MENTAL ILLNESS AND THE SHONA PEOPLE OF ZIMBABWE, SOME KEY ISSUES

George Alex Muchinako*
Vincent Mabvurira**
Patience Chinyenze***

Abstract: The study sought to assess some of the key issues on mental illness among the Shona society in Zimbabwe. Information was collected from documents and key informant interviews. The study found out that the Shona definition of mental illness is similar to the western view but they have a different view on the causes. They believe that there is always a supernatural influence behind any mental illness problem. To deal with mental illness the Shona use a combination of approaches: the traditional medical doctor, the faith healer and the western medical doctor. The Shona prefer to consult the traditional doctor or the spiritual and faith healer before the western medical doctor and will often leave the modern hospital to seek treatment from the traditional doctor. The lack of adequate psychiatric services and lack of educational awareness on mental health issues in a fast changing and modernizing Zimbabwe continue to leave the Shona with the strong belief in the importance of metaphysical solutions to mental illness issues.

Keywords: mental illness, Shona, Zimbabwe, culture, metaphysical, psychiatric

*School of Social Work, University of Zimbabwe, Kopje, Harare, Zimbabwe
**Department of Social Work, Bindura University of Science Education, Bindura, Zimbabwe
***Department of Social Work, Women’s University in Africa, Mt Pleasant, Harare, Zimbabwe
ETHNO-HISTORY

Zimbabwe is a republic in Southern Africa and was called Rhodesia during the colonial period. There are two main distinct ethnic groups, the Shona and the Ndebele. The Shona comprise about two thirds of the estimated thirteen million national population (Central Statistical Office, 2012) and are known to have settled in Zimbabwe long before the Ndebele. The Shona society is comprised of about six sub-groups that speak a dialect of the main Zezuru language. The subgroups of Shona include the Zezuru (the main or largest group),Ndau, Manyika, Karanga, Korekore, Tonga and Nambya. The Shona society shares common beliefs and practices regarding mental health and other related issues.

MENTAL ILLNESS

The western understanding of mental illness is defined in the Roget’s Thesarus as “...any of various conditions characterized by impairment of an individual’s normal cognitive, emotional or behavioral functioning, and caused by social, psychological, biochemical, genetic, or other factors, such as infection or head trauma. Mental illness is also called emotional illness, mental disease and is sometimes called mental disorder”.

The Shona have an understanding similar to this western view on what mental illness is. The terms *kupenga* (mental illness) and *benzi* (a mad person) are the main commonly used definitive terms. Mental illness is known and understood to affect the brain of the affected person in such a way that the person will behave in a way that disregards social and cultural norms and values of behavior. The ‘*benzi*’ may have a violent disposition and may attack and harm people and objects and sometimes himself in the process. The ‘*benzi*’ may, on the other hand be passive and oblivious of any danger he might be exposed to or he may pose to others. He may for example, stand in harm’s way or use dangerous objects without caring about the effects. A mentally ill person may wade into crocodile infested waters or wander on a busy traffic lane without caring about the grave risks he would be exposed to.

METHODOLOGY

This study was based on desk research, in-depth interviews with five key informants with knowledge and experience on the issue of mental illness among the Shona people in Zimbabwe. The desk research involved reviewing available literature on mental illness among the Shona. The literature sources included books, journal articles, current newspaper and magazine articles. In-depth interviews were done with one current practicing traditional
healer (n’anga), a traditional village head (sabhuku) from Chikomba District in Mashonaland East, one Faith healer, one medical doctor (western) and a recovering psychiatric patient and his parents.

STUDY FINDINGS

Several issues came up from this study regarding mental illness among the Shona. These issues include: the types of mental illness; perceptions of mental illness; causes of mental illness; dealing with the problem of mental illness and treatment of mental illness.

TYPES OF MENTAL ILLNESS

The Shona have several classifications of mental illness. The most common ones include:

1. The violent type that attack and injure or destroy anyone or anything in their path, most commonly these are referred to as ‘mapenzi’ (plural form of the term benzi). Often these people are found or kept in chains or strong restraining ropes intended to control the violent behavior. Restraining them is also intended to keep them from wandering off and creating problems for themselves and their families. If they damage someone’s property or if they kill someone, their families would be held responsible for restitution or appeasement rituals.

2. Another type is that of the non-violent persons (may be violent sometimes), who talk to themselves, can crack jokes and laugh about them on their own. These persons often wander from place to place. They are unaware of dangers they may be exposed to and do not or cannot care about their own health, safety and security.

3. The other type is that of the passive persons who may be slow to learn or understand simple processes in life, for example, if one is putting on warm clothing in the morning because it is cold, when it becomes warmer one normally would be expected to remove warm clothing like jackets. The passive persons have to be told that it’s warmer and should remove their warm clothing (and may have to be assisted to act). For this type of passive mental illness the Shona use the terms ‘fuza’ and ‘rema’ in reference to a person with this condition of low mental capacity.

PERCEPTIONS ON MENTAL ILLNESS IN THE SHONA COMMUNITY

In the Shona society mental illness is recognized as the disease that affects the brain or mind to such an extent that the affected individual becomes incapacitated to function in a normal way. The Shona society views mental illness as occurring on a continuum, ideally every
person suffers some degree of mental illness at some point in life. Most people experience it at the socially acceptable level. It is only when one exceeds the ‘norm’ that it becomes a matter of concern. Where for example, a person experiences mild mental illness at certain times in the lunar circle (kana mwedzi uri mutete), this is tolerated and it is termed ‘mhengera mumba’. The affected person may experience periods of abnormal behavior lasting a few days but can function, that is, can play their social roles, even though not at the optimum expected levels.

Mental illness could result from a number of causes and societal attitudes towards the mentally ill are influenced by the cause of the ailment. If the afflicted person is not to blame for the cause they get sympathy and support but if they are to blame they are ridiculed and scorned. The Shona believe that mental illness could in some cases be prevented by avoiding practices or behaviours which cause it but where the supernatural is involved it cannot be prevented.

CAUSES OF MENTAL ILLNESS AMONG THE SHONA SOCIETY

The Shona people have several explanations for causes of mental illness and these include:

**Heredity**

The Shona believe that if there is mental illness in a family that mental illness is inherited unless the cause is some family or individual wrong doing which could be fixed and the problem ends (like in the case of ngozi explained below). Documentary evidence and in depth interviews concurred on the influence of heredity on mental illness.

**Natural causes**

It is understood that one can be born with a poorly developed brain function. In old traditional times the Shona used to kill those babies born with some identified deformity, mental or physical, that was thought could cause care problems. Unfortunately this included the killing of twins (mapatya) whose birth was regarded as an abnormal and an abomination to the family. The Shona believe that any unusual occurrence in life has a reason or cause that requires metaphysical explanation and solution. Usually natural occurrences of mental illness were associated with the need for rituals to cleanse the affected families and communities.
Avenging spirits (*Ngozi*)

The Shona revere and value human life and hold it most sacred. Taking away human life is regarded as the most horrendous crime that the perpetrator has to carry all his life or until him or his family pay for the crime. If one commits murder (*kuponda munhu*) the spirit of the murdered person is believed to haunt the killer by making him mentally ill. It is believed that the spirit of the murdered person will make the murderer mentally disoriented and to wander about in the community narrating how the murder occurred. At times the spirit of the murdered person is known, according to Shona tradition, to cause misfortune, unexplained sickness and deaths among the murderer’s kith and kin. It is believed that this can only be corrected or solved by consulting a traditional doctor (*n’anga*) who will explain the compensation and rituals that have to be done to solve the problem (Gelfand, 1982: 186-7; Gelfand et al, 1985: 53-58). The in depth interviews conducted for this study showed that these beliefs continue to be held among the Shona to this day.

**Ancestral spirits**

Shona life is deeply embedded with traditional beliefs and practices. The genuine Shona have to do all the traditional rituals as required by the ancestral spirits (Chavunduka, 1978). Failure to do that, the Shona believe, the ancestors can cause one to become mentally ill as a way of forcing them to carry out the ancestors’ wishes. The Shona traditions have it that if the ancestors want a person to become a spirit medium (*svikiro*) they make the chosen person mentally ill. That person may seek medical treatment but will not recover until they accept to do the ancestors’ wishes. By following and performing the required rituals the person will be cured of the mental illness without taking any medication. Patel, et al (2001) had similar findings in their study in Zimbabwe where they found that depression was believed to have supernatural causes. They also found out that most patients consult both medical (western) and traditional healthcare systems.

**Sorcery**

Sorcery was and is still believed to be used as a method to get justice. In cases where some people have been wronged and they cannot get justice, it is believed that they may resort to sorcery to get justice. For example according to the Newsdze Zimbabwe (10 September 2012) a woman lost a cell phone to a thief. She resorted to sorcery. The thief was reported to have lost his mind, was said to have reported the theft to the family of the woman from
whom he had stolen the phone and returned it. Sorcery is believed to be capable of causing mental illness but only to culprits in crime or where there is injustice (Last and Chavunduka, 1986).

**Witchcraft**

The Shona, like many other societies worldwide, believe in witchcraft. Witches (varoyi) are believed to be able to cast evil spells and cause mental illness. Witches are said to be driven by envy over achievements of others in the community which the witches themselves cannot achieve. They are believed to do this by using tools of their trade which include: spooks, owls, hyenas and snakes (zvidhoma, mazizi, mapere nenyoka). They are believed to send the chosen tool, through occult means, to attack their target. For example, the spooks (zvidhoma) can be sent to strike a targeted person. If the person is struck they may become hysterical and mentally disoriented. Unless spiritual help is rendered, it is believed the affected person may become mentally ill temporarily or for life and could even die (Last and Chavunduka, 1986).

**Ageing**

Ageing (kuchembera) among the Shona is understood to be a phase in human development when the old person’s mental faculties become affected by ageing that may lead to mental illness. Some elderly people are known to engage in soliloquy which the Shona call kuvhumuka, a form of mental illness. Old people are also known to experience memory loss and may forget important issues and activities. They may for example, forget to mind a cooking pot they place on the fireplace and may only realize they were supposed to when the smell of burning food reaches their nostrils from the fireplace. Chapleau et al (2009) notes that old people usually experience cognitive impairment in a gradual manner which may not be noticeable until strange behavior or safety issues arise.

**Magic charms**

To enhance personal security, power and success in business and wealth accumulation some Shona engage in ‘kuromba’ which is the process of acquiring magic and charms that are believed to enhance one’s prosperity. These magic charms come with instructions for use (muko) which have to be strictly adhered to, so that they can work as intended. Failure or laxity in adhering to the strict operational instructions may result in dire consequences such as mental illness on the non-adhering person. Participants in the indepth interviews, except
the doctor of western medicine, agreed on the existence and use of magic charms among the Shona. They also concurred on that use of magic was not good and that people should strive to be wealthy through honest means/work.

**Love portions (mupfuhwira)**

In the Shona society love, especially between husband and wife, is expected to remain strong throughout married life. If one party, often the husband begins to be attracted to other women or becomes abusive towards his wife the woman may seek to regain the husband’s love and attention by using love portions. These are procured from traditional medicine practitioners (Gelfand, 1982). These portions are believed to be so potent that they make the person on whom they are administered very docile and affect the brain function to the extent of causing mental retardation and mental illness. At times some of these love charms are known to cause the development of obsessive behavior on the person on whom they are administered. There are limited reported cases of Shona men using love portions to get and retain a woman’s love. This is known to occur where a man feels he has failed in courtship bids to win a woman’s love. He usually consults a traditional medical practitioner known to be an expert in love charms. Once he uses the charms as instructed, the woman in most cases is won over. The problem in most cases is that the woman develops obsessive behavior which is or borders on mental illness.

**Drugs and Alcohol**

People who use drugs and alcohol are believed to be at risk of mental illness. The common drug among the Shona is *mbanje*, commonly known as marijuana. Taking this drug is understood to place the takers on the risk of ‘kupenga’/mental illness. In a similar way, those who abuse some types of alcohol usually develop mental illness. Among the Korekore subgroup of the Shona there is a common beer brew called *kachasu* which in its purest form could be inflammable and is said to be capable of powering a petrol engine. People who take this beer in its purest form are known to develop a number of health problems including mental illness. In recent times, an equally potent brew called ‘Zed’ was brought into Zimbabwe by informal traders and there are reports of people suffering from a number of mental and other social problems as a result of consuming this ‘Zed’ beer. Ncube (2013) reported a case of a vendor in Bulawayo city who stripped naked in public after drinking ‘Zed’.
Accidents

The Shona understand that accidents may cause mental illness in a number of ways. If a person suffers head injuries and damage to the brain or if an injury prevents someone from achieving their dreams this may lead to mental illness. A man on his way to raise bride price (roora) and is stopped by a disabling accident could fail to achieve his dream as he had planned it. He may fall into depression which the Shona classify as mental illness. Sometimes people have accidents during various everyday life activities like hunting, fishing or farming. When such accidents result in injury to the brain, mental illness may result.

Diseases

The Shona understand that diseases can cause mental illness. The study participants noted that diseases such as malaria (chimhungwe) are known to cause mental illness especially if there is delay in seeking treatment and it develops into cerebral malaria. It is also known that sexually transmitted diseases (siki) if they are not treated, they can cause mental illness. The Shona have a variety of traditional remedies for all the diseases that patients may present to the traditional doctor (Chavunduka, 1978; Last and Chavunduka, 1986). In the current situation where HIV and AIDS has infected and affected many people in Sub-Saharan Africa, the AIDS pandemic is reported to be contributing to mental illness among infected people. Modern drugs used for treating the conditions caused by AIDS are also known to cause mental disorientation and hallucinations among some people taking the drugs (Jackson, 1992 and Hubley, 2002).

Social problems

Unresolved social issues have been regarded as important contributors to mental illness among the Shona society. Unresolved family disputes often affect family members who may see no solution to the problems. As a patrilineal society the men and boys have control over community issues and livelihoods. Men control women’s production and reproduction. Women do most of the agricultural and domestic labour but do not control the fruits of their labour. The men use the resources jointly generated for their own wants and needs. At times they use wealth generated by their wives to marry additional wives. This often causes mental problems among women who see themselves imprisoned in a lifelong social set-up without any hope of ever coming out of it. Patel et al (1995) used the term kufungisisa in reference to deep thinking that women in Zimbabwe sometimes experience due to their
powerlessness in a society they feel short changes them. This is seen as a contributor to the
depression and mental illness that women experience in a patrilineal society like the Shona.

**Employment problems**

Modernization has brought with it problems of unemployment and housing and amenities
provision in Zimbabwe, as it is elsewhere. People, especially the young, migrate from rural
areas to towns and cities to seek their fortune through employment in urban industries.
Expectations are always that once one leaves for the urban area their lives would change for
the better when they secure employment and get resources to acquire the life improving
material things. Often this dream is not realized and at times some people develop mental
problems due to failure to ‘make it’ in the modern industrial sector. Linked to this is the
issue of economic migration and the challenges encountered by migrants. There are reports
that migrants suffer harassment and have their life savings and material wealth destroyed
or taken away due to xenophobia and criminal action. This often causes mental problems
for the return migrants in the communities that have high expectations that returnees
would bring wealth to improve their families and communities. The documented evidence
and all study participants agreed on the contribution of unemployment towards depression
and mental illness as individuals fail to realize their dreams of a better life due to scarcity of
opportunities.

**Political influences**

Sometimes politicians would like to win elections and use every possible trick to gain or
retain political power. At times the politicians use people to campaign for them in return for
material rewards. These people are encouraged to use any trick in the book to ensure that
the politicians that hire them get elected. Some of the methods employed involve beating,
maiming and often killing opponents. After the elections the politicians live with the
outcome but always forget the people they hire to do the dirty work. The hired people are
known to suffer from depression and sometimes develop mental illness due to avenging
spirits (*ngozi*) caused by the spirits of people they would have murdered during the political
campaigning. The mental disturbance may also be due to feeling of powerlessness as they
have to carry the burden of crimes they commit helping politicians to achieve political
power yet those politicians leave them to deal with problems alone.
There was general concurrence on the causes of mental illness from information gleaned from the literature and from the informant interviews. The literature documents old and current views and incidents on mental illness among the Shona people. The literature also shows that western views on mental illness do not show much understanding of the Shona view. The medical doctor (western) expressed views similar to that expressed in the literature which is that mental illness has some scientific explanation behind and can best be handled in a scientific way. The traditional doctor concurred with most of the views regarding causes of mental illness but emphasized that there is always a spiritual explanation to any mental illness among the Shona. The faith healer elaborated their view that while they concurred with the Shona societal views’ they believed that often the major cause was sin and that this could only be overcome through incessant prayer to God. The patient who was recovering from mental illness reported that he was a successful farmer and was doing well and making good income from his farming operations. One day while working in the fields he was clapped on the cheeks by an unseen being and felt dizzy and fell down. From there he became hysterical and had to be chained to be controlled. His parents and his wife consulted a traditional doctor who diagnosed witchcraft caused by jealousy neighbours. The traditional doctor put the patient on treatment and both the patient and his family and the healer agreed that the patient was recovering well. They all indicated that traditional healing was the most effective way of dealing with mental illness caused through witchcraft.

DEALING WITH MENTAL ILLNESS IN THE SHONA SOCIETY

The Shona deal with the problem of mental illness in a number of ways. First it has to be established what caused the illness, then ways to deal with the illness are explored. According to Gelfand (1959) the Shona traditionally utilized the services of the traditional doctor to diagnose and treat illnesses (including mental illnesses). The traditional doctor (n’anga) plays a central and integral part in Shona religion which is linked to the prevention and treatment of disease. The Shona, even to this day, consult traditional healers and or faith/spiritual healers when they are faced with an illness and may consult western medical practitioners as additional source of help. In seeking the causes of mental illness, and other illnesses, the Shona do it as a family because there is belief that a disease affecting one family member is likely to affect all the other family members hence the need for a family
approach to finding a solution to the illness. For the genuine traditionalist Shona no diagnosis of disease is complete without a spiritual diagnosis and treatment (Shoko, 2007).

**Treatment**

Once the cause of mental illness is established, treatment is sought. While issues like heredity and natural causes may seem clear and straightforward, the Shona believe that there are always metaphysical forces at work and these must be dealt with in order to achieve effective treatment. Even in seemingly clear cases like mental illness caused by untreated malaria, there are always questions as to why one particular individual was affected and not the others. The belief is that there is always some supernatural influence involved in the day to day lives of the Shona people. Even with modern advancement in medical science and treatment of mental conditions, the Shona are believed to always consult traditional doctors or faith healers first before or soon after accessing modern medicine. In many cases the Shona are known to abandon modern hospital therapy for traditional or faith healers’ therapies (Last and Chavunduka, 1986).

For cases involving mental illness caused by avenging spirits (*ngozi*) the Shona believe that the only medicine is paying the required reparation hence they have a saying “*mushonga we ngozi kuripa*”. It is important to note that in expressing the point that ‘the only medicine’ for dealing with mental illness caused by avenging spirits the Shona do not exclude western and traditional medications. The expression merely emphasizes the primary role of the appeasement ritual around which other medications could be used and that using other medications without the ‘*kuripa*’ ritual will not bring a permanent solution to the problem in this instance.

**MENTAL ILLNESS IN THE ERA OF MODERNIZATION AMONG THE SHONA PEOPLE IN ZIMBABWE**

As a developing country, Zimbabwe has been exposed to modernization, urbanization and industrialization which have seen new trends and causes of mental illness emerging as well as ways to deal with them. There however remain major issues that have to be addressed in order to improve and benefit from the modern scientific developments in the diagnosis treatment and management of mental illnesses. This study shows a continuing belief system in metaphysical influence on causes, diagnosis, treatment and management of mental illnesses. This belief system is strong and has strong psychological influence on the Shona
society. Given that there are no effective alternative approaches, it should be logical to recognize this and to support this approach along other contemporary approaches to dealing with mental illness among the Shona. Another issue is on the lack of modern psychiatric services accessible to the majority of the population in Zimbabwe. Psychiatrists are very few and found only in the main towns. This leaves the majority of the population without the services but can easily access traditional and faith healers. There are no health promotion campaigns on mental illnesses. This perpetuates stigma associated with mental illness due to ignorance on the causes and how mental illnesses can be prevented.

CONCLUSION

This study sought to explore major issues on mental illness among the Shona society of Zimbabwe. Through desk study of relevant documents and in depth interviews with key informants the study found out that there were various causes of mental illnesses as well as ways of dealing with them. Preferred ways of dealing with mental illness involved establishing the cause and selecting a suitable solution. Metaphysical belief systems, lack of adequate psychiatric services and lack of information (information, education and communication) leave the community with no choice but to depend largely on traditional medical doctors and faith healers for psychiatric services.

REFERENCES:


