditional settings. In the play, Ola Rotimi demonstrated that there are also three stages of clinical interventions similar to those in the western healthcare system and these are diagnosis, anamnesis and prognostic. All these are meant to ensure that health challenges are thoroughly addressed to promote psychological wellbeing in traditional society. In the text, the people of Kutuje employed a trado-medical diagnostic procedure in uncovering the cause of their health problem because they have confidence in traditional healers (diviners) who they consult like modern laboratory scientists.

The villagers adopt some interventions such as offering of sacrifices to their gods and application of herbal medicine but all efforts made to exterminate the plague from the community ended in futility and so the need for trado-medical diagnosis became inevitable. Aderopo was sent to the Oracle at Ile-Ife to diagnose the root cause of the dreaded disease through



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divination and the report reveals that King Odewale is metaphorically the contagious disease that has been plaguing Kutuje land; he committed offences against the gods by killing his own father, a king and indulging in incestuous marriage with his mother. These are taboos that often attract the wrath of the gods and lead to infectious diseases and mysterious death if confessions and sacrifices are not properly made.

In a nutshell, Ola Rotimi has demonstrated through his play, *The Gods Are Not To Blame* that abominable offences in traditional society could trigger afflictions and result in psychological pains and the untimely death of people but good health and wellness shall be restored after the trado-medical diagnosis of the causality of the sickness has been carried out by diviners and appropriate treatment and sacrifices done.

References

- Adefolaju, T. 2014. Traditional and orthodox medical systems in Nigeria: the importance of a synthesis; *American Journal of Health Research*, Vol 2. No 4, p.118-124.
- Akpomuvie, O. B. 2014. The perception of illness in traditional Africa and the development of traditional medical practice. *International Journal of Nursing*, Vol 1, No 1, p. 51-59.
- Al-krenawi, A. 1995. A study of dual use of modern and traditional mental health systems by the Bedouin-Arab of the Negev. Unpublished Ph.D dissertation, University of Toronto.
- American College of Rheumatology. 2015. Distinctions between diagnostic and classification criteria? *Arthritis Care and Research*, p.1-15.
- Ayazi, T. 2006. Psychotherapy in Gaza: Application of psychotherapy in a non-western society. *Tidsskrift for NorskPsykologforening*, 43:120-129.
- Azongo, B. T. and Abdulai, A. 2014. Complementary or contradictory? Role of diviners in health care delivery in Ghana: implications and consequences, *International Journal of Research in Health Science*, Vol 2 (4): 999-1008.
- Azongo, B. T. and Ayidana, A. 2015. Spiritual diagnostic laboratory: the role of diviners in the management and resolution of life crisis. *American Journal of Sociological Research*, 5 (1): 7-13.
- Downie, R. S. 1991. Medical ethics and literature: literature and medicine. *Journal of Medical Ethics*, Vol 17, p. 93-98.
- Ejiofo, I. U. O. 2015. Psychopathology, psychotherapy, and faith-healing from Igbo African point of view. *Worldview, Theory and Philosophy*. No 1 (8), p. 24-32.
- Ezekwesili-Ofili, J. O. and Okaka, A. N. C. 2019. *Herbal medicines in traditional medicine*. Intech Open Book, 191-214.
- Fenta, T. 2004. Using farmers' traditional knowledge to conserve and protect biodiversity: the Ethiopian experience. In United Nations Conference on Trade and Development (UNCTAD), protecting and promoting traditional knowledge: systems, national experience and international dimensions, Twarog, Sophia and Kapoor, Promila (Eds). New York and Geneva, United Nations, p25-28.
- Hammond-Tooke, D.1998. Ritual and medicines: indigenous healing in South Africa. Johannesburg: Donker.
- Horton, R. 1967. African traditional thought and western science. *Africa*, 37: 50-71.
- Iddrisu, M. T. 2017. Healing and medicine in traditional African societies, a reflection of the worldview. *UDS International Journal of Development (UDSIJD)*, Volume 3, No. 2.



Original Article

- Matsepei, S. S. and Madise, M. J. S. 2003. A new phenomenon. In the Zionist churches of Botswana: the use of divination bones and sacred places. University of South Africa.
- Metuh, E. I. 1985. *African religions in western conceptual schemes*. Ibadan: Pastoral Institute, Bodija, p. 162.
- Moletsane, M. K. 2004. The efficacy of the Rorschach among black learners in South Africa. Pretoria: University of Pretoria.
- Nene, J. O. 2014. The concept of traditional healing and its role in African modern society. *International Journal of Social Science and Human Behaviour Study*, Volume 1: issue 1.
- Ngobe, A. J. 2015. Swaiti traditional healers' conceptualization of causes and treatment of mental illness. M. A. Dissertation, Department of Psychology, University of Limpopo.
- Ngutor, S., Lumun, A. N. and Terwase, L. P. 2013. The role of divination in treatment of disease in Kwande Local Government Area of Benue State, Nigeria. *International Journal of Humanities and Social Science Invention*, Volume 2, Issue 10, p.21-29.
- Odunuga, A. F. and Ogunrinade, O. A. 2015. Requests and veracities of African indigenous knowledge system as a means of improving music education. *International Journal of African Society, Culture and Traditions*. Vol. 3, No. 4, pp. 11-22.
- Okpako, D. T. 2016. Emuerivwin: an Urhobo belief that links serious illness to bad behaviour. A Construct analysis. seminar paper. Retrieved from, <http://www.waado.org/seminars/2016/firstquarter/report/seminarpaperonEmuerivwin>
- Olusegun, O. O. 2017. Dramatic aspect of EseIfa in Yorubaland. *International Journal on Studies in English Language and Literature (IJSELL)*. Volume 5, Issue 10, p.12-18.
- Onu, A. O. 1999. "Social basis of illness: a search for therapeutic meaning." In Okpako, A. I. (Ed). *Africa's Indigenous Technology*. Ibadan: Wisdom Publishers Ltd.
- Owusu-Ansah, F. E., and Donnir, G. M. 2017. Psychotherapy in indigenous context psychotherapy inindigenous context: a Ghanaian contribution towards provision of culturally competent care. In P. Ngulube (Ed). *Handbook of Research on Theoretical Perspectives on Indigenous Knowledge Systems in Developing Countries* (pp. 395-410). Hershey, PA.
- Pharmacotherapy Group. 2002. Herbal medicines: challenges. *Tropical Journal of Pharmaceutical Research*, 1 (2): 53-54.
- Rotimi, O. 2003. *The Gods Are Not To Blame*. Ibadan: University Press PLC.
- Ubrurhe, J. O. 2001. *Urhobo traditional medicine*. Ibadan: Spectrum Books Limited.
- UNAIDS, 2000. Report of the inter-regional workshop on intellectual property rights in the context of traditional medicine, Bangkok, Thailand.