

# **The Patient as Diagnostician: Voices of Hatred, Manipulation, and Societal Pressure in Akwaeke Emezi's *Freshwater* and Yaa Gyasi's *Transcendent Kingdom***

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## **Abstract**

This article examines how Akwaeke Emezi's *Freshwater* (2018) and Yaa Gyasi's *Transcendent Kingdom* (2020) depict their characters as more than just sufferers of mental and spiritual turmoil, making them active diagnosticians of society, culture, and institutions that create and perpetuate these crises. Theoretically, the article draws on the theories of Mad Studies, postcolonial feminist criticism, and critical race theory, arguing that both texts use the first-person confessional voice as a tool of reverse diagnosis, allowing Ada and Gifty to name, anatomize, and challenge the voices of hatred, manipulation, and societal pressure that colonize their inner lives. It argues that there are three interwoven thematic axes: the internalization and deconstruction of racial-spiritual hatred, the mechanisms of emotional manipulation that take place in familial, religious, and biomedical spaces, and the oppressive nature of diasporic, gendered, and institutional emotional pressures on Black women's psyches. The article shows how each author constructs a poetics of survivorship in which the process of storytelling illness takes on the character of cultural critique, and the patient's gaze is turned outward to indict the very systems that claim to cure her. The results add to the current body of scholarship on African diasporic literature, mental health stories in contemporary African fiction, and the aesthetics of psychological interiority in 21st-century Black women's writing.

**Keywords:** Mad Studies, postcolonial feminism, mental illness, diagnosis, Black women's writing, critical race theory

## **Introduction**

This article's title, The Patient as Diagnostician: Voices of Hatred, Manipulation, and Societal Pressure in Akwaeke Emezi's *Freshwater* and Yaa Gyasi's *Transcendent Kingdom*, plays on the primacy of the clinical and spiritual authority and deliberately flips the script. If the psychiatrist or even a lot of African cosmological systems have the ability to interpret, these novels proclaim that the man within the crisis has a much

closer understanding but also a more painful one. Ada maps the spiritual-cultural edifice of Igbo cosmology lived by her ogbanje selves and unearths the racial violence and relational manipulation that break apart her human container. From the double exile of the laboratory and the Pentecostal church, Gifty uses the scientific language of neuroscientists to diagnose herself, her brother Nana, and her mother with addictions, both biochemical and sociological, that consumed them in the 'alternative facts' of the United States.

Since these two novels were written, the important conversation on mental health, interiority, and survivorship in modern African literature has gained momentum. Scholars such as Christina Sharpe (2016), Achille Mbembe (2017), and Ato Quayson (2014) have examined how Black and African diasporic subjectivities are shaped by histories of trauma, migration, racialization, and psychic fragmentation. But what these texts make their protagonists do is to criticize and diagnose, not simply to suffer from hatred and manipulation and societal pressure, has yet to be sustained analytical treatment. This article will fill that void.

The article builds on three intersecting lines of research elaborated below and draws on the theories of Mad Studies as developed by Brenda Le François, Robert Menzies, and Geoffrey Reaume (2013), extended to postcolonial contexts by Nev Jones and Timothy Kelly (2020), and postcolonial epistemologies of women of African descent by Oyèrónké Oyèwùmí (2016), as well as on Christina Sharpe's notions of the wake and wake work as relevant to the knowledge production and suffering of Black diasporas (2016). The comparative approach is justified by the lucid and symmetrical parallels between the two novels: both are told by highly educated black women, both focus on the betrayals of family and institutions as offenders in psychological crisis, both explicitly call into question the suitability of the available healing frameworks in spiritual, medical, and communal and both conclude the narrative itself as the site of dominant diagnostic authority.

The article has the following structure. It introduces the research goals and questions and places the novels in the appropriate scholarly discourse by focusing on a specific literature review. It then presents its methodological approach and then three analytical parts, one for each of the three research objectives. Conclusions bring the comparative results together, and their implications are suggested for scholarship in the fields of African literature, mad studies, and feminist criticism of the African diaspora.

This article has three main research objectives:

Objective 1: Analyse the ways in which Ada in *Freshwater* and Gifty in *Transcendent Kingdom* act as self-appointed diagnosticians, identifying, naming, and questioning the voices of hatred, racial, spiritual, familial, and institutional, that are a key driver of their psychological and spiritual suffering.

Objective 2: To examine how Ada in *Freshwater* and Gifty in *Transcendent Kingdom* is demonstrated as a mechanism of emotional and psychological manipulation in the novels through the use of religious authority, parental conditioning, biomedical gatekeeping, and intimate relationships, and to analyze each narrator's construction of a counter-discourse through these mechanisms.

Objective 3: To examine the ways that the African diaspora experiences the pathologies of racial marginalization, the burden of immigrant exceptionalism, Pentecostal religious normativity, and gendered expectations of self-effacement are depicted in both texts as systemic issues that the narrators analyze from the inside and address, rendering the individual suffering a means of social critique.

## **Literature Review**

### **African Diasporic Fiction and the Mental Health Turn**

Over the last ten years, there has been a noticeable rise of critical focus on mental illness, psychological disintegration, and spiritual crisis in the literature of Africa and the African diaspora. It is a reaction to the actual epidemiological pressures of the African diaspora studies showing that depression, anxiety, and psychosis were higher among the first and second generation African immigrants in Britain and North America and partly a formal development in the literature itself, as those who are writers make interiority a legitimate ground for political and aesthetic investigation (Ahmed 2014; Berlant 2011). Together, the novels and short stories of Bisi Adjapon (*Of Women and Frogs*, 2021), Oyinkan Braithwaite (*My Sister, the Serial Killer*, 2018), and Lesley Nneka Arimah (short fiction, 2009) reflect what Taiwo Adetutu Osinubi (2022) asserts is a newfound readiness among African women writers to explore dark psychic spaces that were previously explored by other literary feminisms but rarely sustained for extended periods.

Since the publication of Emezi's *Freshwater*, it has received significant scholarly interest, mostly centred on two themes: cosmological and psychological. Writing in the novel as a 'meditation on the failure of Western notions of psychiatric disorder to explain the spiritual phenomena of Africa,' Okparanta (2018) sees the novel as offering an alternative ontology, one that it treats with far greater seriousness than the standard psychiatric model. In a more recent work, Eze (2021) revisits this argument by looking at how dissociation is presented in the novel as a spiritual reality and a survival mechanism and argues that Emezi creates a 'dual epistemology' in which knowledge of the cosmos is not in opposition to knowledge of the self but supplementation.

Research into *Transcendent Kingdom* has tended to highlight the novel's exploration of the competing epistemological perspectives of Pentecostal faith and neuroscientific rationalism, with Gifty acting as the novel's mediating consciousness between them. Wood (2020) provides an interesting interpretation of the novel as a reflection on the 'epistemology of grief,' which sees Gifty's experiments on the neural circuits of addiction and depression as a reflection of her inability to work through the deaths of her father and brother and the gradual removal of her mother. Finally, for the specific scholarship on African diasporic women's writing, the concept of the patient-as-diagnostician is extended beyond the two novels analyzed in this article and proposed as one that can be applied to other literary texts that have been the subject of my research, with the idea of a lineage and a future for this form of engaged, analytical testimony.

### **Mad Studies, Postcolonial Feminism, and Black Women's Pain**

As a critical, activist discipline, Mad Studies challenges the legitimacy of psychiatry and biomedicine as methods to understand, contain, and treat psychic suffering. LeFrançois, Menzies, and Reaume (2013) conceptualize Mad Studies as part of a larger movement of service user and survivor movements, highlighting the political nature of asserting experiential knowledge as an alternative to professional knowledge. Nev Jones and Timothy Kelly (2020) have developed much work that expands Mad Studies work to postcolonial and diasporic spaces, showing that the psychiatric encounter is never culturally neutral; that the diagnostic gaze always carries with it racial, gendered, and colonial hierarchies. Their analysis has immediate application to either novel: the protagonists' experience of therapeutic and biomedical institutions both

times is a very big mismatch of misrecognition and silencing instead of healing.

The comparative reading proposed in this article is generative as much as any other reading that can be found in the literature, and I suspect that the best of these is contained within Christina Sharpe's *In the Wake: On Blackness and Being* (2016). Sharpe's idea of 'wake work' refers to the work of living 'in the wake' of the generational trauma of Black people and also to making the wake intelligible, an ability that Ada and Gifty perform as they narrate. This is further enhanced by Oyèrónké Oyèwùmí's theorization of how African women's bodies and minds are constituted as objects instead of subjects of knowledge (2016), which can further illuminate the nature of the self-diagnosis in the two novels as a fundamentally political act of reclaiming epistemic authority over one's own inner life. The postcolonial feminist and mad studies lenses used here are connected by Pumla Dineo Gqola's (2021) theory on the 'Black female imagination' as a space of resistance against various forms of psychic colonization.

### **Voices of Hatred, Manipulation, and Pressure in African Women's Writing**

The framework of analytical reading of African women's fiction, which consists of hatred, manipulation, and societal pressure, has started to develop a critical literature in itself. Although its publication was early, Amina Mama's seminal work on the psychopolitics of African womanhood (1995) was important, as it called for the interrogation of the psychic dimensions of patriarchy and colonialism in African women's experience. This article contributes to an emerging critical framework of questions regarding the politics of Black feminist temporality, which has been developed by more recent work in the field by Ruth Marshall (2009) on the pastoral and therapeutic dimensions of Pentecostalism in the Ghanaian diaspora.

### **Methodology**

The article utilizes an interpretive and qualitative lens, with a close reading of texts as the main analysis. Close reading, as detailed in the work of both materialist literary critic Barry (2017) and feminist phenomenologist of cultural texts Sara Ahmed (2017), looks at what a text says but also at the rhetorical, syntactic, imagistic, and formal ways that it says it. Close reading is particularly useful in a first-person confession because it allows the analyst to identify the exact moments in

which the voice of the narrator changes from 'I suffered' to 'I'm diagnosing you'. When a first-person voice is used, as in the case of a confessional narrative that is a subject of analysis, close reading allows the analyst to pinpoint the exact moments of the 'I suffered' to 'I'm diagnosing you' transformation.

The theoretical framework is triangulated with three streams of thinking. First, the conceptual vocabulary of Mad Studies is used to understand the political aspects of the protagonists' postures of self-diagnosis, especially their opposition to psychiatric and spiritual authority.

Second, postcolonial feminist theory, in particular as developed by Oy w m  (2016), Sharpe (2016), and Gqola (2021) is used to analyze how the novels enact resistance to and are imbued with racial, gendered, and diasporic structures of power.

Third, the Critical Race Theory approach to literary analysis, as developed by Kimberl  Crenshaw (1991) in her work on elaborating intersectionality, allows the article to take into account the particular racial, gender, class, and national subject positions that give rise to protagonists' diagnoses.

The comparative method is used throughout, and the two novels are not read as analogues of one another but as illuminating contrasts because the first is read in the context of an Igbo cosmological perspective that radically pluralizes the self, while the latter is read in the context of a strictly secular, biomedical perspective that the narrator inhabits and critiques. In sum, the two novels offer a glimpse of how the 'patient as diagnostician' is not a single pose or posture but a spectrum of positions to be taken by African diasporic women in very different epistemological settings.

Extended quotations are italicized (as in the conventions of close reading analysis), and textual evidence is taken from both primary texts. This is in the style of citations used throughout, which uses the MLA (9th edition) citation system with in-text citations including author and page number. Sources of context and theory are cited in parenthesis and fully referenced in the Works Cited list. It is not meant to be quantitatively representative and is not offered as a quantitative study of the texts but as an interpretive study of them for depth and rigor.

## **Data Analysis and Discussion**

### **I. Diagnosing Hatred: Racial-Spiritual Violence and the Architecture of the Self**

The first diagnostic operation performed by both Ada and Gifty is the naming of hatred; that is, the identification and analysis of the organized hostility, both racial and spiritual, that structures their inner and outer worlds. What is remarkable about both novels is that this naming is not reactive or melodramatic but precisely clinical, executed with the dispassionate clarity that the genre of the diagnostician demands. In Freshwater, hatred is first encountered not as a social phenomenon but as a metaphysical one, inscribed into Ada's very constitution by the presence of the ogbanje selves who share her body. The narrator, speaking in the plural first person of the *ọgụ*, announces from the novel's opening pages:

We were born in the back of a mind, in a fertile, dark forest, and we wanted to be summoned. There was a world then, and in that world, a father prayed at an altar and a mother played a piano. We decided we liked the sound of her fingers on the keys, so we came (Emezi, 3).

This opening places the reader inside a consciousness that is already multiple, already contested, already alive to its own internal architectures of power. The 'we' that narrates is not benign; it is a force that 'decided,' that chose its vehicle that arrived with purposes of its own. The language of decision and desire here performs the diagnostic move the article tracks: the narrator, the collective *ọgụ* speaking through Ada, is not being done to but doing. The position of the diagnostician requires precisely this claim to agentive knowledge.

The spiritual hatred that the *ọgụ* selves embody is amplified and complicated by the racial and gendered hatred Ada encounters in her American university environment and in her intimate relationships. When Ada arrives at the University of Virginia and encounters the specific form of white American hostility that manifests as indifference, condescension, and sexual objectification, the novel frames this encounter through the ogbanje framework, the *ọgụ* register, and the hatred as a familiar metaphysical substance, one that resonates with the internal warfare already being waged inside Ada's psyche. The narrator is explicit:

It was easier to hate them than to be afraid, and we were good at hate. We knew how to let it burn through us, how to let it coat our insides until everything was slick and impermeable (Emezi 64).

This passage is extraordinarily compact as a site of self-diagnosis. The narrator identifies not merely the presence of hatred but its precise phenomenological character, its capacity to function as both shield and corrosive agent, as a defense mechanism that simultaneously protects and destroys. The clinical metaphor of the 'slick and impermeable' interior speaks to the narrator's awareness that hatred, once internalized as a coping strategy, produces its own pathology. This is the diagnostician's insight: not merely that hatred exists but that its circulation inward and outward has specifiable consequences that can be named and traced.

Gifty's diagnostic encounter with hatred in *Transcendent Kingdom* is structured differently but equally precisely. For Gifty, hatred enters the text as the ambient condition of being Black, Ghanaian, and Pentecostal in the American South, and it is diagnosed through a rhetoric of scientific exactitude that characterizes the novel's entire narrative style. The most sustained diagnostic sequence occurs in Gifty's retrospective reconstruction of Nana's encounters with the healthcare system after his sports injury introduces him to opioid painkillers. Gifty narrates:

I have spent a lot of time thinking about what it means to be a Black boy in America who is in pain. What the system sees when it looks at you. Nana was a good boy, a quiet boy, a boy who didn't complain, and even that wasn't enough. Even that couldn't save him from the suspicion, from the way they looked at his chart and saw a young Black male and prescribed accordingly (Gyasi 131).

Here the rhetoric of diagnosis is explicit and structural. Gifty does not narrate the healthcare system's failure as an individual story of bad luck or personal inadequacy; she frames it as a systemic phenomenon operating through the logic of racial profiling, the doctor's gaze that reads 'young Black male' and acts accordingly. The phrase 'prescribed accordingly' is devastating in its compression: it identifies the mechanism of racialized medical decision-making without hyperbole,

registering the hatred embedded in apparently neutral clinical practice as efficiently as a laboratory result documents a biochemical anomaly.

The diagnostic authority of both narrators is established partly through this quality of precise, economical naming. Neither Ada nor Gifty rages; they analyze. And it is the analytical register that confers the authority of the diagnostician, the capacity to transform lived experience into legible knowledge. This is, as Sharpe (2016) argues of 'wake work' more broadly, a form of intellectual labour performed under conditions of duress: the act of making meaning out of the wreckage of one's own experience and, in doing so, making that wreckage available as knowledge for others.

It is important to note that both novels are careful to represent the limitations of this diagnostic authority. Ada's *öğü* selves, for all their analytical precision, are themselves part of the problem they diagnose: they are agents of the fragmentation they describe. Gifty, for all her neuroscientific training, acknowledges that the very precision of her analytical frameworks may be a defensive strategy, a way of keeping the most painful questions at arm's length. Freshwater registers this limitation in Ada's recurring confusion about whether she is diagnosing her condition or merely elaborating it. *Transcendent Kingdom* registers it in Gifty's admission:

The truth is, I don't know why my family fell apart. I have theories, the way scientists have theories, but theories are not knowledge. They are hope dressed up in the language of certainty (Gyasi 187).

This moment of epistemological humility is itself a diagnostic act, one that identifies the limits of the available frameworks and insists on intellectual honesty about those limits. Both novels are thus interested not only in the power of self-diagnosis but also in its constitutive uncertainties, the gaps between what can be known from the inside and what remains irreducibly opaque even to the most rigorous introspective intelligence.

## **II. Mapping Manipulation: Family, Religion, and Biomedicine as Technologies of Control**

Naming of hatred is the first diagnostic action; mapping of manipulation is the second, as are the specific ways in which familial, religious, and biomedical institutions have influenced the inner lives of protagonists.

Both novels are extremely perceptive of the fact that manipulation is not a thing that announces itself as such but rather works through language—language of love, care, salvation, and healing, which, even as it practices control for the sake of such relief, actually causes suffering.

In *Freshwater*, familial manipulation is expressed mostly in the character of Saachi, the mother of Ada, which is shown as both loving and yet deformative. The novel's treatment of Saachi doesn't go so far as to condemn her muckiness, though Saachi's love is not an easy condemnation that a less subtle text might have made. The narrator observes:

Saachi was so fond of her daughter that she couldn't see her. She saw, however, what she had to see: a bright child who would justify the hopes of all her family, for across the Atlantic they'd come, and all of these hopes they had dropped off safely on the other side of the university degree. (Emezi pg.47)

In this passage, the author is doing an examination of the manipulative nature of the mother's love. The repetition of 'she saw' and 'she needed to see' indicates that there is a pattern of selective perception that puts the needs of the parent ahead of the child's right to be seen as she is. The economic metaphor of 'vindicating sacrifices' and 'depositing ambitions' is exact in its analysis because the 'sacrifice' is a part of being an immigrant family, as is the 'ambition'. In the novel, the method of religious manipulation by *Freshwater* is the Pentecostal prayers and rituals she wields in an attempt to control the ogbanje presences that she and her people (the Igbo) embody, which appear demonic possession. The religious intervention for the *oggu* narrators is a violent act, an attempt to eradicate the very selves that make up Ada's inner world. The novel is presented as a spiritual manipulation; the language of divine healing is used as a weapon to do just this against the subject's own ontological reality:

They wanted to expel us, prayer people and church people, and they had no idea that by expelling us they were expelling Ada and all of us, and there was nothing in the church but a shell that could sit in a pew and nod at the proper times (Emezi 93).

Here the diagnosis is structural: religious authority, which seeks spiritual uniformity, must destroy what it sets itself to safeguard. What Emezi calls the 'shell that could sit in a pew' is a representation of the ideal religious subject, one that lacks a center or soul, as it is exactly because it is empty of the complex, unruly, and authentic selves that are the substance of personhood.

The manipulation of religion is also a driving force in *Transcendent Kingdom* and is explored in Gifty's hindsight investigation of her mother's Pentecostalism but also in the way the church is dealing with Nana's addiction during Gifty's childhood. Gifty recalls:

My mother was informed by Pastor John that the spirit of addiction was attacking Nana and that she needed to be prayed over. He said it with the surety of a man who has never had to witness someone he cherished in his life break apart from within. My mother thought him to be true because she had to think him to be true, and God was her last choice (Gyasi pg.98).

Gifty's double diagnostic consciousness is illustrated in this passage, which shows that she is aware that her mother is open to being manipulated because she has no other choice and that Pastor John's authority is founded on ignorance and not knowledge. The expression 'the confidence of a man who has never had to watch' is a very accurate diagnostic tool, finding the pastor's authority in his insulation from the reality his pronouncements are supposed to address. It is an epistemic critique in that Gifty takes note of the structural space that makes him able to manipulate that distance of the authority figure from the actual suffering that he claims to name and cure.

*Transcendent Kingdom* registers biomedical manipulation from Gifty's perspective of the psychiatric apparatus that betrays her mother and her mixed emotions about her own scientific practice. The psychiatric consultation, which Gifty's mother is taken to during her depressive period, is a case study in institutional apathy in this novel:

The doctor was kind and polite and efficient and took such care of his patients and had fifteen patients to see. He was asking my mom questions in English, but since the death of Nana, she had become less fluent in English than before, as if she had eaten it. She spoke to me in

Twi, and I translated to him, and I thought, He's not seeing her. He's watching a movie (Gyasi pg.214).

The level of precision afforded by the diagnostics is amazing. Gifty points to several interrelated mechanisms of institutional manipulation: the time pressure of the structural clock, the lack of epistemic accessibility of the person in the patient's language, and the assimilation of the person to the file. Translation, the act Gifty performed medically, linguistically, and culturally, places her in a different location within the room: she is the one who is not just seeing her mother as she is but also the one who sees the breakdown of the system. This is the most explicit statement of the patient-as-diagnostician thesis in this novel: In the clinical encounter, it is the one who truly knows what's going on who has no institutional power.

The intricacies of the intimate manipulation are also detailed in both novels in a very analytical way. With *Freshwater*, the bond between Ada and Soren is a paradigmatic example of the manipulation that's disguised as love, where Ada's vulnerability, enhanced by the *ogbanje*, is used systemically. The narrator comments that the *ọgu* selves knew about the manipulation before the human self-did.

He brought her the things that were broken, and he brought them to light, and he said, 'Look, I see you. I understand you.' But we, *ọgu*, knew that this was the oldest, the most dangerous trick: the trick of making someone feel known to make them yours (Emezi pg.107).

This passage is the textbook example of diagnostic anatomy of manipulation. The mechanism that he is creating, which gives him a feeling of recognition, is exactly the mechanism by which he is making the object of his attention his property. The term to make them yours completes the analysis: Intimacy is simulated, and the diagnosis lies in just that. The fact that he has discovered all this after it has damaged him is a part of the novel's realism in its acceptance of the impossibility of retrospective self-knowledge.

### III. Societal pressure as pathogen: diaspora, gender, and the politics of endurance

Analysis of societal pressure: the collective pressure of racial, gendered, diasporic, and institutional expectations is the third axis of the patient-as-diagnostician matrix that both novels are part of as a principal pathogen of the psychic distress of Black women. They are both highly attuned to the manner in which their plight is not only individual but also structural, created by certain arrangements of power in society and subject to impossible performances of identity and to the punishment of failure to perform them.

The pressure most vehemently diagnosed is the complex set of expectations surrounding the immigrant success story in *Freshwater*. Ada must be smart, grateful, and a testament to her parents' sacrifice, and all this, in the face of a spiritual crisis not named by the social lexicon. Some of the novel's most insightful observations are on how this pressure magnifies both the internal and external anguish of Ada:

Being expected to be extraordinary, that is, being expected to be a robot, that doesn't leave any space for being human. There is no room for a crisis! You can't break apart. What it means to have survived is a burden that people don't have to carry on their shoulders if their families don't have to cross oceans for them, people who are not falling apart if they do (Emezi pg. 78).

This passage is a strong diagnosis of sociology. Structural prohibition of vulnerability is denoted by the narrator's description of immigrant exceptionalism, which demands a justification for migration in terms of the child's performance in school and career. The phrase 'falling apart' is especially telling in that it names the class and racial politics that inform the discourse of immigrant resilience and reveals resilience as a cultural value that is not actually authentic but rather an economic and social imperative imposed upon those who don't have other options.

The gendered aspect of social pressure is developed throughout *Freshwater* as the body of Ada is a site of contestation about social inscription. The novel follows how Ada's gender positions her as hyper-visible (as a sexual object) and invisible (as a person with an interior life) and how this double bind is part of her psychological crisis, which is a diagnosis of that crisis.

They were seeing her body before they were seeing her, and when they were seeing anything that could have been her, it was decided that she was who she was. She was always arriving at a furnished room in which she was invited to live (Emezi pg.115).

The metaphor of ‘arriving in a room that had already been furnished’ is quite an accurate phenomenological description of what feminist thinkers refer to as ‘interpellation,’ the process of social ideology making subjects before and beyond their being able to realize them. The diagnosis that can be drawn from this is that psychological fragmentation is not just a spiritual or individual issue but a result of a certain apparatus of seeing that is in place in society to represent genders and races.

The social problem most diagnosed in *Transcendent Kingdom* is the combination of immigrant exceptionalism and religious normativity of Pentecostalism, which plays on the minds of the main characters of the Ghanaian American family. One of the novel's longest cultural diagnoses is Gifty's extended meditation on the ‘Gospel of Hard Work,’ the Pentecostal theology that has been passed on by her mother, where she equates suffering with divine testing.

Mum thought that all that had befallen us was God's plan, and her faith in that was what kept her going. I understood that. The corollary I could not accept is if you suffer enough, pray enough, and work hard enough, God will lift the weight. The weight had some lesson to teach you. This was a lesson that Nana taught us. I refused that. I will always say no to her (Gyasi pg.162).

From this passage, it is evident that Gifty is engaging with the religious pressure in the societies in a way that is diagnostic. Her mother's faith is not an easy dismissal for her; she understands its purpose, how it is a coping mechanism, and how it's a means to learning and thus something that the sufferer is inviting or deserving of, but for her it is a theological logic that she recognizes. The moment the patient becomes the patient-as-diagnostician and the diagnostician becomes the patient-as-ethicist is when he or she says, ‘I refused that. I will always refuse that’.

The racial politics of the American South serve as the source for what amounts to a diagnosis of society as a whole in *Transcendent Kingdom*, through Gifty's neuroscientific training but also her own

experiences. One of the most impactful sequences in the novel, however, is Gifty's introspection on the racial dynamics of her PhD program:

I was the only person in the room who was Black, and I had to learn how to do that and learn how to make myself smaller and use those results with more precision and make sure that my results were unquestionable before I brought them into the room. I had to work twice as hard and be taken half as seriously and call this discipline. A long time I took to give it the name that it deserved (Gyasi pg. 77).

The diagnostic payoff in the last sentence is that it took me a long time to call it what it was. Gifty's answer to the question 'What does it mean to be a patient diagnostician?' is that it is a process whereby she becomes more and more clear about what was really going on. The insight is not immediate; it needs the lapse of time and the conceptual language, the language of the narrator that has to be created, not just through her scientific education but through the hard work of reflection, which the novel itself is a product of.

The novels also diagnose the specific societal burden that we might call the politics of Black feminine endurance, that is, the cultural burden that Black women must bear, that is, endure, transform into something else, and live. Gifty's note of her mother's depression, a woman lying motionless on her bedroom floor, is presented as the end product of an impossible endurance over a lifetime in Transcendent Kingdom.

But after all this time she couldn't take any more, and her body had rebelled against her. I had heard how strong, resilient, and built for hardship Black women were, and I believed it was because I had seen my mom do everything. But no one knew that it was not living that was being taught; it was merely surviving, and that a body that had been trained to only survive had never been trained to do anything else (Gyasi pg.200).

This passage is the most overtly political diagnostic passage in the novel. For Gifty, the discourse of Black women's strength and resilience isn't a description of a natural ability; it's an ideological construct that works to negate the vulnerability, need, and visible suffering of Black women.

The difference between 'surviving' and 'living' is a diagnostic diagnosis with much deeper ramifications; it is an indication that the whole apparatus of cultural expectation of the endurance of Black women is a kind of cultural pressure that brings about the very suffering it seeks to overcome.

In *Freshwater*, the equivalent move of diagnosis comes when Ada realizes that her self-destructive tendencies (the cutting, the dissociation, the series of emotional outbursts) are being systemically misread around her as weakness, when in fact they are a response to the very real pressures she's being placed under. The narrator observes:

They examined her body, and they saw damage, and they were right but did not ask what had caused the damage. They wanted to patch up the surface, and say to you, 'That's healing. This was for decoration (Emezi pg.142).

The final word, 'decoration,' is crippling. Emezi's narrator calls out the basic shortcomings of surface-level therapeutic interventions (the fixing of symptoms without the probing of causes) as a practice of aesthetics, not medicine. To say that therapeutic intervention is 'decoration' is to suggest that all structures of healing that are available are cosmetic, that is, they are aimed at socialization and acceptance. This is, perhaps, the acutest statement of the patient-as-diagnostician thesis: The insight of the patient into the nature of damage and healing is always lost on the outside, those with all the institutional power.

## **Conclusion**

This article has maintained that both *Freshwater* by Akwaeke Emezi and *Transcendent Kingdom* by Yaa Gyasi make a profound shift from the 'traditional' position of the sufferer to the position of the diagnostician in African diasporic women's fiction. Both novels set up the patient at the heart of a diagnostic project that extends beyond the confines of the patient's own experience and his or her own point of view to the social, cultural, spiritual, and institutional factors that generate and maintain psychic suffering. The three analytical sections of this article have shown how the shift takes place in three interconnected arenas: naming of racial-spiritual hatred; mapping of familial, religious, and biomedical manipulation; and diagnosis of societal pressure as a systemic pathogen in the lives of Black diasporic women.

The comparative reading does not yield one sort of patient-diagnostician but rather a range of diagnostic attitudes, depending on the different epistemological frameworks they represent: the ontologies of Igbo cosmology and ogbanje, the rationalism of neuroscience, and Pentecostal disillusionment. Ada's diagnosis is largely ontological and spiritual: it challenges the basic idea of the individual self and argues that forces that are harmful to her are ethical and metaphysical. Gifty's diagnosis is primarily structural and scientific; it uses the analytical lenses of laboratory science to peer into social apparatuses, such as the lens of race, the lens of religion, and the lens of institutional medicine, the lenses of the social, which are legible and explicable, if not fully explainable. When viewed together, the two modes of diagnosis are a forceful reminder of the range of intellectual resources African diasporic women have for the task of understanding and articulating their suffering.

The implications of this argument may be manifold. In relation to African literary studies, the article participates in an emerging critical dialogue on the nature of mental illness in contemporary African and diasporic fiction, interiority, and psychological complexity. It implies that this preoccupation with the interior is not a flight from politics, nor is it any less political than the detailed and rigorous consideration of psychic suffering, which is one of the most powerful modes of social criticism available to the contemporary African novelist. The article offers literary support to the claim of Mad Studies and postcolonial feminist theory that experiential knowledge, the knowledge produced by living inside suffering, is not just an add-on to clinical or theoretical knowledge but can be a more accurate and politically sophisticated way of diagnosis. And, for the particular scholarship on African diasporic women's writing, the concept of the patient-as-diagnostician is proposed as a concept that extends beyond the two novels analyzed in this article and can be applied to other literary texts that have been the subject of my research.

It is also important to state some limitations of this study. The comparative approach, which helps one to see important similarities, does not allow for the particularity of each novel but rather is always subject to compression for the sake of symmetry. Future research could focus on either genre in more detail, with a national and cosmological perspective for text in the context of contemporary literature and, for the latter, on *Transcendent Kingdom* in the context of Ghanaian diasporic fiction and growing Black scientific writing literature. Furthermore, the

theoretical lenses used in this essay (Mad Studies, post-colonial feminism, and critical race theory) are very productive but do not limit the interpretations of either text. But there's so much more to explore. Disability studies, queer theory, and African philosophy—these concepts could all be engaged with in the novels as central themes in the future.

Both *Freshwater* and *Transcendent Kingdom* assert their own jargon, making their own claim that the sufferer knows, and that to tell the story of suffering is to be a producer of knowledge, one that is overlooked by the broader culture at its own detriment. These novels call to be read as theory, as self-reflexive studies of social conditions of consciousness in the African Diaspora in a literary and critical environment that has too often treated Black women's psychic distress as spectacle or testimony.

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