

Efunsetan Aniwura: A Psycho-Historical Exploration of Women's Psychopathology

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Abstract—The psycho-social impact of childlessness and the patriarchal nature of the African society on women has been greatly undermined in literature. Factors influencing such impact borders on gender roles and preference of male child over female, so much so that the traditional African woman's human rights has been greatly infringed upon. Efunsetan Aniwura is an example of such African women who stood against male chauvinism and gender inequity in her time. She wielded economic power and owned a household full of slaves. As her name depicts "Aniwura" meaning "owner of Gold", was a woman of wealth and spiritual depth in power and authority.

This study adopted a psychohistorical exploration of oral and written records on the mental health impacts of patriarchy and male chauvinism on women's psychosocial well-being in Africa with a focus on the traditional Yoruba Society in Nigeria. Psycho-historical exploration of the African society and its traditional role of silencing women in the past is rare. This method will no doubt assist in the creation of enabling environment for further research focusing on women's psychopathology in Africa. It is however not a justification of the terrible acts of despotic leaders, but a mental health case presentation.

Index Terms—Psychopathology, psycho-historical exploration, Efunsetan Aniwura.

I. INTRODUCTION

This study aims to demonstrate an interdisciplinary approach to women's mental health by analyzing the psychopathologic state of a Yoruba historical figure from the cultural and historical perspectives. The study will be significant in the sense that analysis of psychopathology of a woman from cultural and historical perspectives is rare in clinical psychology. This study will therefore be among the first set of works to do this. The psychological perspective used in this mental state examination derives from an approach to psychiatry known as descriptive psychopathology developed from the work of Karl Jaspers [1]. The study views that some African cultural practices entails factors that could easily predispose one to mental illness.

The historical approach used in this study presents some of the historical factors precipitating and sustaining mental illness and current psychopathologic outcomes among women who suffer from childlessness and harmful traditional practices in the pre-colonial period. Drawing from the life

and times of Efunsetan as presented by Isola [2], the study maintained that procreation and capitalist traits which encouraged the pursuit of patriarchy, individuality, industry and thrift were integral parts of the Yoruba culture. Social stratification based on indices of wealth (such as commerce, cultivation of large acreages of farms, large numbers of wives, children and slaves, pot full of cowrie shells, wrappers, horses and scabbards) distinguished the wealthy and relatively wealthy as well as the not -actually wealthy -but comfortable individuals from the majority who were the have-nots. Most, if not all of these wealthy personages in the traditional Yoruba settings derived their wealth from hard work and diligence in peasant cultivation of food and cash crops and trading. Till date, trading and commercial activities constituted the major preoccupation of Yoruba women.

II. PURPOSE OF STUDY

The purpose of this study is to conduct an examination of the impact of childlessness and male chauvinistic society precipitated in sustaining mental illness among women in Africa.

III. METHODOLOGY

This study adopted an historical figure case-based approach to access, analyze and address the complexities of psychopathology of a woman from cultural and historical perspectives. This is based on Morgan and Smircich's [3] argument that the choice of which method to employ is dependent upon the nature of the research problem, the actual suitability of a research method, derives from the nature of the social phenomena to be explored. A case is refers to an event, an individual or even a unit of analysis which in Anderson [4] view allows an investigation of contextual realities and the differences between what was planned and what actually occurred.

IV. DATA COLLECTION

Data used for this study was collected mainly through secondary sources and indirect means: search for literature on historical records (i.e. oral interview, historical records, literary works and internet sources).

V. CASE PRESENTATION

Name: Efunsetan Aniwura (Owner of Gold); **Age:** Adult (She Lived In The In The Late 1800's); **Marital Status:** Single; **Religion:** Traditionalist/Muslim; **Gender:** Female;

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Occupation: Farming and Trading; **Duration of Illness:** Unknown.

VI. PERSONAL HISTORY

After the death of her daughter in child birth, Efunsetan adopted Kumuyilo. She was a powerful, rich and influential High Chief of Ibadan (women leader of the women - the Iyalode of Ibadan) who hailed from Egba. According to Ilesanmi [2], oral evidence reveals that she was a big-time farmer and producer of food crops who had a) three large farms in each of which no less than 100 slaves worked; and b) as many as 2,000 slaves on her farms. She probably went into food processing and trading (commercial) activities at Oja-Oba. She extended credit facilities in the form of ammunition to the Latoosa and his warriors during their military expeditions in 1872; and fielded 100 slaves as soldiers under her head slave, Ogidan, to join the Ibadan forces on their expedition to the Ekiti country. As women leader in Ibadan and a successful trader in arms, she was able to contribute to the debate on the issues of war and peace. As an anti-war spokesperson in Ibadan, she stood against the expansionist policy of Aare Latoosa which brought many towns under Ibadan jurisdiction. Latoosa and his collaborators bribed Kumuyilo and some other relatives to kill her. On the night of June 30 1874, knowing where she slept, two slaves instructed by Kumuyilo entered the room from the ceiling and dashed out her brain [2] Latoosa then installed Kumuyilo as head of Efunsetan's family.

VII. PRESENTING COMPLAINT

Efunsetan's first major presenting complaint was the political woes which emanated from Latoosa and the then Ibadan chiefs' tardy refusal to pay off their debts and the throwing-up of three charges against her – a) Her withdrawal ammunitions in warfare; b) withdrawal of supplies during the campaign; and c) refusal to come out in person outside the town wall to congratulate him on his safe return [2]. Based on these charges, Efunsetan was deposed on 1 May 1874, and replaced with her Otun (first lieutenant). She was publicly disgraced at the Town Council meeting on the 22nd of June 1874. Following the death of her daughter during child labour in 1860, she had a terrible sense of loss for not having a progeny to inherit her legacies. She blamed God for her tragedy, and consequently vented her aggression on the society she swore to defend while taking oath on her installation as the Iyalode. She became wicked and cruel towards her neighbours. She ordered her slaves to beat a palm dresser, old Ogunjinmi to death for supposedly encroaching on her property and killed her pregnant slaves (especially Adetutu). She also tied some of the male slaves to stakes as punishment for tardiness in their work. She terrorized the slaves through verbal abuse, threat of death, corporal punishment, and even cold-blooded murder. She refused to help people in trouble, as exemplified in her brusque treatment of Akinkunle, who needed financial help for his ailing son. Her only friend was Ajile, a self-serving woman who befriended her for material gifts (see. Table I).

TABLE I: MENTAL STATE EXAMINATION OF EFUNSETAN

Domains of Interest	Mental health state Examination
Appearance:	There was no record of the following about her: a) Colourful or bizarre clothing which might be indicative of mania; and b) unkempt, dirty clothes which might suggest schizophrenia or depression.
Attitude:	Channel 2 Uncooperative, hostile, guarded, suspicious and regressed: These made her to become wicked, cruel, callous, bitter, heartless and a monster dreaded by the society.
Behavior:	Psychomotor agitation and hyperactivity were noted in her behavior as written and acted out in Ishola's work. This might be suggestive of mania or delirium.
Mood and affect:	She also exhibited sadism, verbal aggression and reactive affect against her neighbours and slaves.
Speech:	Isola [2] showed that she exhibited <u>mutism</u>
Thought process:	No record of thought disorder but Isola [2] indicated that she had it under the influence of divination and enchantment made against her during the conflict with Latoosa that led to her arrest.
Thought content:	Key in-depth interview (KII) reveals that she had overvalued ideas, obsessions and preoccupations. Exploration of the abnormalities of her thought content were established in an open-ended manner with regard to their intensity, salience, emotions associated with thoughts, extent to which the thoughts were experienced as her own and under her control, and the degree of belief or conviction associated with the thoughts. The KII showed that she had delusional jealousy or delusional misidentification which is mood-congruent; obsession; intrusive thoughts of violence and injury against anyone who became pregnant around her; and undue preoccupation with thoughts of suicide, homicidal thoughts.
Perception:	She had no record of perceptual disturbance, hallucinations, pseudo-hallucinations and illusions During the encounter with Are Latoosa, record has it that she lost her memory, became idiopathic, did not know how she got arrested and taken to the kings prison. But when she gained consciousness of her environment, she decided to commit suicide rather than living in disgrace. At some moments in her life, she had no awareness of, and responsiveness to the environment, and this might be described as lack of alertness; cloudy, drowsy, or stuporose [5].
Cognition:	She had no insight into her problem. She did not recognize that she had a mental illness; she did not comply with the societal method of treatment, and had no ability to re-label unusual mental events (such as delusions and hallucinations) as pathological.
Insight:	Impaired judgment- She had negative sense of judgment: No slave in her compound must get pregnant. She killed Adetutu. She had no capacity to make sound, reasoned and responsible decisions. Impaired judgment may be a prominent feature of disorders affecting the frontal lobe of the brain. If a person's judgment is impaired due to mental illness, there might be implications for the person's safety or the safety of others
Judgment:	

VIII. RESULTS

A. Diagnosis

The profile of Efunsetan could be: a) a case of someone with induced psychopathologic disorder through the traumatic loss of her only child in a cultural milieu that places much emphasis on progenitors; b) External locus of control-blamed God for her tragedy; c) Displacement- As a distressed individual, Efunsetan transferred her aggression to: her slaves and neighbours; d) Suicidal ideation- ("Iku ya je sin" =

meaning “death is better than shame” [2]. In the Yoruba cultural setting, suicide is a heroic deed and not a psychopathological disorder. Many traditional kings had committed suicide as an act of bravery in order to avoid open disgrace or defeat in a battle; e) Negative cognition; and f) Anti-social behavior: Physical aggressiveness (attacking a neighbour with cutlass) and Verbal aggression.

B. Psychological Treatment

In contemporary Nigeria, Efunsetan would need cognitive behavior therapy, individual counselling, psycho-education and Psychiatric referrals, instead of the dehumanizing treatment that was meted out to her.

IX. PSYCHOSOCIAL EFFECTS OF AFRICA’S CULTURAL AND SOCIAL LEANING ON EFUNSETAN

The androcentric cultural and social leaning of the Yoruba race has rendered women invisible in the governing process and challenged their decision-making roles in the economy [2]. Although, quite a few women have risen to prominence and became icons (Funmilayo Anikulapo-Kuti; Margaret Ekpo; Gambo Sawaba and Okonjo Iweala), the growing disadvantage of the general female population in Nigeria in national development planning has become a sore point, particularly in the South. In addition, Isola [6], who wrote the famous play on Efunsetan, tinted his work with the aura of this androcentric cultural and social leaning of the Yoruba race. His focus appears to be more on the psychotic and sadistic states of Efunsetan rather than on her heroic exploits and economic achievements. He presented her as a wicked, cruel, callous, bitter, heartless monster dreaded by all. It took the concerted efforts of Ibadan warriors led by Latoosa to free the city from her grip. Rather than helping her, the society declared her wanted and got her murdered. In a heroic bravery and self-pride, Isola [7] showed that she committed suicide to avoid open disgrace from Aare Latoosa.

X. IMPLICATIONS FOR COUNSELING AND PSYCHOTHERAPY

Below are the socio-demographic, diagnostic, aetiological, prevalence and therapeutic implications counselling and psychotherapy:

Socio-demographic Implication: Efunsetan hailed from Egba, migrated to Ibadan in search of greener pasture, was rich in gold, had slaves and wielded power with men of nobility in her days. She had a daughter who died at child birth. **Occupation:** Her main lines of business were import and export trade. A thorough understanding of a Efunsetan’s socio-demographic background was useful in determining the line of contemporary intervention which could be offered this woman in present day Nigeria. This is because socio-demographic status could sometimes be implicated in an individual’s mental health status. Efunsetan’s arrest and subsequent ill-treatment which she perceived as a mark of disgrace led her to commit suicide. Her case is a typology of gender inequalities in social, political, and economic power that promulgate labelling, stereotyping, separation/status loss, and discrimination.

Diagnostic Implication: Diagnosis provides a working

hypothesis that guides the practitioner in understanding the client. The identification of disruptions in Efunsetan’s behaviour and lifestyle facilitated an understanding of the contemporary psychologic interventions which she may receive in present day Nigeria. Thus problem identification aid counselors and clients in setting up of therapy goals and treatment plan to meet the unique needs of each client. Diagnosis begins with intake interview. In this study, Efunsetan was a traumatized woman who could have been diagnosed with first grade sadism which today is often seen as any behaviour that is designed to hurt or humiliate others but the classic meaning refers to phenomena that are way more extreme. The term sadism refers to the derivation of pleasure as a result of inflicting pain and suffering or watching pain inflicted on others. Aspects of it include: Sadomasochism (such as paraphilia) and Sadistic personality disorder (nonsexual sadism). The word sadism originally comes from the name of the French philosopher and writer the Marquis de Sade who authored several sadistic novels.¹ It was provisionally in the appendix of *DSM-III-R*.

Signs and Symptoms: Sign is an objective manifestation of mental disorder observed by the examiner rather than reported by the affected individual, while symptom is a psychophysiological manifestation of disorder reported by the affected individual. The identification of any of these in an individual is crucial to accurate diagnosis and provision of holistic intervention. The psychopathologic evidence of sadistic behavior normally begins with obsessive thoughts and sexual fantasies coupled with the desire to inflict physical or psychological torment or humiliation on another.

Causative Factors: This can be due to a variety of factors including hormonal disorders, infertility, socio-demographic problem, personality disorders, drugs and toxic chemicals, childhood trauma, a neuro-protective effect of female hormones, less lateralization of the female brain [8], etc. If the causative factors of a mental health problem are known, then the problem is half solved. Sadism is the desire to dominate and control one’s victim as well as the urge for revenge, which is often acted out in a sexual context and varies in the degree of violence from mere role-play to actual restraining, bondage, beating and torturing.

Prevalence and Incidence of psychopathology in women: There seems to exist a lack of normative information on the distribution of psychopathology among African women. The knowledge of these rates for women psychopathology is fundamental to progress in counseling and psychology research. Without such information, there can be no meaningful assessment of diagnostic accuracy [9]. Differential prevalence is especially vital to the study of women psychopathology [10]. Remarkably little research has centered on the relationships among women psychopathology, race, and social class--this notwithstanding many popular beliefs about ethnic propensity for specific disturbances and about heightened risk for economically disadvantaged persons [11].

Treatment: It is not all persons affected with psychopathologic disorders willingly seek help from orthodox medical practitioners in Nigeria. For instance, Stone [12] asserted that sadistic persons rarely seek treatment and

¹ <http://info.addictions.org/index/Addictive+Behaviors/Sadism+-+What+Is+It%3F>

are generally untreatable. This could be said to be true with Efunsetan. However, "some do have the capacity for remorse and self-reflection". Therefore, counseling and psychotherapy ought to be tailored towards the specific needs of individual clients. To do this, psychotherapists need to note that psychopathologic treatment is highly individualized and must include psychotherapy as well as cognitive and behavioral therapies.

Goals: All therapies have the goals of identifying the client's needs and then modifying the person's thoughts, feelings, or behaviours. Selecting appropriate therapeutic techniques, then, depends on whether a counsellor's goals are oriented toward changing thoughts, feelings, or behaviours.

Assessment: The conduct of a comprehensive assessment of a client's past and present is the initial step in the therapeutic process for the formulation of specific counselling goals and appropriate intervention strategies. This process usually enables counselors to describe behavior as they observe it and encourage clients to think about its meaning. In this way assessment becomes a process of thinking about issues with the client rather than a mechanical procedure conducted by an expert therapist.

XI. CONCLUSION

The history of humanity is replete with records of man's inhumanity to man, so much that it seems that most human societies must be considered inequitable. One of which is the silence of literature on Nigeria's national development on the contributions of women like Efunsetan Aniwura [13]. The Nigerian androcentric cultural and social presentation of Efunsetan leaned more on her psychotic and sadistic states than on her illustrious and industrious personality. Her personality has socio demographic, diagnostic, aetiological, prevalence and therapeutic implications for clinical and counseling and psychotherapy. For those researching archeological and historical facts, the Nigerian androcentric cultural and social presentation of Efunsetan in a narrowed myopic methodology and view is an issue of great concerns which demands further digging into the heroic deeds of similar women who had been rendered invisible literary wise.

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