

RESEARCH ARTICLE

# Crossroads: leprosy, Igbo cosmology and cultural worldviews

Odinaka Kingsley Eze

History, Anthropology, and Science, Technology and Society, Massachusetts Institute of Technology, Cambridge MA, USA

Email: [akaeze@mit.edu](mailto:akaeze@mit.edu)

## Abstract

This research examines the continuity and changes in Igbo thoughts on leprosy by exploring Igbo cosmology and its relationship with Christian and colonial ideas about the disease. The perception of leprosy in precolonial Igboland reveals a shocking similarity with the later Judeo-Christian identity and the perception of leprosy that dominated the area during colonialism. It argues that colonial and Christian missionary ideas did not radically transform the perceptions of leprosy in south-eastern Nigeria. Instead, what happened was merely an adaptation and continuity of prevailing thoughts about the disease. Using oral evidence, archival materials and existing anthropological works on Igbo worldviews and cosmology, this research shows the changes in the colonial socio-cultural knowledge of leprosy. After careful analysis, it concludes that, while colonial medicine and the missionaries' idea of leprosy healed leprosy sufferers and transformed their identity, most Igbo people continued conceptualizing the disease as an aberration and maintained the stigmatization of sufferers.

## Résumé

Ces travaux de recherche examinent la continuité et l'évolution de la pensée igbo sur la lèpre en explorant la cosmologie igbo et son rapport avec les idées chrétiennes et coloniales sur cette maladie. La perception de la lèpre dans l'Igboland précolonial révèle une similitude choquante avec l'identité judéo-chrétienne ultérieure et la perception de la lèpre qui prévalait dans la région pendant le colonialisme. Cet article soutient que les idées missionnaires chrétiennes et coloniales n'ont pas radicalement transformé la perception de la lèpre dans le Sud-est du Nigeria. Au lieu de cela, ce qui s'est produit n'est qu'une adaptation et une continuité des idées dominantes sur la maladie. S'appuyant sur des données orales, des documents d'archives et des travaux anthropologiques sur les visions du monde et la cosmologie igbo, ces travaux de recherche montrent l'évolution des connaissances socioculturelles coloniales sur la lèpre. Après analyse, l'article conclut que, alors que la médecine coloniale et l'idée des missionnaires sur la lèpre guérissaient les lépreux et transformaient leur identité, la plupart des Igbo continuaient à conceptualiser la maladie comme une aberration et à stigmatiser les personnes qui en souffraient.

## Resumo

Esta investigação examina a continuidade e as mudanças nos pensamentos Igbo sobre a lepra, explorando a cosmologia Igbo e a sua relação com as ideias cristãs e coloniais sobre a doença. A percepção da lepra na Igbolândia pré-colonial revela uma semelhança chocante com a posterior identidade judaico-cristã e a percepção da lepra que dominou a região durante o colonialismo. Argumenta-se que as ideias missionárias coloniais e cristãs não transformaram radicalmente as percepções da lepra no sudeste da Nigéria. Em vez disso, o que aconteceu foi uma mera adaptação e continuidade dos pensamentos prevalecentes sobre a doença. Recorrendo a provas orais, materiais de arquivo e trabalhos antropológicos existentes sobre cosmologias e cosmologia Igbo, esta investigação mostra as mudanças no conhecimento sócio-cultural colonial da lepra. Após uma análise cuidadosa, conclui-se que, enquanto a medicina colonial e a ideia que os missionários tinham da lepra curavam os doentes de lepra e transformavam a sua identidade, a maior parte do povo Igbo continuava a concetualizar a doença como uma aberração e mantinha a estigmatização dos seus portadores.

## Introduction

In Igboland, as in many other parts of Africa, leprosy predated the advent of European colonialism.<sup>1</sup> Among the Igbo of south-eastern Nigeria, the nature of leprosy did not conform to their cosmic ideas about the cycle of life, death and the afterlife. Its debility, intractability, skin lesions and general gory manifestations paralleled physical and spiritual death in their cosmology. Contingent on this, the idea of leprosy and its sufferers could not adequately fit into Igbo cosmology and worldviews. This research is an attempt to investigate why leprosy was incompatible with Igbo worldmaking as represented in their cosmology. Notably, it examines why the idea of ostracization/stigmatization was ubiquitous in Igboland before the colonial interlude and how colonial campaigns to isolate leprosy sufferers in leprosaria reinforced or undermined precolonial ideologies of the disease.

For anthropologists and historians of medicine and disease to understand the etiology of leprosy and why Igbo society dreaded it during the precolonial period, the study weaves the disease into the three-cosmos theory in Igbo cosmology (see Oriji 2011). Specifically, it delineates within this cosmos areas of causal relationships in Igbo cosmology, and where and why leprosy contradicted Igbo worldviews. At the

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<sup>1</sup> There are contestations that leprosy originated in India before its dispersal around the world. This is because new archaeological evidence suggests that the disease existed in the Indus Valley around 2000 BC. Other evidence also points to Ancient Egypt and China. For more details, see Trautman (1984) and Santacroce *et al.* (2021). In Igboland, oral tradition has also preserved the memory of leprosy among the people, as acknowledged by my interviewees in Oji River, Onitsha and Nsukka. However, its origins are lost in time, making it hard to postulate that a particular geographical area or people are responsible for spreading leprosy. For instance, during my interviews with Isaac Eze and Alexander Isiani in Onitsha and Nsukka, respectively, they told me about how leprosy had always signified the highest infliction that could ever befall an individual. Isaac Eze went on to narrate his father's brother's ordeal with leprosy and took me to the place where he was ostracized as his illness became worse. Although oral traditions are problematic, like every other source of history, the lack of writing or archaeological sources makes their use inevitable. For more on the significance of oral tradition in the history of Igboland, see Oriji (2011: 26–7). It is also worth noting that this study focuses on the region of colonial eastern Nigeria that speaks the Igbo language.

same time, it demonstrates how these pre-existing ideas of leprosy functioned in tandem with the Christian missionary's ideologies of leprosy in the colonial period, enabling the creation of a hybridized cosmology. Therefore, similar to Peter Ekeh's theory of the two republics in Nigeria, it concludes that the primordial conceptualization of leprosy continued to coexist with Christian missionary ideologies without any revolutionary changes occurring in the minds or thought processes of the Igbo (see Ekeh 1975). The study argues that radical transformations in ideology and identity transpired among those on the margins of Igbo society, including the Osu – ritually undesirable people in Igboland dedicated to an oracle and ostracized from the rest of the community – and leprosy sufferers (see Ubah 1988: 82).

Igbo cosmology operates on three layers of universal representation. There is the *Ènù Ìgwé*, *Ènù Álá* and *Álá muo*, where different personalities thrive. *Ènù Ìgwé*, the abode of the supernatural, including the sun, moon and other objects, serves as the home of Kamalu or Amadioha, the god of the sky, rain, lightning and thunder. *Ènù Álá*, dominated by man, includes animals, nature (earth force), nature spirits and evil/good spirits. It also houses *Álá* (the land goddess), the most powerful of all divinities.<sup>2</sup> In this cosmos, humans forge life through peaceful coexistence with nature. Similarly, *Álá muo* is inhabited by ancestors, *chi* (individual versions of deities), demons and the spirits of the dead.<sup>3</sup> The divinities in these three cosmoses are accessed through deities, ancestors and *chi*. Only the man or woman who has maintained a balance while in *Ènù Álá* transitions into *Álá muo* as an ancestor (Orijji 2011: 45).

An attempt to decode the etiology of leprosy among a cultural group that believed in the cyclical revolution of life reveals that there was no opportunity for leprosy sufferers to complete their transition into the afterlife. The identity of 'lepers' denied them entrance into the ancestral world – which the Igbo imagined concluded the revolution of life. Therefore, the Igbo categorized them as people whose affliction contradicted the coordinates of life. Their existence symbolized evil, profanity, and other oddities that were anathema to propagating societal values. In some ways, leprosy sufferers in precolonial Igboland passed through a social-cultural demise before their physical death; Christianity, however, provided them with another image of the afterlife. This change was possible during the colonial period because the gospel penetration partly undermined the foundations of the Igbo cosmology and religion, due to its Judeo-Christian teachings on cosmic origins and life after death.

Etiologies and ideas of disease causation in precolonial Igbo society stemmed from its endogenous religion, cosmology and worldviews. Historians and anthropologists of religion in south-eastern Nigeria have meticulously studied the interrelatedness of Igbo religion, cosmology and worldviews alongside the cultural and socio-economic ordering of Igbo society prior to colonial rule (see Oriji 2009; Meek 1937; Anigbo 1982; Aguwa 1993; Ikenga-Metuh 1985; Nwoye 2011; Kalu 1978; 1992). These authors have underscored the centrality of *Álá*, the earth mother, in the social-cultural ordering of

<sup>2</sup> These divinities include *Álá* (*Áni*), Amadioha, Nfijoku (Ifejioku, Njoku), Anyanwu and Ikenga, See Ubah (1988: 73–4) for more on the importance of divinities and ancestors in Igbo cosmology and traditional religion.

<sup>3</sup> Note that *chi* has no equivalent in the English language. A close meaning is that it refers to the individual guardian or force that protects, guides and provides. One must be at peace with one's *chi* for it to function.

Igbo society, the origin of totemism in Igboland, the corpus of Igbo beliefs concerning their cosmic rationalization, the purification rites in traditional Igbo settings, taboos and ordinary laws, and Igbo ideas of life, death and the afterlife. This study builds on the solid foundations of these existing works by analysing ideas of epidemic diseases such as leprosy in Igbo society and cosmology.

Scholars have already established that the Igbo, like many Africans, accepted Christianity for the most part; there have been many detailed studies on its impact on traditional religious practices (see Ubah 1988). However, the implications of early missionary ideologies on the conceptualization of certain diseases, such as leprosy – a disease that facilitated the penetration and consolidation of Christianity in Igboland – remain schematic. For instance, before the decades of the 1920s and 1930s, which heralded the rapid expansion of Christianity in Igboland, missionary activities were confined to hospitals and schools (Ubah 1988: 84; Vaughan 1991: 79–83). In these circumscribed spaces, missionaries proselytized mostly to undesirables, including leprosy sufferers and the Osu, hoping that changes in leprosy settlements would bring about religious change outside. Thus, the population of leprosy sufferers provided missionaries with early Christian converts, ensuring that an audience existed for the gospel work of mind re-engineering until their message began to gain wider traction (Vaughan 1991: 83).

Although these relevant works are foundational to formulating further theories of disease in Igboland, their scope is often constrained to the generic meanings of epidemic diseases such as leprosy, yaws, cholera, kwashiorkor or smallpox in Igbo cosmology and worldviews. With this approach, some diseases such as leprosy, which remained a nuisance in the precolonial and colonial period, do not receive adequate attention, particularly on how the changing socio-political and cultural landscape during the colonial era impacted ideas about and attitudes to the disease (Anigbo 1982: 515–17; Aguwa 1993; Ikenga-Metuh 1985). For instance, in his study of the Igbo idea of death, Osmund Anigbo asserts that Igbo society regarded people who died of leprosy and other infections as ‘having lived badly’ (Anigbo 1982: 515–17). However, the problem with Anigbo’s study is that it does not go further to discuss the nature of leprosy and why Igbo society resented it due to their worldviews. For instance, how can the Igbo idea of life and death as mediated by ancestors help anthropologists and historians explain disability and other bodily afflictions that follow the diagnosis of leprosy? In addition to paying inadequate attention to leprosy in the Igbo cosmology, these relevant works do not focus on the colonial era, nor do they examine the shifting terrains and varied impacts of Christian missionary activities on Igbo ideology and attitudes to leprosy and its sufferers.

Broadly, among studies of religious change in Africa, Richard Gary, following his predecessors Robin Horton and John Samuel Mbiti, has established that early Christian missionary indoctrination on the principles of eschatology inspired the conversion of many Africans. However, in contrast to Horton, but following Mbiti, Gary attributes religious change among Africans to their imaginations of life after death as outlined in Christian eschatology instead of the transition in the African belief system from a lower to a higher God (Gary 1978; Horton 1971; Mbiti 1971; 2012). For Mbiti and Gary, Christian missionaries influenced the thought processes of Africans mainly through their teachings on life after death. Gary emphasizes that such teachings won them many converts, especially among the weaker members of

society, who were expunged from communal ancestral inheritance (Mbiti 1971; Gary 1978). However, did these mission-centric ideas of the afterlife overhaul the societal ideology about leprosy? In other words, how did Igbo people respond to the Christian principles of life after death when such teachings offered leprosy sufferers a chance that had been impossible in the Igbo worldview and cosmology? What impact did this teaching and the broader policy of leprosy prevention and cure have on the perception of the disease during the colonial era?

Although the idea of Christian life after death was consequential in the conversion of many Africans, including the Igbo, the fact that traditional religion or syncretism predominated in their thinking implies that colonial rule had a peripheral impact on their cosmology (Ubah 1988: 71). It also shows that Igbo people accepted missionary ideas of the afterlife while drawing from their own cosmic views of leprosy. This was because of the striking similarities between the way in which Igbo people conceived leprosy in the precolonial period and the colonial idea of the disease. Previous interpretations of leprosy in south-eastern Nigeria have not covered the continuity of leprosy conceptualization from the precolonial to the colonial era. These twentieth-century disease control-centric narratives often give sketchy introductions to leprosy in the precolonial period but discuss colonial leprosy ideas as a sharp break from what was possible in the past (Manton 2006: 327–45; Ubah 1992: 51–8; Kalu 1996; Shankar 2007; Oduwobi 2013).

This present study departs from the conclusion that colonial biomedical intervention on leprosy control in south-eastern Nigeria represented an overhaul of the past. Until the cure for leprosy became consolidated in the 1950s, the Igbo did not conceive the prophylactic method employed by the colonizers as utterly new because they were used to identifying and isolating leprosy sufferers in their communities before colonial rule. However, colonial expansion led to the unprecedented multiplication of leprosy, in both numbers of sufferers and numbers of diagnoses – that the people could not quickly identify nor control – unlike in the precolonial era. Also, in the colonial period, the movement of people and goods was more fluid, accounting for a greater spatial distribution of the disease. Therefore, Christian missionary ideas of arresting this situation intersected with Igbo worldviews and their three-cosmos representation of the disease, with each adjusting to attain congruent objectives. Indeed, African initiatives, drawn from their cosmology and worldviews, impacted how they collaborated or rebelled against British interventions in the colonial period (Ajayi 1969: 507–8). Using oral interviews, archival materials, and existing anthropological and ethnographic works on Igbo worldviews and cosmology, this research concludes that, while Christian ideology transformed the idea of leprosy among its sufferers, it proved difficult for it to penetrate the wider society.

### **Why theorize from south-eastern Nigeria?**

The colonial era was a decisive moment in the history of Igboland, not only because of the socio-economic and political transformation that swept through the region and many other parts of Nigeria but also because of the ideological tensions it inspired between the colonized and the colonizers. British colonialism, operated under the system of indirect rule – which was consolidated only in the 1920s – was only an

'episode' that reorganized Igbo political and socio-cultural structures (Ajayi 1969: 507). Its ideological impacts remained minimal and were contained within existing cultural dialectics or what Ekeh calls 'primordial publics' (Ekeh 1975: 108–11). Although the acceptance of Western ideology and religion varied from place to place, the Igbo embraced the Christian faith and Western education due to the Igbo ability to accommodate the mosaics of other cultures within their worldviews (Achebe 2012: 130). After their failed resistance to colonial intrusion in the early twentieth century, this ability to adapt to what they perceived as a progressive Western culture influenced their worldview in myriad ways, but not as radically as many may have thought. For this reason and more, the period was, in many ways, a crossroads where those who lived in it wrestled between the domains of autochthonous Igbo civilization and Western civilization (Achebe 2012: 8–9). The tension at these cultural crossroads was palpable: to abandon one's culture and tradition as 'primitive' or to accept European culture and education but remain cognizant of autochthonous worldviews (Ekeh 1975). This ambivalence provided a fecund ground from which flowered a multiplicity of ideas, identities and practices in a highly transient moment in history.

South-eastern Nigeria is primarily populated by Igbo-speaking people. It harboured the most significant percentage of leprosy sufferers in colonial Nigeria (Davey *et al.* 1956: 65). In the 1930s, Uzuakoli, the largest of these centres, housed thousands of patients seeking solutions for their predicament (ILA 2022). Before the discovery of the endemicity of leprosy in Igboland by the British colonial government, the small number of cases in urbanizing areas such as Lagos had led to the promulgation of the 1916 Leprosy Ordinance to prevent contagion with infected populations in townships. However, these efforts were uncoordinated and yielded few or no results. As subsequent British administrations discovered the menace of the disease beyond urban areas, especially in those interior areas with high concentrations of leprosy sufferers, they began to experiment with village segregation.

In 1939, the British Empire Leprosy Relief Association (BELRA) estimated that leprosy sufferers in Owerri Province of Igboland, in the location of Uzuakoli, stood at 7,000. In some communities within the province, the disease occurred at 33 per cent in a population of 1,000. During its peak, the Uzuakoli centre treated 3,000 leprosy sufferers in a week, culminating in more than 200,000 within a year, mostly those with mild cases of the disease (ILA 2022). Because of the high incidence of leprosy in this part of colonial Nigeria, the society witnessed significant encounters with colonial actors who utilized every medium to establish the efficacy of colonial medicine and Christian faith – which is why this research focuses on Igboland. These actors, including Christian missionaries of various denominations, experts from the BELRA, voluntary organizations and colonial administrators, interacted with a society that had established ways and ideas of confronting the endemic leprosy in their environment.

Existing records from the colonial period do not fully explain the reasons for the spread and explosion of leprosy during the time of the European presence in Nigeria. There are unresolved arguments about why south-eastern Nigeria had the most significant percentage of leprosy sufferers in colonial Nigeria (Russell 1938: 66–8). One study suggests that increased exchanges and interactions made possible by road and railway networks, constructed by the British colonialists to link the hinterland to the

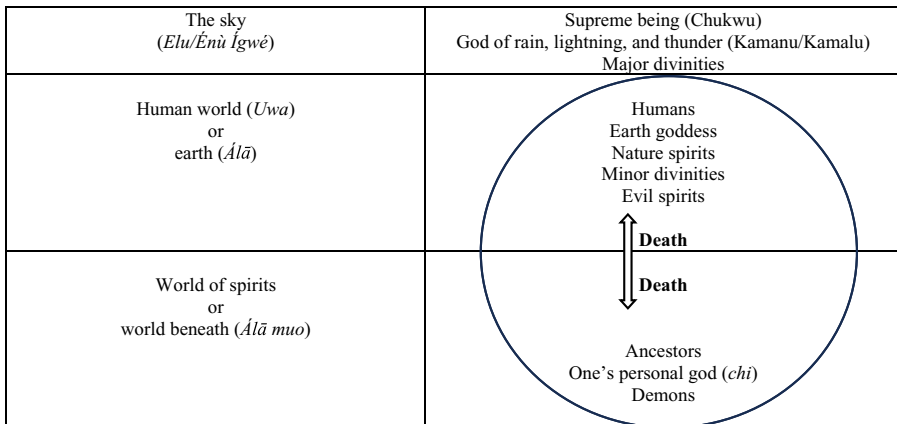
port cities to foster the export of raw materials, were responsible for the high rate of leprosy in this region (Davey *et al.* 1956: 65). Another study indicates that, in the 1930s, when reports on the increasing incidence of leprosy became widespread, northern Nigerians singled out Europeans for blame as disseminators of leprosy. While northern Nigerians and other people based in other parts of the world, such as South Africa, suggested that leprosy had been introduced to their societies by Europeans, the people of south-eastern Nigeria blamed Western civilization and Christianity for the high rate of leprosy in their colonized societies. For the people of south-eastern Nigeria, European attacks on traditional healing practices exacerbated the spatial spread of leprosy in their society. Put differently, for them, without Europeans undermining their conventional healing practices, partly by describing them in such terms as ‘barbarous’, ‘cruel’ and ‘ruthless’ (Russell 1938: 66–8), the spread of leprosy would have been impeded through communal ostracization of leprosy sufferers and the employment of other traditional methods.<sup>4</sup>

In contrast, Europeans attributed the high rate of the disease to Africans’ cultural ‘maladaptation’ to modern life and to their lack of ‘ethnic discipline and racial degeneracy’ (Vaughan 1991: 81–3). For instance, a missionary report in the *Journal of the Royal Society* assumes that, while Europeans imported clothes to help modernize Africans, an African who ‘discovers that he had a tiny patch of leprosy, the harbinger of misery, could conceal it with his cloth, and perhaps for years, his neighbors will think that he had come in possession of little money and taken to modern fashion’ (Russell 1938: 66–8). By concealing leprosy with his cloth, it is further suggested that the African may be highly infectious, communicating the disease to his family and others who encounter his materials and tools (*ibid.*: 66–8). Whether or not increased exchanges and interactions made possible by road and railway networks or Europeans were culpable for the astronomical density of leprosy in south-eastern Nigeria, the prevalence of the disease spurred the colonial government into establishing four major leprosy centres in this one area alone (Davey *et al.* 1956: 65).

### Theorizing leprosy in Igbo cosmology and worldviews

The origin of leprosy in precolonial Igboland remains unknown. However, of all the ailments in premodern Igbo society, leprosy attracted the most stigmatization because of its nature, which Igbo people considered incompatible with their anthropocentric worldviews. Without biomedical therapy for leprosy, the Igbo worldviews and cosmology dictated how they responded to it. According to Ogbu U. Kalu and C. H. Kraft, ‘worldviews’ covers a set of precepts through which people rationalize their existence, collective experiences and the cosmic power of the universe (Kalu 1992: 42; Kraft 1972). These rationalizations interpreted the causes of misfortune, illness, disease, death and unforeseen circumstances such as inclement weather conditions, strange happenings and perennial problems (Nwoye 2011). Considering the implications of worldviews on diseases in Igboland, it is vital to weave leprosy within its contours and structures. By embracing the approach that stresses the Igbo worldview, the following analysis indicates that precolonial Igbo societies equated leprosy to the supernatural. They believed that leprosy could not function as

<sup>4</sup> Group interview with elderly leprosy sufferers in Oji River, south-eastern Nigeria, July 2022.



**Figure 1.** Representations of Igbo cosmology. Source: Adapted with slight modification from Oriji (2011: 45).

a pathological illness and, for their security and protection, they condemned leprosy sufferers to the evil forest. This reaction to leprosy was intended to avoid destabilizing the elemental forms and organization of the universe (Ikenga-Metuh 1982: 11; see also Figure 1).

Igbo spirituality contributed to their ideas about leprosy in the precolonial period. For the Igbo people, religion was at the epicentre of their intellectualization, and therefore it directly affected how they imagined misfortunes and afflictions (Oriji 2009: 24–5). In Igbo religion, the universe consisted of the physical and the spiritual, and those in both spaces interacted in a dualistic relationship (Ubah 1988: 72). Any interruption in this dual coexistence destabilized the universe's equilibrium, leading to mayhem and misfortune in the physical realm. As a result, maintaining balance remained the paramount obligation of humans for the propagation of life (Nwoye 2011: 307–9).

In the Igbo cosmic understanding of the world, maintaining a high degree of morality was imperative to achieving harmony and unity between the three cosmoses – *Ēnù Ígwé*, *Ēnù Álā* and *Álā muo* – and the divinities accessed through deities, ancestors and *chi*. This unwritten code about the ordering of life in Igbo cosmology implied that any violation of the harmonious relationship with all these entities attracted severe punishment from the universe. Specifically, anybody who compromised the Igbo moral codes offended the land/earth (*Ánì/Álā*), and such acts were often regarded as abominations (*Alu*).<sup>5</sup> Anyone afflicted with leprosy fits into this category of morally depraved individuals who distort the equilibrium and order in the cosmos. For profaning the land, the Igbo people designated leprosy sufferers as apostates who desecrated the coexistence of the universal dualism of life and death. In Igbo society, the earth was accepted as the most powerful and

<sup>5</sup> Interview with Chinyere Ugwuoke (seventy-seven years old, recovered leprosy patient), Oji River leprosy centre, Enugu State, 2021.



significant entity because 'it is the nourishing force ... it makes things grow and consumes them; it unites within itself the two opposite poles of existence, life and death' (Zahan quoted in Aguwa 1993: 540). Therefore, leprosy sufferers represented people who broke the moral code of the land – the earth goddess – which was by far the most powerful deity in Igboland because the people thought she possessed the most extraordinary powers in the affairs of life. The dreadfulness of the disease informed the proverbial caution that '*Ékwé Ónyé Ékpéntá n'áká, íbí òmá āgubá yā.*'<sup>6</sup>

Because the Igbo worldview explains the origins of leprosy through the activities of *Ánì/Álā*, and given that the Igbo's expressions and thoughts about the disease revolved around evil, wickedness and poor standing with the gods or laws of the land, it is not surprising that the disease was associated with bad omens. This association of leprosy with bad omens led to the ostracization of sufferers. Moreover, following the rationales of Igbo cosmology, and in the absence of scientific and clinical understanding of the causative agent of the disease, leprosy could not function as a pathological illness. Its intractable nature partly explains why those associated with the disease for the entirety of their remaining days on earth lived condemned to acute ostracism, resentment, dejection and scorn.

Life was participatory for the Igbo. The living had to offer prayers, sacrifices, and invocations to their *chi*, communal deities and ancestors to maintain balance and unity in the universe (Nwoye 2011: 307–9). In Igbo cosmology, *Énù Ígwé*, the supernatural and cosmic world, and *Álā muo*, the land of the dead, often impinged on the activities of humans in the terrestrial dimension of life in *Énù Álā*. However, their encroachment on the affairs of humans did not imply that they were at the centre of the universe. Rather, the implication of their involvement in the quotidian experiences of humans was part of the process of the circles of nature. Human life was the nucleus of the 'traditional Igbo cosmic structure' (*ibid.*: 309). Although the Igbo conceived life as a treasured gift from the cosmos, humans had the power and responsibility to foster its advancement and permanence. Therefore, the Igbo worldviews and cosmology during the precolonial period were highly anthropocentric (*ibid.*: 307). However, because of their deformities, leprosy sufferers were unable to engage in any economically meaningful or productive activities. This made it impossible for many adult sufferers to provide for the material needs of their families. Consequently, those afflicted with leprosy automatically absorbed an identity that stood as anathema to the concept of life. They were regarded as deviants who had distorted the seamless cyclical flow of the Igbo cosmology. In particular, they were thought to have contravened the idea of augmenting life, the essential duty of humans. As a result, they could not maintain perfect relationships with *Énù Ígwé* and *Álā Muo*.

By its nature, leprosy deprived its sufferers of their hands, feet and, in extreme cases, their sight, all of which were required to provide food, shelter and other material necessities of life. Without a cure for the disease, those who suffered from it in precolonial Igboland often lived until they became disabled and mentally drained. It was even worse when sufferers were afflicted in their youth. Not only could they

<sup>6</sup> Interview with Isaac Eze (sixty-nine years old, retired civil servant), Ezimo, Enugu State, December 2021. This proverb could be read to mean that, if you extend a handshake to a leprosy patient, the person will demand an embrace and therefore you should desist in order not to attract the wrath of the earth arch-divinity and earth goddess by association.

not accumulate the material means that the land (the earth goddess) provided, but they usually died unmarried and without children who would perform their burial ritual, which was necessary for transitioning into the ancestral cosmos in *Álā muo*. Consequently, their identity as 'lepers' denied them entrance into the ancestral world – which the Igbo imagined concluded the revolution of life.<sup>7</sup> Therefore, being afflicted with leprosy was perceived as tantamount to a person's physical and spiritual existence being terminated.<sup>8</sup> According to Isiani Alexander, the Igbo people equated those suffering from leprosy to the dead without proper burial rites in the physical world, even though they were alive.<sup>9</sup> On this premise, different communities in Igboland permitted women whose husbands suffered from the disease to remarry so that they could continue to fulfil the task of replenishing the earth (Okonkwo 2019: 45). In an interview, Isaac Eze posited that, on many occasions, the dilemma of a leprosy sufferer could be summed up in the following words:

In most cases, *Ndi Ekpenta* [leprosy sufferers] preferred that the gods strike them dead rather than live with such despicable conditions. My father's brother burned himself in his hut. Many of them committed suicide in the olden days, not only my uncle. Before society even stigmatized them, they also had the idea of what had befallen them, and some of them chose to die and hope that they would get lucky in their next world rather than live at the mercy of others. Their *chi* has not been good to them in this life, and there was no need to remain on earth if they could not contribute to life.<sup>10</sup>

The rationalization and imagination that negated the ideas of life in the Igbo worldview informed the sending of leprosy sufferers to evil forests or the wilderness, where they stayed away from the communion of the living. However, some families chose to erect a hut outside their living compound for leprosy sufferers, until their cases became severe. Igbo people thought that incurable diseases such as leprosy attracted evil and malevolent spirits and the spirits of the dead (Nwoye 2011: 307). Therefore, keeping leprosy sufferers away from the boundaries of human habitation, which supported life, maintained balance in the cosmic realms. In addition to sending leprosy sufferers to evil forests to cleanse the land and restore life, the Igbo people discarded the cadaver and the belongings of leprosy sufferers in the forest to check the spread of the disease and to defeat it. In some communities, they were thrown into a sacred stream. After this procedure, the chief priest or *dibia* (native healer) usually performed a ritual to restore life in the land (Ubah 1992: 53).

Although leprosy sufferers were not confined in the evil forest or other spaces to die, they likely stayed and died in forbidden or remote territories without ever receiving a befitting ground burial that would turn them into ancestors in the afterlife. Moreover, for the Igbo, those suffering from leprosy and other epidemic diseases were considered dead even when they may still be living (Ikenga-Metuh 1985:

<sup>7</sup> Interview with Romanus Eze (seventy-six years old), Oji River leprosy centre, Enugu State, February 2021.

<sup>8</sup> Phone interview with Isiani Alexander (sixty-seven years old, retired banker), who resides in Onitsha, December 2021.

<sup>9</sup> *Ibid.*

<sup>10</sup> Interview with Isaac Eze (sixty-nine years old, retired civil servant), Ezimo, Enugu State, December 2021.

8–10). Leprosy sufferers were socially dead in the eyes of many Igbo people. Often, families mourned members who were diagnosed with leprosy, the only time they were permitted to do so.<sup>11</sup> After such individuals had been pronounced a ‘leper’, the public considered them officially dead. Their former status and identity in society descended into oblivion as they could not hold the *ofo* (the symbol of authority) or participate in any village council. Thus, for the Igbo, the idea of death was not just the inability to breathe.<sup>12</sup> It was a totality of being unable to advance in life and complete the cycle to become an ancestor. Some family members fed leprosy sufferers in these secluded spaces, sounding a gong before arrival to signal the presence of a human so that the cosmos and its divinities would protect them against the evil spirits in *Énù Álá* or *Álá muo*.<sup>13</sup> In Igboland, evil spirits<sup>14</sup> that wreaked havoc on human life inhabited these forests, which were a part of nature. The Igbo imagined keeping leprosy sufferers, as breakers of moral codes, around their settlement as dangerous. In their thinking, leprosy sufferers attracted harmful spirits among the living, and those spirits would inflict harm on everyone in the family and the community as retribution for not banishing the people with leprosy. The evil forests were also where they exiled wicked and unscrupulous people in society who had denigrated or polluted the land.<sup>15</sup> The confinement of leprosy sufferers in the same area where society dumped the corpses of evil people confirms the imaginary relationship between the two that Igbo people shared with leprosy sufferers in precolonial times.

Apart from its role as the home of the earth goddess, the land was inhabited by the ancestors – because that was where the dead patriarchs were buried – who were among the agents who stabilized the universe. Igbo people imagined life as a continuum, and to complete the cycle of life in its absoluteness, becoming an ancestor was the penultimate step towards reincarnation, the final and ultimate goal (Ikenga-Metuh 1987). The earth beneath was the abode of these ancestors, and any morally repugnant offence was not just against the earth goddess but against the ancestors as well. Ancestors were the dead patriarchs of the family or community who received full burial rites in the land of the living, undertaken by their children. A person not buried with the proper burial rituals and traditional performances and ceremonies was not admissible in the ancestors’ land, even when they were qualified by their death and had transitioned from the physical realm to the spiritual realm.<sup>16</sup>

A disease such as leprosy was imagined as a result of a person’s poor standing with their ancestors. On the other hand, the person could not become an ancestor after his unceremonious transit to the afterlife because the ancestors could not admit someone who had failed to maintain their relationship with the land. Communities that banished leprosy sufferers to evil forests stripped them of becoming ancestors after their demise. Allowing a leprosy sufferer to remain among the land of the living was

<sup>11</sup> *Ibid.*; see also Ubah (1992: 53).

<sup>12</sup> Interview with Isaac Eze (sixty-nine years old, retired civil servant), Ezimo, Enugu State, December 2021.

<sup>13</sup> *Ibid.*

<sup>14</sup> It is hard to explain who becomes an evil spirit in Igbo cosmology, but mischievous individuals who committed atrocious crimes in *Enu Uwa* were construed to become evil after their death. Only those who lived a righteous life became ancestors.

<sup>15</sup> Interview with Romanus Eze (seventy-six years old), Oji River leprosy centre, Enugu State, February 2021.

<sup>16</sup> Interview with Isaac Eze (sixty-nine years old, retired civil servant), Ezimo, Enugu State, December 2021.

thought to upset the universe's balance. In a worldview that strived for balance and harmony in all realms, accommodating leprosy sufferers in the community was thought to invite evil spirits and disharmony into the world of the living, which would cause disasters and misfortune. Keeping in the community people who were considered to have defiled the land could pollute other people on the ground (Ikenga-Metuh 1985: 10). Apart from the presence of a leprosy sufferer being a significant impediment to the progression of life, Igbo people thought that allowing a person afflicted with leprosy in their midst would enrage the gods and would let the evil spirit afflict everyone in the community. They thought the goal was to keep them out of the community for the community's security and protection. Through this mechanism, they maintained balance in the universe.

### **Changing ideas about leprosy in colonial Igboland**

Igbo people's response to modernity was always to accommodate what they perceived was good, but, at the same time, to retain many features of what had existed before colonial rule. As stated above, the colonial period was a decisive moment in the history of Igboland, not only because of the socio-economic and political transformation that swept through the region and many other parts of Nigeria but also because of the ideological tensions it inspired between the colonized and the colonizers. Ubah noted that Igbo tolerance ensured that Christianity received laudable acceptance despite the recent history of Christianity in Igboland, but that did not imply 'intensive Christianization' (Ubah 1988: 71, 80). Dilemmas during colonialism settled at the crossroads where Western ideology and traditional worldviews intersected to create hybridized ideologies. There is no decipherable sharp break from the people's existing ontological beliefs and thoughts. The two remained intertwined, functioning individually and collectively.

Igbo society during the colonial period was complex. The colonial medical service was dominated by missionaries who combined their religiosity and medical expertise to administer healthcare. Unable to fund healthcare projects in many areas of the Empire in the early twentieth century, the British government relied on native authority funding to establish colonial medical services (Muir 1938: 134–42). In the initial period of colonial consolidation, healthcare delivery rested on the shoulders of missionaries who saw it as an opportunity to proselytize while healing the sick (Vaughan 1991: 77–8). Leprosy, a disease well known to the Europeans, presented the most fertile ground for this.

The Judeo-Christian interpretation of leprosy in the early twentieth century in the British Empire did not significantly change the Igbo perception of the disease. Before the discovery of an effective cure for leprosy, there was no difference between missionaries' conceptualization and approach to the disease and how the Igbo had previously perceived leprosy sufferers in their midst. The Bible's instruction in the book of Leviticus to 'expel the leper in the camp' corroborated with Igbo ideas about leprosy and its meanings (Vaughan 1991: 77–8). Consequently, the Igbo people's thoughts, beliefs and cultural traditions relating to the disease remained synonymous with missionary ideas. This overlap in the conceptualization of the 'leper' as someone to ostracize and avoid limited the ideological impact that Western medical understanding of leprosy could have had among the Igbo of south-eastern Nigeria.

These seeming connections and continuity in the worldviews of these divergent groups of people ensured that Igbo ideas about leprosy did not change sharply. People continued to think about leprosy as an aberration. In popular Christian discourse, Africans who suffered from leprosy were ‘damned and saved, ragged and dusty’ (Vaughan 1991: 79). The biblical imagery of the disease suggested that, even though their soul could be saved, the need to separate and resettle them in a colony where they would not have contact with the rest of society remained resolute. In these leprosy centres, missionaries also discovered an opportunity to establish a pristine Christian community, a community ‘expunged from those features of African culture that impeded Christianity’s development’ (*ibid.*). According to Chukwuemeka Nnadi:

Leprosy sufferers were still called unclean, just as the Igbo society had referred to them. In those ‘leper’ colonies initially, the herbs the missionaries provided did little to cure the disease. As a result, there was no evidence to show the message of hope that Christianity preached. However, many would prefer their family members to be sent to these leprosy centres than evil forests. Many would drop them off in these centres in the middle of the night to prevent society from knowing there was a leprosy sufferer in their family.<sup>17</sup>

However, in many parts of Igboland, people always gave the missionaries these ‘evil forests’ in which to establish their churches and other outposts (Ubah 1988: 77). This explains why it was not difficult for the Igbo people to isolate leprosy sufferers in their midst, or send them to these isolation centres, primarily built in ‘evil forests’.<sup>18</sup>

Central to the missionaries’ ideas of leprosy was the perception that societies that segregated sufferers were ‘civilized’ and those that defied this rule were ‘barbaric’ (Vaughan 1991: 81–3). However, in Igboland, leprosy sufferers had always been segregated in precolonial times. Therefore, there was little novelty in the ideological conception of leprosy that the missionaries introduced to this society except for the message of hope, which had yet to materialize in an era before effective treatment. Therefore, Christian missionaries had limited power to change the perception of leprosy in Igboland. While the missionaries thought that being granted land to establish leprosy centres underscored a changing therapeutic landscape, most people perceived this as a continuity.<sup>19</sup> Whereas leprosy sufferers had been sent to the ‘bad bush’ or isolated in secluded huts in the precolonial period, they were quartered in isolation villages or settlements in the colonial period, usually constructed on *ajo ofia* (bad bush or evil forest) land. Irrespective of changes in approach, leprosy continued to operate as an exceptional disease marked by differentiated categories.

The Igbo perception of leprosy sufferers as socially dead was not dissimilar to medieval European practices. For example, the Catholic church arrested the spread of leprosy through a special ritual ceremony that symbolized the live burial of a leprosy sufferer. Michael Mizell-Nelson described the process as follows:

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<sup>17</sup> Interview with Chukwuemeka Nnadi (sixty-three years old, medical doctor), Orba Road, Nsukka, Enugu State, March 2021.

<sup>18</sup> *Ibid.*

<sup>19</sup> Group interview with elderly leprosy sufferers in Oji River, south-eastern Nigeria, July 2022.

Clergymen sometimes held a 'Leper Mass' in a cemetery, next to an open grave in which stood a leper. During the ceremony, the priest threw dirt upon the head of the leper before declaring: 'Be dead to the world, be reborn to God.' Later, the priest read prohibitions explicitly barring lepers from the church and other public buildings and places. A procession then led the leper to a hut outside of the village. (Mizell-Nelson 2003: 304)

The process described above unequivocally decided the fate of leprosy sufferers, who would never again receive a full Catholic Christian burial. Missionaries brought with them many ideas of Christian eschatology while ministering and winning converts in Africa. Hence, as in medieval Europe, leprosy sufferers were considered socially dead in the early missionary settlements. Their only hope was in the promise of heaven after their onerous existence on earth. This seeming convergence between the conceptions of leprosy in these two geographically disparate worldviews and different religions ensured that ideas about the disease remained uncontested in Igboland despite the encroachment of a new religion. As discussed above, the Igbo people saw leprosy sufferers as dead due to their inability to participate in the multiplication of life on earth, among many other reasons. Although there are no records of missionaries performing this medieval ritual of symbolic death with Africans, their ideas and teachings about the disease were compatible.

It was this compatibility, coupled with the Christian idea of salvation after death, that helped ensure that leprosy sufferers converted to Christianity. Mary Agu, a ninety-year-old woman in the Oji River leprosy centre who contracted the disease at an early age, recalled her encounter with the mission:

They [the missionaries] always told us we have a place to go after this life. *Enu Igwe* [heaven] comforted us because we had no place after we died in our society. Even when we lived, there was no place for us. So now I know that my imperfect body will be whole in heaven. So, I do not fear death.<sup>20</sup>

In teaching about the afterlife, the missionaries gradually changed how leprosy sufferers thought about themselves. The notion of life after death served as the most potent conversion tool for leprosy sufferers, who hoped for redemption, knowing that there was no place for them in Igbo cosmology and worldviews. It was this powerful transformational message that triggered a change in some Igbo ideas about leprosy. At least in the minds of leprosy sufferers, they were not eternally damned. Additionally, Igbo people could not stop the church from according leprosy sufferers Christian burial rites even when their minds were not changed.<sup>21</sup>

Christian missionaries imagined those with the disease as 'damned and saved' (Vaughan 1991: 81). Having thought of themselves as people destined to die because they could not participate in the propagation of life, leprosy sufferers found their situation unbearable in precolonial Igboland, particularly because of their inability to participate in the traditional Igbo afterlife. The Christian religion offered the hope of finding meaning and rediscovering themselves for the first time through the story of

<sup>20</sup> Interview with Mary Agu (ninety years old, retired nurse), Oji River leprosy centre, July 2022.

<sup>21</sup> Interview with Isaac Eze (sixty-nine years old, retired civil servant), Ezimo, Enugu State, December 2021.

salvation that Jesus brought. The symbolism of ‘leper’ salvation in the Christian tradition played an essential role in transforming ideas of the disease as eternally damning and redefining the ‘self-identity of the leper’. At the same time, it led to local accommodation of certain practices, such as burial, even though it minimally influenced general Igbo attitudes. For the general public, the responsibility of leprosy sufferers’ salvation was assigned to the Christian God and thus outside the realm of their control.

In Igboland, leprosy sufferers embraced the Christian message of hope faster and quicker than other citizens of the land, just like the Osu had embraced Western civilization, which offered them a new identity. The leprosy colonies were instrumental in that they were established to cater to the spiritual needs of the rejected, reinvent their identity, and help them rediscover meaning in life (Watts 1997: 72). Salvation messages and ideas of heaven where one would not receive judgement based on skin infection marked an essential departure from how the Igbo society imagined leprosy sufferers. However, the new idea of a possible place where leprosy sufferers could end up after their death did not imply an intensive ideological shift in Igbo society, which was mainly accommodating and not transformed. A person previously diagnosed with leprosy could not entirely reintegrate into society. Death was the only thing that could bring the person back to society if their children had the means to perform the required Christian burial rite.<sup>22</sup>

Furthermore, the idea of leprosy as an ‘imperial danger’, which claimed that European failure to arrest the transmission of the disease could result in its re-emergence in the metropole, partly motivated Christian missionaries and colonial administrators who worked hard to prevent contagion with infected populations (Watts 1997: 40). Yet, the lack of a curative treatment for leprosy limited their efforts for a significant duration of the colonial era. Before an effective treatment for leprosy became available, the discovery of therapeutic medication for yaws – a skin disease similar to leprosy – marked a milestone in the social engineering of both leprosy sufferers and wider society. The introduction of this medication swirled to all parts of Igboland. For the first time, members of Igbo society began to think that perhaps leprosy sufferers had a chance in the universal cycle of living (Macdonald 1964: 93). Despite the preaching of hope for leprosy sufferers, the Igbo, like many other African peoples, did not believe in the ability of Western medicine to miraculously heal the unknown diseases in their midst, especially leprosy, which defied human explanation in their cosmos. Stories of how the people deserted the hospital when the colonial medical doctors could not heal them as quickly as they imagined were replete in the medical discourse. However, introducing the novarsenobenzol injection to cure yaws in the shortest time possible significantly boosted the ‘white man’s medicine’ (*ibid.*: 93). The effect of this injection on the entire society was dramatic. With the use of this injection:

The Itu hospital swirl jumped from 4,698 in 1925 to 30,061 in 1928; Uburu’s went from 4,963 in 1924 to 60,401 in 1928. Over a single weekend, Hasting gave over 6,000 injections. On tour, Macdonald was giving a thousand a day and could have given more if his thumb had not given out . . . the magical aura

<sup>22</sup> Group interview with elderly leprosy sufferers in Oji River, south-eastern Nigeria, July 2022.

that came to surround injections [was] suggestive of a breakthrough. And as it turned out, the yaw campaign came at almost the same time as the first significant progress against leprosy. (Johnston 2006: 198)

People regarded this injection as a miracle, and many leprosy sufferers who came to the hospital wanted to be injected. The cure for yaws not only changed people's beliefs on the efficacy of Western medicine but also caused them to reimagine the situations of those with intractable diseases such as leprosy. If they could be cured and their bodies restored, it implied that they could participate meaningfully in the augmentation of life.

However, the successful treatment of yaws in the 1920s only attracted more people to the leprosy centres; it did not impact people's thinking on leprosy. Despite the miracle of curing yaws, the delay in finding a decisive cure for leprosy made Igbo society continue with the idea that leprosy was antithetical to life. During this period, chaulmoogra oil, extracted from the ancient *Hydnocarpus* tree from India, remained ineffective in treating leprosy sufferers until the late 1940s, when dapsone was introduced, and until multi-drug therapy began in the 1950s. As such, even the expectations of those suffering from the disease did not change until the post-World War Two period when the credibility of Western biomedical technology made an unprecedented leap from what was previously obtainable.

With the emergence of an effective medical cure for leprosy in the 1950s, leprosy sufferers gradually began participating in life even while alive, using their talent under Christianity to spread the message of hope and salvation. In the colonies, leprosy sufferers created a world that allowed them to reflect and reinvent themselves. For instance, Ikoli Harcourt-Whyte and his famous Igbo choir left indelible trails in the sands of time, helping to reshape, to a great extent, the place of leprosy in the Igbo worldview. Harcourt-Whyte composed early Christian hymns in the Igbo language and travelled the entire land with his group, entertaining their Christian audience. The mission churches used him and his group as a symbol of hope and as an example of the transformative power of Christianity and colonial medicine. Thus, among the Igbo, Harcourt-Whyte's recovery and transformation in the leprosy colony reshaped some specific ideas and attitudes towards the disease.<sup>23</sup> Although Harcourt-Whyte's hymns gained acceptance among Christian communities, the general engagement with his hymns was a matter of sympathy.<sup>24</sup> The Igbo show of sympathy for the ordeal of leprosy sufferers was evinced in their charitable donations to support sufferers and their basic material needs. However, this gesture was akin to the ways in which the Igbo would feed leprosy sufferers even while they were ostracized in an isolated hut or 'evil forest'. This was because, for the Igbo, the idea that whatever leprosy sufferers touched became theirs reminded them not to abandon sufferers completely. While in the precolonial period the Igbo performed this gesture to prevent leprosy sufferers from contaminating their property and rendering it useless, in the colonial period, it was done through Christian donations to

<sup>23</sup> *Ibid.*

<sup>24</sup> Phone interview with Isiani Alexander (sixty-seven years old, retired banker), who resides in Onitsha, December 2021.



further ensure that leprosy sufferers maintained their circumscribed positions.<sup>25</sup> Moreover, archival evidence shows that many families willingly paid nine shillings annual admission fee – roughly £25 in today's currency – to entrust their relatives to the care of leprosy colonies. Ideas of leprosy therefore continued to function at a crossroads, showing some elements of continuity in form but change in approach.

Similarly, from the 1950s, leprosaria became more effective in dealing with the menace of leprosy in Nigeria due to the availability of a cure. With the improvement in their health conditions, leprosy sufferers cultivated the land within these leprosaria and produced materials for their internal use and sale. They created another community in the colonies, where they participated in the augmentation of life under the Christian rubric of salvation. As occurred in the precolonial period, when leprosy sufferers were sent to the 'evil forests', families became more willing to send the afflicted among them to these leprosaria. For one thing, they preferred to support them in these environments where they could survive and build a community and a family. However, these changes did not correspond to a radical ideological transformation of leprosy as a disease. Many Igbo people preferred that leprosy sufferers stayed in these separate communities, as in the precolonial period, instead of reintegrating them into society. Indeed, under the guidance of missionaries, Christianity introduced leprosy sufferers in Igboland to another lifecycle different from what was obtainable in precolonial Igbo society. However, many people who accepted Christianity in Igboland continued to practise their traditional religion, and, with this syncretic attitude, their understanding of leprosy strongly retained elements of Igbo cosmology.

## Conclusion

The crux of this article has been to situate leprosy in the worldviews of Igbo people from the precolonial period to the colonial period. The perception of leprosy in precolonial Igboland revealed a shocking similarity with later Judeo-Christian ideas that penetrated the region during the colonial era. In the 1950s, the use of dapsone to treat leprosy proved effective, bolstering profound catalysts that impacted the internal perception of leprosy among its sufferers. Once leprosy sufferers began to show signs of recovery from their illness, society accommodated some Western ideas about the disease. Still, it did not lead to total acceptance of sufferers. As Ubah noted, the introduction of the Christian religion and its acceptance by the Igbo during the colonial period did not dissuade them from practising their traditional religion. Because the cure for leprosy went hand in hand with establishing the Christian faith in Igboland, people's ideas about the new faith affected how they thought about the disease.

An old leper interviewed at Oji River leprosy centre in Enugu, Nigeria, noted that, although he is allowed to preside over the meetings of his relatives as the oldest person in the family group, he would not travel back home despite having recovered. He could visit only intermittently during festive seasons. In his view, during the sixty-five-plus years he has lived in the colony, little has changed in how the wider society

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<sup>25</sup> Interview with Chinyere Ugwuoke (seventy-seven years old, recovered leprosy patient), Oji River leprosy centre, Enugu State, 2021.

perceives leprosy, even though they accommodate him in some ways. Moreover, this was why sufferers preferred to stay and earn a living in the leprosy colony rather than integrate back into society.<sup>26</sup> Just like the Igbo would keep their distance from the Osu, they maintained a similar distance from individuals and families confirmed as having a leprosy sufferer. The ideas of leprosy, formed in the precolonial period, have continued to dominate people's minds even though leprosy sufferers have been accommodated in churches and some social functions. In some ways, the colonial idea of segregating leprosy sufferers even reinforced the ideas of the Igbo about the disease, which explains why many leprosy sufferers prefer to die in the leprosaria rather than join the outside world. If there were a revolutionary change in Igboland's imagination of leprosy, chronic ostracization would not remain visible in society today.

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<sup>26</sup> Interview with Romanus Eze (seventy-six years old), Oji River leprosy centre, Enugu State, February 2021.

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**Odinaka Kingsley Eze** is a PhD student in the History, Anthropology, and Science, Technology and Society programme at the Massachusetts Institute of Technology. His research focuses on the history of health, medicine and technology in Nigeria.