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When Conventional Medicine Fails: Bori and Olokun Ritual Dance as Treatment for Post-Traumatic Stress Disorder (PTSD) for Nigerian Armed Forces

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Abstract

This article attempts a conceptualisation of African ritual dance therapy (ARDT) as a distinct form and practice of dance movement therapy (DMT). We argue that Bori and Olokun dances, two of Nigeria's most potent ritual dances, possess therapeutic elements that bear on the treatment of combatants of the Nigerian armed forces currently engaged in a theatre of war against terrorism and banditry in Nigeria. Our argument is premised on the discovery that military hospitals in Nigeria is currently over-stretched with about 57% of the military and paramilitary personnel (participants) suffering from post-traumatic stress disorders (PTSD) resulting from their encounters with terrorists' cells and bandits. We argue against the institutional frame that sanctions the normalization of conventional medical practice as well as medicine in the diagnosis and treatment of men of the armed forces faced with PTSD. We use ARDT dance ethnography as a theoretical premise to contend that African ritual dance therapy (ARDT) offers an alternative curation for the

men of the Nigerian Armed Forces. We use the research instrumentations of focus group discussion and ARDT workshop sessions to get data from 12 para/military participants. We found out that the Bori and Olokun ARDT convey diverse spirit-restorative medicaments that can serve the Nigerian Armed Forces.

Keywords: ARDT, Bori, Conventional medicine, DMT, Nigerian armed forces, Olokun, PTSD.

Introduction

The title of this paper draws from the deep-seated consciousness of pseudo-Pentecostalist Christians as well as 'Islamicates' in Nigeria who condemns African ritual dance therapy (ARDT) performances during the day but seek help at African ritual therapy centres in the cover of night. This is evident in the sizable number of attendees and visitors during *girka* (Bori ritual dance therapy performances to deliver people from diverse ailments) and Olokun ritual dance which takes place at nightly hours. It follows that Nigerians, be they Christians or Muslims, rely heavily on African ritual practices for healing, especially where conventional medicine fails. For many Nigerians, one's religiosity does not determine where one goes to in search of healing or help. This accounts for the reason many Nigerians across different professions, medical sciences, security, teachers, engineers, businessmen, politicians, pastors and mullahs, irrespective of their spirituality fall back to indigenous ritual practices for solutions to terminal diseases and problems. However, it remains a puzzle why many still condemns a practice [African ritual dance therapy] they depend on for curation particularly when Western medicine fails.

Perceived by the American Dance Therapy Association (2022) as "the psychotherapeutic use of movement to further the emotional, cognitive, social and physical integration of the individual", dance movement therapy (DMT) in Africa transcends the mere integration of the psyche to corporeality but rather the dis/location of spatiality through ritual exercises, meta-choreography and movement practice. In this study, we take a detour from the Euro-American theorization of DMT practices and methods with a view to understand what may constitute dance movement therapy in the African sense. Our deflection is premised on three factors; one is that DMT is mostly perceived from the lens of the arts and medical sciences by over 80% Nigerian dance therapists and medical practitioners with only little attention given to aspects of spirituality. This

is evident in the scarcity of research studies in the area. Secondly is that Euro-American theorizations of DMT have instituted some kinds of canonicity that influence the manners and ways many African dance therapy pedagogues as well as researchers perceive DMT to the detriment of 'fringe' ritual practices. Thirdly is that movement therapy is much more than an art form [dance] or psychotherapy for the Edo and Hausa indigenous peoples of Nigeria.

For the Edo people of south-south Nigeria and the Hausa people of the northern part, dance therapy exists as a form of ritual worship; not as professional practice as in dance movement therapy (DMT). Although elements of African rituals are often deployed in professional DMT sessions or practice, deep attention has not been given to the spirituality that drives and sustains the dance movement therapy in Nigeria. This study is anchored in what the researchers categorise as African ritual dance therapy (ARDT); a practice that is largely unknown in dance and spirituality studies yet has facilitated the treatment of combatant men of the Nigerian armed forces faced with post-traumatic stress disorder (PTSD). ARDT thrives on the thresholds of spirituality vis-à-vis other elements like space, time, traditional musical instrumentations and threnodies, props, costuming, movements as well as all the paraphernalia of the identified ritual practice. It finds expression in both African Traditional Religion (ATR) and other forms of allied traditionalised Christian or Muslim worship such as in Cherubim and Seraphim Movement (popularly known as C&S in Nigeria), Celestial Church of Christ (CCC), Chrislam (a combination of Christian and Islam forms in southwest Nigeria) and even more Africanised churches such as the Holy Aruosa belief amongst the Benin people.

The efficacy of ARDT methods is anchored in the identification that there is power in space, and that repeated choral chants accompanied with traditional musical instrumentations evoke bodiless forces within such an identified space that facilitate the therapist's kinaesthetic awareness, simultaneous intuition, senses, thought and analysis of the condition of the patient. Under this system, the therapist relies on their revelatory insight [of Bori and Olokun religions] as well as their educated guesses for direction. Bori and Olokun rituals are examples of dance therapy rooted in spirituality and ARDT. The foundation of Olokun and Bori ritual dance can be traced to religious worship as other ritual dances in Nigeria. Olokun worship is a practice amongst the Benin people. One of the myths of its origin has it that Olokun is the eldest son of *Osanobua*

(Supreme God) who is gifted with immense power to cure any ailment (Obanor, 1994, p.12; Omoera & Obanor, 2012) and the wisdom with which he administers the universe on behalf his father the creator (Izevbigie 1978, p.15).

Bori, on the hand, is a spiritualist cult originally of the animist Maguzawa Hausa people of northern Nigeria and parts of West Africa. The rituals very often involve spirit possession and trance. Bori spirits are believed to significantly influence life in the world of the living through their ability to possess, diagnose and heal those they favour (Okagbue 2008, p.270). Within the belief system of Bori religion, every experience or happening is believed to have a spirit equivalent (Ihidero 2019, p.5). These two forms of traditional healing are the most popular types of ARDT performance in Nigeria. The method of Bori and Olokun ARDT often begins with the identification or creation of a benefitting space to attract disembodied bodies [space occupied by trees, a body of water, bareempty, mountains, valleys, rocks etc] depending on the situation. This is to be followed by stockpiling - that is, assembling the space with the paraphernalia [props, costume, actant, perfumes, etc.] of the choice spirituality. This is the first stage, the preparatory stage. The second is the intermediate stage where the therapist and client are introduced to themselves and are led into the space. Here, the sufferer or consultee is prepared [either as a medium or a fledgling] and garbed with kits of the created environment as the therapist embarks on a conversation with the patient with ritualized tunes playing at the background. The conversation is mostly accompanied by nuanced instrumentation.

From our years of practice, two things have occurred during this stage; one is that the consultee is soaked-in into the re/created space of present-absent [a kind of astral-physical journey in search of self and alignments, continuous dis/location and relocating of one's cosmic self and the mind in the process] until one gets to a point of symmetric balance; an integration of emotional, cognitive, physical, social and spiritual aspects of self. The concept of 'present-absent' in the Edo religion or ritual process is anchored in the belief of *Orion nór rie eré* [loosely translated to mean "the spirit that has gone on an errand" and in other parlance, "traveling spirit often in search of authentic self and/or solution"]. The practice is set in motion by the therapist who is mostly a person of spiritual depth and can control how far the spirit can travel. Failure to effectively exercise spiritual control may worsen the crisis or health condition for the consultee, and in some cases death. Second is that the consultee, who in

this case is a medium, is overtaken by the current of traditional musical instrumentation so much so that he, by himself or herself, diagnoses and prescribe treatment to his/her ailment to the therapist.

Lastly, is the evaluation stage where the consultees are facilitated to do what they could not do before the ARDT performance. As a field of enquiry, this practice has been deployed in diverse performance contexts; however, they have been largely not documented. Within its practice, it is believed that moving in unison with others expels isolation placed upon oneself because it has the power to fuel feelings, unity, and strength. The rhythms of African traditional musical instrumentation has the ability to energize while loosening muscles and reducing anxiety. Fostering spontaneity helps the body freely speak, it is a potent tool to explore emotions and realize personal limitations. Moving creatively offers an opportunity to express what is within while discovering new aspects of the surrounding environment. These are some of the viable tools that help to release the needs of the body. ARDT is a holistic approach to restoring health which involves attending to physical, mental, emotional and spiritual dimensions of persons across the life cycle, whose processes lie outside the conventional medical domain of exploring traditional African ritual dance elements.

Methodological Consideration

This study is rooted in qualitative research methodology. It uses focus group discussion (FGD), key informant interview (KII), ARDT performance and participant observation as research instruments to collect data. The researchers worked with 12 para/military combatants from initial figure of 32. 17 of the 32 left the ARDT session because, according to them, they cannot participate in "pagan ritual dance against their faith". The 12 participants that remained needed healing at all cost. They were mostly Christians and Moslems although curious as to how the therapy session will turn out. The key informants were the Sarkin Bori (King of Bori) and Magajiya (mother of Sarkin Bori) who provides extra spiritual support for her son. The researchers used live Bori ritual dance performance as well as pseudo-Olokun dance sessions as a tool for facilitating the participants on treatments and procedures. The ARDT sessions lasted between 45 to 60 minutes three times every week and for fourteen days. The researchers triangulated the research instruments and made deductions from the ARDT performance and procession.

For the purpose of ethical consideration, permission to conduct the research with the men of the armed forces was obtained from the mobile police force headquarters with a promise that the names and facial pictures of the participants will not be displayed. Verbal permission to video-record aspects of the ARDT performance and sessions were also sought and granted from the Bori cult and combatant men of the armed forces. Below are the permissions to conduct the study from the mobile police cottage hospitals and the University of Benin Teaching Hospital (UBTH) who were part of the workshop

Discussion/Analysis

ARDT is experiential both for the therapist and for the participants or patients. Within the framework of spirituality and practice, the human body as well as mind becomes a space within a larger space (the environment). As a space, different things or ritual messages can be inscribed on the body or mind of the possessed and such inscriptions is vocalise and given meaning by the Sarkin Bori (King of Bori). First, the combatant fighters of the armed forces were taken to seclusion as with the practice of Bori. The combatant men were kept in seclusion with the guardian, uwargirka or ubangirka who supervises the administration of medicines made from roots and herbs on the combatant fighters. The medicine was administered to protect the combatants against harm from violent characteristics of some of the Bori spirit dances. In seclusion, he is instructed by the guardian on the secret of possession and prepared. After three days of seclusion, the combatants were assembled to perform the ritual where they are possessed. This experience is deployed as the presence-absence in treating patients in ARDT. The Sarkin Bori claimed that:

When Bori possesses a man it is usually unknown to the person, that is, without the consent of the individual; so it can happen at any time and anywhere as long as everything has been prepared... When the spirit possesses me, I lose consciousness of my environment and everything I do or say at that time is only a vent of what the spirit is saying or doing... When possession happens participants become oblivious of their environment. The spirit can possess anyone regardless of whether or not the fellow is a practitioner and when this happens, if there is no one to help the individual, the person can die because the these spirits come with great

torture and they make the individual do unthinkable things to themselves (Sarkin Bori, Personal Communication, February 14, 2022).

Within the context of the revelation above, finding cognitive, emotional, social and physical symmetric balance for the combatants come with torture in the mind's journey in search for balance. In the present-absent occurrence, there are a lot of rupturing, dis/location and relocation until the combatants reach or find their cosmic.



Plate 1: A combatant soldier in a state of torture in the search of symmetric balance during an ARDT performance at Kurmin Kogi, Ikara LGA Kaduna State. Photo: V.O Ihidero

The above state of anguish portrays the torturous journey in the search for cure. While in this state the combatant explores his diverse selves until he reaches his elastic limits of harmony and balance. It is from this position that *Sarki yaki*, the spirit of war who has possessed the combatant diagnoses the problem and proffers solutions to the herbs that can cure him. The herbs were to be collected in three distinct locations, Kano, Maradi (in Niger Republic) and Borno. In the case of one of the combatants, cure did not come in spite of the great torture. This is because someone in the combatant's lineage is believed to have offended the spirit. In this case, the household spirit (the elders in the pantheon) of the combatant was invoked an appeased. This meant the particular combatant needed to be taken on more ARDT session more than the fourteen days period.

The movements during the Bori performance were highly symbolic and were mostly decoded by the *magajiya* (mother of Sarkin Bori). The movement was such that the participants enter the physical space in a procession jumping from side-to-side with one hand behind and

the other in front in a worship mode. As the drumbeats changed, the head is put forward with both hands stretched backward in space as the participant jumps from side-to-side from slow to fast-paced frenzy. This is succeeded by swift turns, spinning and alternating hand movement. The movements were done repeatedly to charge up the atmosphere and for the spirit to mount his/her choice mediums. Once the spirit was sensed from afar, the dancers opened up their bodies, with fast-paced jumps of three beats; two steps forward and one backward, which quickened the mounting on the medium. At this stage, the *magajiya* identified the Bori spirit that has mounted the combatant. She danced round the combatants stamping her feet in succession and began to pour out content from a calabash on the face of the combatants.

As she did this, the combatants yelled, put their legs forward, jump and hit the floor with their buttocks. They remained still in this signalling to the audience that the spirit has unmounted them and that they have been cured. What this implies is that the spirit goes out in the same violent way through which they came. The leaping and falling express this violence. After unmounting them, the instrumentation then changed to a slow eurhythmy and the combatants began to dance by swinging their hands as they leave the ritual space. Some of the dance sequences observable in the Olokun ARDT session conducted in Benin City, Nigeria were jumping, leaping, swinging, clockwise and counterclockwise, circling and flapping. Just as in the Bori ARDT formation, the movement structure of Olokun ARDT thrives on bodily bearing and position in space which mostly take the form of worship and posturing. This manifests in the deployment of techniques such as mirroring and inverse positioning.



Plate 2: ARDT in progress; Mirroring session. Photo: Awele P. Ikem

Within the context of Olokun ARDT, mirroring entails copying the ARD therapist or another participant's faithful movements. During the session, as evident in the picture above, the ARD therapist facilitated the combatants on mirroring her actions and movements of others with a view to help them develop relationship and connection. The combatants attested that two things emerged from their deployment of the technique. One is that mirroring leads them towards authentication and accepting new experiences. Second is that it helped them to empathise with other participants' experiences and compelled them cooperate better. After earning the trust of the combatants, they were taken through the games of ritual and spatial control; something that bears on the integrative power of the mind, soul and body within Olokun ritual and worship. Here, they were facilitated to form ritual alliances as one entity in search of a super goal, cure.



Plate 3: Olokun ARDT activity of astra-cosmic alliances. Photo: Awele P. Ikem

Unlike the Bori ARDT performance, the deployment of Olokun elements for therapy dispels torture. Rather the participants experience some form of utopian freedom as they journey through different arcane within the pantheistic prototype in Olokun religion. By partaking in the

Olokun astracosmic activity, the combatant noted that they felt their minds taking their body through space and aligning it with lost essences. This, according to one of the participants, gives a sense of control and confidence to confront his fears. This pattern is consistent with the present-absent form evident in ARDT praxis. The movements above are one of bodily opening for possession and worship. It followed that participants can be more open in their decisions and decision-making in the search of integration. The posturing helps to satisfy the desires for self-determination and self-mastery. The symbolic expressions and postures help in the release of aggressive emotions and channel violent urges. Following this is the assimilation ritual. Here, ARD therapist brought the Olokun ritual props to bear as in the pictures below.



Plate 4: Olokun ARDT Activity where props are deployed to respond to change. Photo: Awele P. Ikem

To ascertain whether integration has taken place amongst the combatants, or, whether they now have mastery of themselves, the ARD therapist took the combatants on *ugbe-iyare* (victory dance) where the participant-combatants are garbed with Olokun ritual props such as *ezuzu* (traditional woven hand-fan), *ukuse* (beaded gourd-rattle), *orhue* (naïve chalk), *egogo* (small bell) and *usun okpon'bo* (handkerchief). Here, their

ability to confront and respond to change is tested in dance evident in shifting speeds, changing rhythms, and navigation of personal space. The intensity of the dance as well as changing rhythms provides some kinds of re/connection of the mind to their body and soul. As soon as the ARD movements moved from one level of intensity to another, it is accompanied by a celebratory chant, *Eyo!*, (an esoteric language) to signify that the combatants have been possessed. This is followed by another esoteric ululation, *iyare iyare!!!*, a chant used to charge the combatants to victory. As in Bori, repeated movements as spinning, fast spins and turns, orchestrated by eurhythmy are used to whirl up the spirit to achieve certain efficacious results. Within the ritual space, the orchestra controls the direction of the ARDT whilst the priest or priestess functions as the master/mistress of the ceremony. From without, the ARD therapist is the solitary facilitator. S/he depends on some forms of *girka* (boiling in Bori parlance) to be able to facilitate effective therapy session.

For evaluation, we adapted the PCL-5 of the National Centre for PTSD into ARDT post-testing technique. We facilitated the combatants to answer the focus group discussion (FGD) questions asked at the beginning of study and them instructed to provide answers based on their experiences post-the ARDT workshop performance and session. An assessment of the PCL-5 post-testing show three major results; one 96% the combatants could no longer see repeated flash pictures or unwanted memories of the war as well as the moral injury sustained in the cause of fighting; second 84% of the combatants no longer feel anxiety, upset or strong physical emotion when something reminded them about the war and lastly, 79% no longer have negative belief about themselves, other people or have troubles falling or staying asleep.

Conclusion

Spirituality is one of the plenipotentiaries of the therapist in meditative practice, movement formation and speeches. ARDT provides a wet ground for 'seeing' and 'knowing' as well as plunging into the depths of the challenge before the dance therapist. It is a more plunging solution which finds its root in ritual, in divining healing and purity, most especially peace of mind after treatment. Our argument is anchored on the belief that ARDT as well as the diverse spiritualities that sustain its performance deserves to be studied considering its curative potency and its ability to cure ailments where conventional medicine fails. Currently, ARDT is largely castigated in Nigeria and parts of Africa in spite of many

provable examples of curation. Two ARDT performances that stand out in Nigeria is the Bori and Olokun healing rites. In the ritual oeuvre of these two forms of spiritualities, is a large body of knowledge that has not been given enough critical attention vis-à-vis their import to mental health, wellness and medicine generally. The ARDT performance and workshop sessions with combatant men of the mobile police force and soldiers in Nigeria calls attention to curative energy evident in Bori and Olokun ritual dance therapy. Within the spirituality of the ARDT performance, it is believed that there is no ailment or disorder that cannot be cured or restored as long as the African ritual dance therapist has enough insight into the cosmic arcane and can control and channel the re/creative energies from thence to curation and wholeness. However, this remains arguable as 'belief' or 'believing' may not be enough for curation.

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