

## Storytelling as Psychotherapy for Sickle-Cell Patients: A Study of Helon Habila's *Measuring Time*

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### Abstract

Sickle-cell anaemia is a disease caused by sickle or curved red blood cells which obstruct the smooth flow of blood through the veins in the human body. This blockage in the veins which prevents the red blood cells from getting to other parts of the body usually leads to untimely death of carriers except in rare cases where the patients survive. One of the major symptoms of sickle cell disease is joint pains and statistics has shown that most patients die in their twenties while a few survive in rare cases. In this paper, we shall examine the therapeutic functionality of storytelling in tackling sickle cell anemia disease as chronicled by Helon Habila in his narrative, *Measuring Time*. This is apart from the routine drugs medication and other interventions such as water therapy, talking therapy, love and attachment therapy, among others. It is a common medical practice to prescribe routine drugs to patients especially those suffering from sickle cell anaemia, however, our focus in this study shall be on the use of storytelling and other forms of psychotherapy as alternative for drugs medication or supplementary intervention. Habila's infusion of the health problem of sickle cell anaemia into his narrative is to educate the public about the cause, effects and 'curative' measures for this sickness which has killed patients and caused pains and agony to their people.

**Keywords:** Sickle cell; drugs; curative; storytelling; therapy.

### Introduction

This paper examines the utilization of folktales as therapeutic techniques in promoting human health and wellbeing with a critical study of Helon Habila's *Measuring Time*. Story-telling or folktale falls into the narrative genre of oral literature besides folksongs, proverbs and proverbials, riddles, tongue twisting, myths and legends. In every traditional society, story-telling performs numerous utilitarian functionalities which include; to entertain, educate, develop thinking faculty and help in social control, just to mention a few. This aspect of oral literature has received much attention in recent times and scholars who have explored this subject include Finnegan (1970), Akporobaro (2005), Isidore (2004), Ayo (2010), Akinwumi (2014), Kabaji (2005), Masuku (2005), Babalola and Onanuga (2012), Sibanda (2014), Namulundah (2011), Carmen (2014), Weinger *et al.* (2006), and Kimball (1999).

According to Babalola and Onanuga (2012:162), folktale is a generic term for the various kinds of narrative prose literature found in the oral traditions of the world. In a pre-literate society, the utilitarian functions of folktales are brought to the fore. As Babalola and Onanuga (2012) also observe, before history books, novels, or short stories, and such other literary forms were devised, they (storytellers) had entertained themselves, instructed younger generations, and kept their records with the many-faceted folktale. In affirming the functional roles of folktales in every society, Akinwumi (2014:76) in his work, *Yoruba Folktales, the New Media and Postmodernism*, asserts that this form of oral art is not alien to Africa and it has been performing utilitarian functions of entertainment, education and socialization. Folktales are part of oral literature that is used in conveying messages from the oral performer to the traditional audience usually in a pre-literate society. While commenting on the "Utilitarian Values of Nigerian Folktales" in character development, Kehinde (2010:4) observes that some folktales have the potential of breeding indiscipline and immorality in society. If not carefully illustrated, some folktales may mold

children's characters to become bullies, aggressors and selfish individuals. The issue here is that folktales that contain notorious characters and themes may influence listeners negatively if parental guidance is not provided. Nevertheless, the essence of such tales could be to instill discipline and morals in children and adults as well.

On moral development, Olajide (2010:202) in *Folklore and Culture as Literary Resources for National Emancipation*, identifies some functions of stories or folktales to include sensitization of children about their immediate environment, developing self-confidence and enhancing their instincts for survival. As he also posits, folktales increase children's patriotism and foster their moral development. Another utilitarian function of folktales is that they serve as medium of interaction in African traditional societies. It is a common phenomenon for rural dwellers to gather in the evenings to listen to stories and obtain valuable information by asking philosophical questions. If well and carefully employed, folktales stand as useful tools of socialization and celebration of communal ethos and pantheons (Kehinde, 2010:4). Certain social behaviour, belief systems and cultural practices that characterize the lifestyle of a group of people could be conveyed to audience through story-telling. This is besides heroic exploits of characters which are symbolized in some of the narratives recreated by the oral performers.

In African traditional societies, folktales also serve as means of educating members of the public especially the children. In the opinion of Kehinde (2010:6), folktales contain much educational wisdom; they are didactic tools in child rearing. They teach the virtues of general human experiences, and they are pedagogical tools even in modern societies, especially among family members and at schools. Kehinde's view is affirmed by Gadzekpo and Ribeiro (2010:4) who maintained that folktales can be educational and recreational. They convey cultural traditions and prepare young people for life, as there are many lessons to be learned from the tale. Also worthy of note is the issue of mental development which is another utilitarian function of folktales. Some tales present lessons that subject listeners to critical thinking which help in the development of human psyche. Steven Evans in this regards affirmed Penjore's (2005) view that folktales make children imagine and create their own mental pictures, and this mental exercise leaves deepest impression on them, imprinting folktales' rightful place in their imagination. Though several scholars have carried out research on folktales and their functions in society, this paper will be distinctly different from the above studies since it will focus on the therapeutic effects of folktales in promoting health and well-being of people who are suffering from sickle cell disease as presented in Habila's *Measuring Time*. In order to achieve the objectives of this study, there is the need to x-ray the concept of psychotherapy and state the therapeutic approach that is suitable for this work.

### **Conceptual Clarification of Psychotherapy**

The concept, psychotherapy could be traced to Sigmund Freud who is the father of psychoanalysis. According to Jarvis (2011:2) psychoanalysis is a theory that "focuses on the dynamic relationship between the body, mind and social order. It is a kind of chain where the thoughts of an individual influences his emotional feelings and behavioural patterns." The dysfunctional thoughts in this case are repressed into the memory of the patient and they can manifest when a similar experience reoccur. Psychoanalysis could be used interchangeably with psychotherapy, Freudian psychoanalytic therapy, psychodynamic theory, psychodynamic therapy, psychodynamics, psychoanalytic psychotherapy, dynamic psychology (James and Gilliland, 2002:3). Whichever name one chooses to adopt, the main goal of psychotherapies is to promote human health and social wellbeing. In respect of this, Te Pou (2009:49) asserts that psychotherapy is "a range of techniques used to treat emotional and mental health issues and some diagnosed mental health conditions". Apart from this definition, the author reveals that "psychotherapy is often used to deal with psychological issues that may have built up over a number of years" (3). Though different definitions of psychotherapy abound, the major discourse is how to address psychological issues which could be dysfunctional thoughts, actions or maladaptive behavioural patterns like phobias, anxieties, low self-confidence and social isolation.

Without mincing words, the study of psychotherapy has received several scholarly attention. However, the critical exploration of prose fictions with psychotherapy theory seems not to be fully exploited. Our major objectives in this paper, therefore, are to examine the concept of sickle-cell anaemia and explore the healing effects of story-telling on sickle-cell anaemia patients being metaphorically represented by one of the central characters in the narrative. Our focus will also be on the storyteller as a therapist and patient and this shall be achieved by focusing on narrative therapy (story-telling) as an intervention technique in marital tension/disputes. This narrative psychotherapy shall foreground this work since our focus is on the effects of story-telling on characters and their wellbeing as demonstrated in Helon Habila's *Measuring Time*.

### **Concept of Sickle-Cell Anaemia**

Sickle-cell disease (SCD) is a kind of disease that is transmitted through blood and in most cases the carriers often hardly survive before they attain the age of twenty. It is a medical condition caused by the abnormality of the red blood cell which consequently results in pain and fever among the carriers and patients. According to Behrens and Cymet (2000:17), Sickle cell disease (SCD) is "a group of genetic disorders most commonly seen in people of African descent". He further defines the disease as "any type of sickle cell disorder in which significant morbidity, such as organ failure or vaso-occlusive pain crisis (VPC), results from the sickling of red blood cells". From Behrens and Cymet's assertion, the actual cause of SCD can be traced to the blockage of the blood vessels by red blood cells which are sickled or curved in shape. Because of this abnormality, joint pain is often experienced and this leads to feverish condition of carriers of this disease. On the mode of contracting the disease, the National Institutes of Health (2002:19), establish that currently "there are two major circumstances to show that adults are carriers of SCT. First, where one of the parents of a child has SCT, then there is the possibility that the infant will be a carrier. Secondly, during prenatal care, a certain percentage of pregnant women from racial groups with a high prevalence of the sickle cell gene frequently are tested for the gene". In *Measuring Time*, the former is associated with the case of Mamo whose mother, Tabita who was said to be a carrier of the disease died after she was delivered of the twins in the narrative.

### **Sickle-Cell Disease in *Measuring Time***

Mamo is one of the two protagonists who were born the same day but with each possessing character traits that are sharply contrastive. While LaMamo is presented as energetic and courageous, his twin brother, Mamo is said to be a sickle-cell disease carrier though he has ambition to become great. According to the narrator at the age of "four, Mamo was discovered to have inherited his mother's blood disease, and it was, for the first time, given a name: sickle-cell anaemia" (17). Mamo feels that her mother's sickness which he inherited through childbirth is peculiar in the medical field; hence, it was named for the first time as "sickle-cell anaemia" (17). In order to document this historic discovery, he intends chronicling the sickness by "explaining in detail the chemistry and the biography of the disease" (17). Mamo vividly demonstrates his flair for documentation of his childhood experience of the disease he inherited from his mother. According to the omniscient narrator:

He also painted a picture, mostly in indigo and blue, of his earliest memory of his illness, and he described the occasion as "similar to being born again, and also "like emerging from some cave" where he had been dwelling in silence and darkness (17).

Mamo could be taken as an archetypal character in the narrative because he considers himself as his mother who has been born again. Though he is quite different from his mother in terms of sex, both characters have similar character trait: they are sickle cell carriers. His immortalising of the "earliest memory of his illness" is to remind him of his past (17).

### **Effects of Sickle-Cell Disease on Carriers and Non-Carriers**

Sickle cell disease has psychological effects on not only the carriers but also the relations and friends of the patients who are not carriers. In the novel, the reoccurrence of Mamo's crisis delays

the journey of the young men. In his attempt to join Asabar and LaMamo, “his knees buckled and he fell back onto the hard concrete step” (52) but despite his condition he assures others of his quick recovery; “I feel awful. I am feverish...but I ‘ll be fine” (52). Though he feels sick, he has the conviction that he would recover sooner than later. Besides fever, Vedro and Morrison (2002:15) highlight other signs and symptoms of sickle cell especially the acute syndrome to include “chest pain, trouble breathing, abnormal pain, fast breathing and/ or retractions and congested pneumonia-like cough.” They also attribute the above features to be clinically similar to pneumonia.

Habila in the narrative reveals the effects of the sickle cell disease on patients and intimates us through the omniscient narrator that, “He (Mamo) was cold despite the sheen of sweat on his forehead; his teeth chattered audibly when he spoke. LaMamo went and slowly sat beside him, dropping the canvas bag between his legs” (52-3). Though LaMamo does not feel the physical pains of the sickle cell disease, the agony he undergoes is unimaginable because he must always be at alert to assist him whenever the crisis recurs. In the narrative, Asabar and LaMamo appear disappointed and confused but they had to show some concern, hence, “Asabar looked toward the river, then back to LaMamo and said; what do we do now? We take him inside. It is cold out here” (53). According to the narrator, “they helped Mamo to his feet and into the building; he slumped to the floor and onto his side as soon as they set him down against the wall” (53). Mamo’s sickness is not strange to his relations but in this case it seems to be a setback to these young men who are determined to make meaning out of their existence. It is most unfortunate that the crisis can re-occur suddenly and continues indefinitely until the patient feels relieved of the pains.

### **Storytelling as Therapy among Sickle Cell Anaemia Patients**

Storytelling is a therapeutic technique which greatly influenced the lives of Mamo and Auntie Marina in the novel. Story-telling as discussed earlier in this paper, performs several utilitarian functions including entertainment, education, moral development, social control, and conflict resolution. Besides these functions, Habila through some of his characters have revealed that story-telling helps in promoting health and wellbeing in a society. In the narrative, for instance, Mamo testifies that the stories he heard from his auntie resuscitated him and sustain his life. Though there might be other medications, he strongly believes that his survival was due to the folktales narrated by his auntie.

With Mamo’s testimony, the efficacy of folktales in the treatment of sickle cell disease has been validated because according to him: “I stayed alive from day to day just to hear her next story. She was Scheherazade, I was the king, but she told stories to save my life, not hers-at least that was how I saw it” (18). Stories have great influence on individuals especially those that focus on specific issues, such as “feelings of anger, anxiety, bullying, loss, abuse, etc. They can validate feelings the listeners may be experiencing and provide coping skills” (Killick and Boffey, 2012:13). Narratives that portray central characters that possess health problems that are similar to those being experienced by a listener will definitely re-author their life stories and repose confidence in them. The therapeutic efficacy of Auntie Marina’s stories is reiterated in the novel by the omniscient narrator:

And so Mamo came to think that it was these stories that kept him alive. He imagined the stories insinuating themselves into his veins, flushing out the sickle-shaped, haemoglobin-deficient red cells that clogged the nodes in his veins and caused his joints to swell painfully (19).

Mamo in the above testifies about the cause of sickle-cell anaemia and its effects on patients. According to Vedro and Morrison (2002:3) “the Sickle-Cell Disease (SCD) is the inheritance of the sickle genes that cause red blood cell (RBC) abnormality.” As he further stated, “instead of the normal RBC’s condition of smooth surfaced and flow through small blood vessels, certain conditions such as acidosis, infection, dehydration and low oxygen, RBC containing Sickle

Hemoglobin become rigid, elongated and sickle shaped.” The inability of the red blood cell to supply other parts of the body therefore results in the joint pain and eventually swells which Mamo experiences in the novel. Sickle cell disease as already stated above often cause pains which could be acute or chronic: the former can occur suddenly and lasts for some days. It may erupt frequently while the latter may last for at least 3 months. Through the character of Mamo, Habila presents the efficacy of folktales in the treatment of diseases especially the sickle-cell anaemia. The character describes the stories as the antidotes that opens up his veins, heals his swollen joints and alleviates his psychological problem. Mamo affirms the therapeutic effects of the folktales on him thus: “It was the stories and not the folic acid tablets that he (Mamo) swallowed daily, or the green vegetables and the liver that were staples in his sickler’s diet or the special care not to get bitten by mosquitoes; it was his auntie’s stories slowly working their magic in his veins, keeping him alive” (19).

From the character’s testimony, we are intimated of certain conditions that sustain sickle-cell patients and include eating of balance diet: a meal containing green vegetables and liver. Besides, the patient should be prevented from mosquitoes bite. Words are power intervention technique in fostering the wellbeing of people hence when Mamo felt that all hope is lost, Auntie Marina stands by him and encouraged him saying he would be fine. Even when he shrank away after Dr. Shangle touched his forehead, he felt relieved. Mamo says: “He lifted my eyelids and peered into my eyes, and then patted my cheek. “You will be fine,” he said and rejoined my father by the door” (18). Counseling a patient who is suffering from a critical health condition such as this is very essential in promoting wellbeing. Words of encouragement shall help to modify his dysfunctional thoughts and feelings arising from his troubled mind and instill hope of survival in him.

#### **Love and Attachment as Intervention**

Attachment is a form of therapy that is portrayed in Habila’s *Measuring Time* and it is most noticeable between Mamo and his Auntie Marina; Mamo and LaMamo; and between Mamo and Asabar. The love and care shown to Mamo by these caregivers in the narrative affirms the spirit of communalism that characterised the lifestyle of Africans. According to Dallos (2004:42) “a fundamental proposition of attachment theory is that a young infant has an evolutionary based need to become attached to its parent in order to enhance its chances of survival.” The sickle cell protagonist has been confirmed to have a short lifespan but the care given to him by his maternal auntie helped to prolong his life and instill confidence in him. Though Mamo and his twin brother, LaMamo lost their mother immediately after delivery, Auntie Marina assumes the role of their mother. In the novel, Habila painted Auntie Marina as a guiding angel to Mamo as he faces a serious health challenge in his life. According to Mamo in his documentation:

I was in my father’s room, lost in the huge four-poster bed, and everywhere was shadowy and blue, I felt like a dolphin coming up for air. There was a strange woman seated beside me, smiling and muttering: “You will be fine, Twin. You will be up and about in no time” (17).

The presence of Auntie Marina in Mamo’s life restores confidence, hope and a great relief to him because from his statement above, his health was fast deteriorating before she came and sits beside him. Not only does she smile at him, she also encourages him by “muttering: You will be fine, Twin. You will be up and about in no time” (7). Habila through this narrative shows the therapeutic effects of care and cordial relationship on patients especially those suffering from serious ailments and this affirms the primary goal of Attachment Therapy (AT) which is “to create emotional attachment of a child to an adult caregiver” (Mercer, 2013:3). In line with this, Mamo describes Auntie Marina as somebody that “looked like a sea spirit, riding the waves with me, helping me to stay afloat” (17). In the narrative, Auntie Marina plays the role of a caregiver to Mamo and her attention helps him to overcome his health problem. Though Mamo is facing a chronic health problem because of the nature of the sickness which medical experts believe claim

lives of its carrier at their early stage in life, he also observes that his auntie is battling with her personal problem.

Love and care is essential in the treatment of sickle cell disease as shown by LaMamo and Asabar in the novel. For instance, in order to keep Mamo warm, LaMamo decides to change him to dry clothes and as they do this, Mamo declares his improved healthy condition, "I feel better already" (53). To further show his extent of love for his brother, LaMamo tells Mamo, "I will send for you as soon as I am settled. I promised. Don't fall sick again" (55). Mamo's sickness is the major factor alienating him from others in the novel and this is what he must try to prevent by following all medical instructions and take his prescribed medications. His inability to join others makes him feel dejected, hopeless and incarcerated. This is clearly stated by narrator:

Mamo watched his brother disappear through the grass, and in his mind he felt like a prisoner, imprisoned by the village with its vast hills and valleys and rivers. He felt certain, more than ever before, that he was doomed to die young (55).

Lamang could not conceal his anger at Mamo who attempted to escape to Timbuktu to join the army despite his ill-health. He expresses his annoyance and also lambasting Mamo over his condition:

you are lucky you didn't go far, with your weak and useless body, otherwise we would now be telling a different story. What do you think people would say if you had died out there? They would blame me for not caring for you, for driving you out of my house. Tell me, is there anything that you lack in this house? Is there anything I haven't provided for you and your brother? (57)

Lamang might be providing lots of things for the twins but he seems not to show deep love and care for the children and this is revealed through the authorial voice that reports that; "*We have everything, Mamo felt answering, except your love*" (58). Though they may like to complain to their father, this appears unnecessary since their complaint may fall into deaf ears. Lamang's words at this point in time have made Mamo feel isolated and helpless especially as he had never had many friends before and he has been depending on his brother for companionship. This thought has preoccupied his mind and compounded his situation as "His illness lingered, but this time it wasn't only sickle-cell anaemia-there was also a mental torpo that refused to be shaken off" (59). The thought of the crisis causes Mamo both emotional and psychological discomfort, hence he likens it to a mental torpo which has remained with him permanently.

The case of Mamo is neither that of anger nor shame but how to overcome the apprehension of untimely death which Dr. Shangle claimed to be the case of most people suffering from this dreaded disease. Mamo recounts the hopeless state he found himself during the conversation that took place at the hospital where he was taken to for treatment:

Sickle-cell anaemia." The doctor's words carried me, whispery, conspiratorial, grave. I didn't understand what it meant, but I knew it was me they were talking about. My head ached. I turned to my auntie. She was also looking at the doctor, but she threw me a quick smile and sat down again (18).

Even though the doctor's words made him lose hope about life, Auntie Marina's "quick smile" gives him some beaming signals of hope which rekindle his fighting spirit for survival. With the foregoing scenario, Habila has demonstrated that patients especially those suffering from chronic sickness like the Sickle Cell Anaemia should be shown love to improve their morale.

### **Water Therapy as Intervention for Sickle-Cell Anaemia**

Another therapeutic technique applied in the treatment of Mamo's health challenge is that of water therapy which is administered by Auntie Marina. According to Mamo's testimony, "She

laid a piece of wet cloth on my forehead, cooling the red-singeing fire in my head. She smelled of outdoors, of fresh grass and the earth after rain” (17). The essence of the water therapy is to regulate the body temperature of patients before any other treatment could be administered on them but in Mamo’s case, his ill-health (crisis) causes him severe headache that shoots up his body temperature. Also, Mamo feels feverish while attempting to escape from their village with his twin brother, LaMamo and their cousin, Asabar with the intention of joining the army. The narrator reports that: “They had not been on the steps more than an hour when Mamo started to shiver, his forehead wet, not with water but sweat. He pulled the raincoat tighter around his narrow shoulders and hugged his knees to keep warm” (52).

Mamo suffers joint pain during their journey and after crossing a river, things became worse since “he could not even sit down. His leg and arm joints were on fire, his belly heaved with nausea; he stretched out on the cold step, all the while muttering to the two standing over him, Just give...me...one...minute” (52-3). Mamo’s frequent complaint of joint pains in the narrative affirms Behrens and Cymet’s (2000:21) assertion that “bone is the usual site of vaso-occlusion during pain crisis, and well-known precipitants of VPC include cold weather, relative high hemoglobin concentration, dehydration, infection, exercise, dampness, poor diet, hypoxia, acidosis, emotional stress, and fatigue.” Some of the above precipitants of the Vaso-occlusion pain crisis are exhibited by Mamo which contributes to his untimely death phobia which Dr. Shangle whispered to his father that “There’s no known cure. He (Mamo) will either learn to live with it or...most people suffering from it die before they reach their twenties” (18). The signs and symptoms of VPC as Behrens and Cymet highlighted earlier are also presented in Mamo’s health problem. In the narrative, Mamo’s crisis is pathetic and this is vividly described by the narrator who seems to be aware of all the characters and their traits in the narrative. According to the authorial voice:

Mamo was propped up on one elbow, his face shiny with sweat, trying very hard to mask his pain... An hour later Mamo was flat on his back, grasping through his parched, cracked lips, his head turning from side to side with the pain in his joints. LaMamo removed his shirt and began to fan him, all the time muttering, “We need to get help...” (54)

Mamo’s joint pain described above is horrible and complicated as he experiences dehydration, joint pain and then high temperature which calls for water therapy. This kind of psychotherapy has become necessary so as to calm down the hot-temperature of Mamo. The narrator reports the issue of water therapy that:

LaMamo suddenly stood up and joined him at the window, and without a word he jumped out through the window and headed toward the river... He disappeared behind the tall grass and a while later he was back, his shirt in his hand, soaked and dripping with water. He pressed the shirt to his brother’s searing-hot forehead. After a while Mamo opened his eyes and sat up (54).

In the novel, Mamo’s ambition is almost shattered by the sickness he inherited from his own mother. At a time he sees no reason to keep money since his life is at stake. When he realizes that he could not make it with others, he gives LaMamo all the money in his possession: “Keep all the money, you’ll need it more than me” (55). Mamo felt bitter when he could not join his brother and Asabar to seek their greener pastures as they all planned. According to the narrator, after others have left:

He was now seated on the top step, his face downcast, and the others could see how hard he was trying to hold back his tears. They shook his hand solemnly and started quickly toward the river. He watched them till they disappeared behind the trees, and then he lowered his head and let the tears roll down his cheeks (55).

The disappearance of LaMamo and Asabar to Mamo is symbolic in the narrative. He sees himself as an outcast and incapacitated kinsman who cannot measure up with others owing to his ailment. He was born when his mates were born but his condition seems to be restraining him.

### **Drug Medications as treatment for Sickle Cell Disease**

Sickle-cell crisis re-occurs unexpectedly and lingers for a while as chronicled by Habila in the narrative. According to the omniscient narrator, Mamo fell ill before the commencement of their second semester examinations with certain signs and symptoms thus;

It began innocuously with a slight headache, which he cured with aspirin in the hope that it was nothing but the result of reading late the night before, but the next day it returned, sharper, and again he tried to suppress it with aspirin, determined to endure in silence and not to see a doctor till after his exams, which were only two days away (65).

Besides the slight headache that precedes the sickle-cell crisis, the narrator also reports that when Mamo vomited on the morning of his exams, he went to their school clinic for treatment. But instead of being treated as a patient with a special case as he complained to the old medical doctor, he was given “the routine malaria shots of chloroquine and Piriton” which knocked him down (65). The situation portrays above reveals the extent of corruption that has infiltrated the health institutions in Nigeria where medical doctors, especially old and weak ones, remain in practice even though they are due for retirement. They prove to be all-knowing because of the countless years they have put in practice. According to the narrator, the Piriton the doctor gave him made him collapse in the bathroom and “in the afternoon they found him sprawled out on the floor unconscious, his legs and arms swollen. It was the severest crisis he had had since he was a child” and unfortunately he could not continue with his programme (65).

In the narrative, Mamo reassures LaMamo and Asabar of his full recovery though others suggest that the journey should be aborted to save his life. According to him, “I’ll be fine before the evening bus comes” (53). However, when Mamo fell ill on their way to Timbuktu for the army recruitment exercise, he remembers his drugs medication and as the authorial voice reports this, “He took out some tablets from the sachet in the canvas bag and began to chew on them”. Since Mamo could not follow his twin brother and Asabar to Timbuktu, he decides to further his education to the university and even at the institution, he never forgets to take his drugs since they are what sustain his life. Even during critical time, Mamo does not play with his drugs medication. As the narrator also revealed, “He (Mamo) was at the university for only two years, and in those years Mamo returned home only when he needed money for his medicine” (64). Mamo knew that he has to be taking his drugs constantly to avoid the recurrence of the sickle cell crisis which could claim his life if care is not taken. Though Mamo suffers series of crises as a sickle-cell carrier, he struggles and he becomes a village school teacher at the age of twenty-two. While his twin brother became a rebel soldier fighting to liberate African countries, Mamo as fate would have it became a famous local historian.

### **The Storyteller as a Therapist and Patient**

In the narrative, Habila presents Auntie Marina who functions both as a therapist and patient even though she faces a challenge that is quite different from that of his patient, Mamo. This is revealed by Mamo who reports that: “there was also an air of sadness about her, as if she had known loss and heartbreak” (17). The emotional problem she faces in the narrative is compounded by Mamo’s sickness which the medical doctor reported as dreadful and difficult to overcome. Auntie Marina’s problem on the other hand emanates from her childlessness which leads to her total neglect and deprivation in her matrimonial home. In the novel, Mamo observes the therapeutic effects of stories, this time around not on him, but on the storyteller in the society. He says this about Auntie Marina:

The stories she told us and the neighbourhood children in front of the mud kitchen, far into the moonlit night, she told not only to entertain us, but also to push back the time



when she'd have to go to her lonely bed and stare at the bare wall thus that mocked her nightly with images of her failed life; her abusive husband who had infected her with gonorrhoea, and who, when she couldn't give birth, had married a young woman to whom she had to defer, turning her into a maid in her own house (18).

Habila in this narrative decries the view held by most Africans that women are the only cause of childlessness in every marriage not even if the fault is from the man whose extra-marital affairs could have created such an ugly situation in the first place. Women are usually considered as "baby-making factory" without considering the possible conditions that could prevent them from functioning well in their matrimonial homes. Auntie Marina's childlessness is caused by her husband's infidelity but rather than seeking a medical curative measure, she married another wife and subjects Auntie Marina to a mere labourer both at home and in the farm. Mamo clearly recounts her ordeal to include:

Cleaning-cooking-farming, and there were also the mighty beatings. And when she couldn't take it anymore there was the long tearful trek with only her nanny goat for company and her bag on her head, from the neighbouring village where she lived to her husband's house. My life is linked to hers like it is linked to my brother's, in a straight and uncomplicated line. There are no mysteries, no shadows just light (18).

Childlessness in most African societies is a sensitive issue that requires collaborative efforts of both parties involved but where a party is made to address the challenge alone, this might lead to dysfunctional thoughts and eventually results in maladaptive behaviour. However, Auntie Marina is able to seek solace and comfort in her story-telling which as Mamo made us to understand was meant "to push back the time when she'd have to go to her lonely bed and stare at the bare wall thus that mocked her nightly with images of her failed life (18). Perhaps through the stories she narrates to the children in the evenings, her confidence is restored and she becomes hopeful that life is characterised by several challenges which one can overcome with time. Storytelling, therefore, will serve as purgative and coping techniques, and source of informative experience for audience. Women should not allow their predicaments to weigh them down rather they should alleviate their heart burden and re-author their lives through story-telling or still listening to tales that would restore their hopes and confidence.

### **Conclusion**

The paper has shown different forms of psychotherapy that could be utilized as intervention strategies for sickle cell disease as chronicled by Habila in his narrative, *Measuring Time*. Psychotherapy or talking therapy focuses on promotion of human health in society. It examines the human mind, emotional feelings, actions and behavioural patterns. In the study we discussed the health problem of sickle-cell anaemia and found that the disease is caused by sickle or curved red blood cells which obstruct the smooth flow of blood through the veins in human body. This blockage in the veins which prevents the red blood cells from getting to other parts of the body usually leads to untimely death of carriers except in rare cases where the patients survive like in the case of Mamo. Sickle cell disease mostly affects bones and other delicate tissues causing pain elbow, ankle, chest, back, neck, liver, head, kidney, abdomen, eyes and so on.

Besides the drugs medication, other interventions are also applied and these include the use of water therapy, attachment therapy, and storytelling. Though Mamo has been placed on drugs medications right from childhood, he testifies that what actually sustains him was not the routine drugs he takes but the stories and words of Auntie Marina. We also observed that though the stories Auntie Marina gave to Mamo in the narrative were originally meant to heal him psychologically, through Mamo's report we discovered that the stories also helped in alleviating her pet-up emotions. She is therefore, a storyteller who serves as both a therapist and patient.

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