

‘The Implication of Psychopathology among the Jindwi People. A Case of Zimunya Communal Area, Zimbabwe.’

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ABSTRACT

The research made an exploration on the meanings that are attached to mental illness among the Jindwi people. The study mainly focused on how the Jindwi recognize psychopathology, how they respond to cases of psychopathology in a family setting, the healing strategies they apply and what can be recommended for the wellbeing of the mentally ill patients in the cultural context. This research is in the context of the on-going debate on the relevance of Western Psychological healing in Zimbabwe and the rest of Africa. The study found that the Jindwi believe that mental health challenges are largely as a result of supernatural influences and they have to be treated likewise even though western-informed healing strategies can also be used. The findings of the study were obtained from in depth interviews with fifteen participants from the age bracket of 16-65 years from the Jindwi culture. The study recommends for flexibility when addressing mental health challenges in a cultural setting and also encourages more research into the effectiveness of these preferred cultural healing strategies among the Jindwi people.

Key words: Perception, Psychopathology, Mental illness, Jindwi people.

INTRODUCTION

The meanings attached to psychopathology among cultures is an area that remains unexhausted leading to the promotion of various culturally-oriented healing strategies. Culture has been regarded as a critical component of human existence which informs cognitions, social exchanges and upbringing. The general understanding of psychopathology among Africans has been sought to be deterministic thus chance and accidents are not emphasized and the problem which affects one member, affects the entire family. Research that was carried out in Uganda reveals that psychological maladjustments are usually considered to be a metaphysical challenge that can respond better to culturally sensitive traditional healing strategies (Gellert, 2017). Correspondingly, Shange & Ross (2022) assert that in South Africa, the traditional healers attribute mental illness to socio-cultural, spiritual, physical and psychosocial influences that can respond well to traditional locally-based healing strategies. In Zimbabwe, the traditionally informed healing strategies have been considered to be in existence since time immemorial and have been thought to still have an influence on human existence and their understanding of psychopathology (Ndlovu and Hove, 2015)

Charema and Shizha (2008) acknowledge that the majority of Zimbabweans still find relief from the traditional informal remedies alongside the modern western-informed health services. Mauwa (2020) specifically notes that the Jindwi people venerate their ancestors and are devoted to cultural healing rites through the performance of cultural dances that are known to promote the restoration of health as well as the social cohesion of people for the promotion of their wellbeing. Suggestive of this, one can question the general connotations behind the understanding of psychopathology among the Shona groupings. Mbiti (1969) in his quest to understand this enigma, asserts that Africans are notoriously religious and each people has its own religious system with a set of beliefs and practices which permeates into all the departments of life so fully that it is a challenge to isolate it. To shed more light he further maintains that:

Wherever an African is, there is his religion; he carries it to the fields where he is sowing seeds or harvesting a new crop; he takes it with him to the beer party or to attend a funeral ceremony and if he is educated he takes it

to the examination room at school or in the university; if he is a Politian he takes it to the house of parliament, (pg. 2).

The researcher realizes how the Jindwi, a sub-dialect of the Shona grouping in Zimbabwe are also likely to be committed to their cultural beliefs in relation to their understanding of mental health instabilities as informed by their culture.

Psychopathology has been defined as the patterns of maladaptive behaviour and conditions of distress which temper with some aspects of adaptation (Rejek & Misiak, 2023). The term has often been used interchangeably with the presence of a psychological disorder. To shed more light, the American Psychiatric Association's Diagnostic and Statistical Manual (5th edition) implicitly defines a mental disorder as the psychological dysfunction within an individual that is associated with distress or functional impairment that is culturally unexpected (APA, 2022). The definition suggests that cultures can define mental illnesses depending on how it manifests in accordance to the expected cultural view. The Jindwi people of Zimunya area in Mutare borrow most of their cultural meanings from the main Shona tribe although they tend to have their unique way of life that can only be understood upon developing a social connection with them (Mauwa, 2020). While mental illnesses are a reality among different cultures, one can question their understanding of mental illnesses.

Manteiro-Ferreira (2014) emphasizes that the African view of the universe has got an influence on the way emotional problems are viewed and solved as opposed to the Eurocentric perspective. This resonates with the view that the collective African principles have a bearing on the way maladjustments are handled in a common familial setting (Rupande and Tapfumaneyi, 2013). A study that was carried by Charema and Shizha (2008) reveal that most of the traditional Zimbabwean people resort to the traditional informal healing strategies that are often combined with the modern western restorative approaches. Sibanda and Hlongwane (2018) had to conclude that Africa has been left confused and uncertain philosophically, culturally and religiously in the storm of a mixed blend of Afrocentric and Eurocentric curative strategies. This combined Afrocentric and Eurocentric approach in the promotion of healing among the Shona people could be due to their general understanding of psychopathology which could be concluded after carrying an investigation among the Jindwi people.

Objectives of the Study

1. To investigate the definition given to mental illness by the Jindwi people.
2. To explore the causes of mental illness according to the Jindwi people.
3. To identify the healing strategies applied by the Jindwi to manage mental illness.
4. To evaluate the effect of these healing approaches to individuals' wellbeing.

Research Questions

5. What does it mean to be mentally ill?
6. What are the causes of mental illness?
7. What can be done to make someone recover from mental illness?
8. What are the effects of these substitute efforts to heal on the patient?

METHODOLOGY

The study employed the qualitative empirical research approach to engage in an in-depth exploration of the meanings that are attached to psychopathology among the Jindwi people. The study design was based on a phenomenological viewpoint in order to understand the perception of mental illness, its causes and what can be done to restore an individual's wellbeing. Fifteen participants were interviewed from the age bracket of 16-65 in order to gather ideas from different age groups. The researcher used an in-depth semi-structured narrative interview (Sutton & Austin, 2015) to collect data which was further analyzed thematically while interfaced with discourse analysis.

RESULTS AND DISCUSSION

The study developed themes to reveal the participants' understanding of psychopathology, what they considered

to be the causes of mental illness, the healing strategies that are normally put in place and how these can be effective in ensuring the recovery of the patients.

Difficulties in fathoming mental illness.

The participants described mental illness as something that can be difficult to comprehend. In further revealing their deeper understanding of psychopathology, most of the participants could not give a specific name to such illness using their local language. Most of the responses were centered on the symptoms that the patients usually portray.

One of the participants briefly said; *'It is confusing to really understand what will be actually going on in someone'*.

Another participant said; *'It is difficult to explain but one can only observe the signs and tell that a person has completely lost it'*. In an attempt to further explain this, this participant said, *'At times we display strange behaviors for fun and out of confusion but when it comes to real mental illness, the behaviors should cause concern.'*

The other participant also said; *I find it difficult to explain exactly what is it all about but it is easy to identify when one is mentally unwell'*.

From the responses given, it can be understood that the Jindwi people find it challenging to specify psychopathology according to their different cultural realities. One can then deduce that mental health related issues are mainly measured by the exterior symptoms.

Mental illness perceived as the display of unusual behaviors.

The participants described mental illness as the manifestation of uncommon behaviors that are not appropriate to the expected value system. Most participants recognized such behaviors as very unfamiliar and disturbing to the onlookers. One participant had to say;

'A mentally ill person will use confused language that is difficult to understand. It is usually very hard to come to terms with them because they mix ideas'.

Another participant had to say that; *"A mentally ill person will become too violent for nothing, will always roam around in dirty clothes and eat too much food"*. The same participant specifically shared about an uncle who could eat bigger portions of food in a few minutes without showing signs of satisfaction.

The other participant who shared her experience of taking care of a mentally ill brother shared that; *'A mentally ill someone will detest talking to the familiar people, would rather keep the sad mood and prefers to communicate with the invisible beings.'*

The participants largely described the symptoms of mental illness in connection to their specific worldview. This is in agreement with Rejek & Misiak (2023) who assert that psychopathological features can be best understood within the lenses of the environmental acclimation. Additionally, the symptoms of mental illness that were highlighted by most of the participants are in agreement with most of the features of mental illness according to the diagnostic criteria for mental disorders (APA, 2022). From these findings, one can conclude that the Jindwi people's understanding of mental illness is not far-fetched from the general perspective according to most of the documented knowledge.

Mental illness perceived as caused by a 'Causer'.

The findings revealed that mental illness among the Jindwi results from a causer that has to be firstly identified for one to obtain complete healing. Most of the participants chiefly attributed mental illness to unclear forces that need to be identified and pacified.

In relation to this, one teenage participant said; *'Mental illness is largely due to the unappeased avenging spirits of the dead people who demand justice after being unfairly killed by one of the family members'*. In giving further

explanation to this, the same participant further shared that; *‘Our elders can sin and offend God by killing someone and then in return the spirit of the dead will torment any of the concerned family members as revenge’*.

Another elderly participant said; *‘Mental disturbance is usually due to failure to fulfil the oaths that one would have sworn to the gods’*. He further explained that; *‘Failure to abide by the agreed terms can cause confusion thereby leading to mental illness in people’*.

The other participant who revealed that she once suffered from mental illness shared that; *‘Witchcraft can lead to mental disturbance’*. She further disclosed that she fell sick after being bewitched by a neighbor out of jealousy.

Another participant who begged to differ from the rest shared that; *‘Mental illness can be a result of too much stress or the misuse of drugs/substances, however this is usually triggered by evil spirits that intend to make people restless’*.

The findings demonstrate that most of the participants attributed mental instability to the unknown ‘causer’ that they could not explicitly explain. While the causes of mental illness are usually scientifically based, the Jindwi culture largely believes in the existence of certain forces that trigger mental illness in people. This resonates well with Mbiti’s view that Africans are notoriously religious (Mbiti, 1969). One can also further agree to the assertion that cultural value system contributes largely to the African’s worldview of psychopathology (Nsereko, 2017).

Combined efforts in conquering psychopathology.

The respondents revealed that healing from mental illness can be best achieved from a common perspective. They attributed the illness to bloodline thus the healing strategies to be employed would aim to purify the entire generation.

One respondent shared that; *‘Consultation should be done as a family from a variety of consultants before choosing the best option. Furthermore, treatment should not focus on the sick only but to protect the entire generation.’*

The other responded said; *‘Working together would make the burden lighter. It is usually hard to seek help alone.’*

Another participant also said; *‘Different ideas can help. You cannot possibly tell what will specifically help the patient to recover’*.

From the given responses, it can be understood that the Jindwi people work as a team in seeking help and they usually apply different healing strategies to a mentally ill patient. The researcher noticed that the participants find relief from the support they get from others during difficult times. This was highlighted by Siregar, Nasution, Tanjung & Harahap (2021) who assert that familial support contributes largely to the patient’s mental adjustment, recovery process and adherence to treatment. It can also be concluded that the Jindwi find consolation from the support they get from others during illness.

Cleansing rituals and medication for proper healing.

Most of the participants acknowledged the effectiveness of performing cleansing rituals alongside medication on the mentally ill patients. Most of the responses highly credited these two strategies as the lasting solution towards recovery from psychopathology.

One of the participants said; *‘The avenging spirits responsible for mental illness can only be appeased so that the offender can find peace and healing. Until then, one can still take scientific medication but not get completely healed.’*

Another respondent also said; *‘These effects of witchcraft can only be wiped away by cleansing rituals. These can be performed by a gifted man of God or a renowned traditional healer’*.

Still another respondent had to say; *‘One can benefit from going to the hospital for treatment but if nothing is done to chase away the spirit of madness, the illness will not go completely’*.

The other participant also said; *'The spirit of madness can actually affect the entire generation if not properly handled. Something has to be done in the cultural way'*.

From the responses given by the participants, one can understand that the Jindwi people believe in the practical strategies that are aimed at dealing with the causative factors behind mental illness. This is in agreement with the assertion that Africans believe that the psychological maladjustments are a metaphysical challenge that can respond better to culturally sensitive traditional healing strategies (Gellert, 2017).

One healing strategy not yielding lasting results.

The majority of the respondents recommended the application of different strategies for healing. Mental illness was thought to be a combination of both physical and metaphysical factors that require different healing approaches. A good number of the participants attributed a blend of culturally informed strategies and medication.

One of the participants said; *'We cannot ignore the reality of spiritual matters even if we may benefit from scientific medication. They definitely need to be addressed differently'*.

Another respondent also said, *Witchcraft can never be resolved with medication. One can only get relief from the disturbing pains only. Something must be done to attain spiritual cleansing.'*

Yet another respondent further said; *'Avenging spirits do not know any boundaries. Medication can help but one should do the needful.'*

The other respondent specifically said; *'It's always good to avoid focusing on one healing strategy. One can apply everything as long as there is adherence to the prescribed medication'*.

According to the given responses, there is evidence of the acknowledgement of scientifically tested medication in resolving mental health challenges. However, the Jindwi people strongly believe that the prescribed medication need to be supported by cultural healing strategies. The researcher realizes that the Jindwi people appear to be deeply engrossed in their culture such that it becomes a challenge to separate it from them. One may understand this in connection with Sibanda and Hlongwane (2018) who assert that Africa has been left confused in the storm of a mixed blend of Afrocentric and Eurocentric curative strategies.

CONCLUSIONS

In line with the objectives of the study, the following conclusions can be drawn from this study's results;

1. There is a vague distinction between how psychopathology is explained from the Jindwi cultural perspective and a Western perspective. Whilst the Jindwi people may not be very specific in giving a proper name to mental illness, the supposed symptoms align with the American Psychiatric Diagnostic criteria.
2. In the African psychotherapy, the natural and supernatural elements are inextricably interwoven and health is not seen merely as a biological matter, but one bonding the human body and the spirit in total harmony.
3. The cultural healing strategies are important for the Jindwi, they strongly believe in them and it is difficult to separate them from their culture when helping them.
4. There could be a healing power in the African cultural healing strategies hence therapists might not gain the patient's confidence by demonizing them.

RECOMMENDATIONS

Given the conclusions above, the following recommendations were made

- a. The integration of cultural strategies in professional counseling can accommodate clients whose worldviews lie outside the Eurocentric one. It can make them feel accepted and understood.
- b. Professionals who work with people should also be flexible in understanding some of the client's choices for healing strategies.
- c. Universities need to provide courses purely related to African healing systems so as to have locally informed therapists.
- d. The researchers and therapists from Shona and Ndebele people of Zimbabwe can come up with a clearly documented philosophy of life which can be taught in schools as support for the indigenization of counseling services.

REFERENCES

1. American Psychiatric Association. (2022). *Diagnostic And Statistical Manual of Mental Disorders* (5th ed).
2. Charema, J., Shizha, E. (2008). Counselling indigenous Shona people in Zimbabwe: Traditional practices vs western eurocentric perspectives. *Alter Native: An International Journal of Indigenous Peoples*, 4(2), 123-139.
3. Gellert, Frances Renee. (2017). "Mental Illness Stigma, Socially Acceptable Treatment, and Barriers to Health". Independent Study Project (ISP) Collection. 2709
4. Hooley J. M., Nock M., Butcher J. (2020). *Abnormal psychology* (18 ed.). Pearson.
5. Mauwa, Caleb. (2020) "The Role of Chingondo/Chimaisiri Dance on Makasva and Humwe Rites in the Zimunya Communal Area, Zimbabwe."
6. Mbiti, J.S. (1969). *African religions and philosophy*. London: Heinemann.
7. Monteiro-Ferreira, A., 2014. *The demise of the inhumane: Afrocentricity, modernism and post-modernism*. State University of New York Press.
8. Ndlovu, S., Hove, E.F., 2015. *Old wine in new wineskins: Revisiting counselling in traditional Ndebele and Shona societies*. IOSR J. Humanit.
9. Nsereko, N. D. (2017). *The Evolution of Mental Health Understanding and Practice in Uganda*. *International Journal of Emergency Mental Health and Human*.
10. Rejek, M., & Misiak, B. (2023). Dimensions of psychopathology associated with psychotic-like experiences: Findings from the network analysis in a nonclinical sample. *European Psychiatry: The Journal of the Association of European Psychiatrists*, 66(1).
11. Rupande, G., Tapfumaneyi, K.D. (2013). The challenges of professionalising counseling in Africa. *Int. J. Adv. Res.*, 1(5), 565-570.
12. Shange, S., & Ross, E. (2022). "The Question Is Not How but Why Things Happen": South African Traditional Healers' Explanatory Model of Mental Illness, Its Diagnosis and Treatment. *Journal of Cross-Cultural Psychology*, 53(5), 503-521. Perceptions of causes and treatment of mental illness among traditional health practitioners in Johannesburg, South Africa
13. Sibanda, P., & Hlongwane. A. (2018). The degradation of the Afrocentric counselling perspective as a function of the perpetuations of engendered Eurocentric hegemonic practices in Zimbabwe. *Scientific Journal of Pure and Applied Sciences*, 7(3), 735-742.
14. Siregar C.T., Nasution, S.Z., Ariga, R.A., Tanjung, L.D., & Harahap, I.A. (2021). The Role and Function of Family Caring for Family Members with Chronic Disease in Medan.
15. Stanghelli G, Broome MR. (2014). Psychopathology as the basic science of psychiatry. *Br J Psychiatry*. 205:169–70. 10.1192/bjp.bp.113.138974
16. Sutton J, Austin Z. (2015). *Qualitative Research: Data Collection, Analysis, and Management*.