

Representation of Psychoses in Helon Habila's *Measuring Time*

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Abstract

African writers have long depicted the psychotic inductions of humans in their writings. This explains the relationship between literature and psychiatry. This study, therefore, examines the representation of psychoses in Helon Habila's *Measuring Time*, exploring how the novel portrays the psychological effects of colonialism and political violence on individuals and communities. By employing a blend of Freud's psychoanalysis and postcolonial theory, this paper explores how the characters' unconscious thoughts and feelings, shaped by their traumatic experiences, mirror the broader societal consequences of historical trauma. This study reveals how Habila's narrative illustrates the fragility of the human mind, showing that the psychoses experienced by the characters are not merely fictional but representative of real psychological conditions induced by colonial and political oppression. Also, it demonstrates how African writers like Habila contribute to the understanding of the psychological impact of colonialism and political violence, and how literature serves as a reflection and critique of societal issues. The paper contributes to the growing body of research on the connection between literature and mental health, exposing the ways in which literature can inform our understanding of human psychology and the human experience. The paper finally calls for the integration of mental health support and resources into communities affected by war, socioeconomic strains, and emotional betrayals, to address the root causes of mental health conditions and promote healing.

Keywords: Psychoses, Literature and Psychiatry, Medical Humanities, Postcolonial Psychoanalysis, Helon Habila

Introduction

In recent times, literature has demonstrated its multidisciplinary by intersecting with other fields of human endeavour. This shift has led to scholarly explorations of various motifs, including literature and psychiatry. As Remi Raji-Oyelade asserts, 'Literature has always yielded itself to interconnection of disciplines... The Humanities, of which

Literature is a central preoccupation, has always been flexible to disciplinary companionship...’ (22). This interconnectedness is evident in the current global awareness of mental health, making it imperative for literary writers and scholars to address psychological situations in their societies. As Iwabi Abraham Modahunsi notes, ‘literature reflects multifarious strands of human experiences’ (3).

Literary writers often depict psychiatric conditions and suitable therapies, negotiating a meet point between literature and psychiatry. On his Stephen Kekeghe avers that the redemptive vision of the writer and a good literary work is to reflect the sociological, psychological and the rhetorical dimension of reality (10). This reflection of reality aligns with Chinua Achebe’s contention that the role of the writer hinges on the state of health of his/her society. Achebe believes that if the society is ill, the writer has a responsibility to point it out, and if it is healthier, the writer’s job is different (57). This makes it obvious that literature serves as an effective tool for the structuring, restructuring, salvaging and healing of the society. Thus, there is an interface implicit in literature, the mind and medicine, and there is no dichotomy between the writer’s job and the physician’s responsibilities. This is in line with Iwabi Abraham Modahunsi and Emmanuel Omobowale’s position that the writer’s duty, like the physician’s is to save lives (2). Through this lens, Helon Habila’s *Measuring Time* serves as a mirror of society, capturing the psychological and social conditions shaped by colonialism, political violence, and other societal pressures. Literature, therefore, becomes a tool not only for storytelling but for reflecting and critiquing societal realities, as argued by Edward Said who emphasises that literature often unveils the cultural and psychological consequences of imperialism (8).

Psychoses and psychotic disorders are severe mental illnesses characterised by a disconnection from reality and resulting in abnormal thought-actions and perceptions such as depressions, delusions, hallucination and incoherence. The depiction of mental ailment in African literature highlights the social commitment of the modern African writer, reflecting and refracting societal experiences (Kekeghe 1). Ngugi wa Thiong’o’s contribution to this argument is that ‘literature is a powerful medium that not only reflects societal conditions but also actively participates in shaping them (87).’ Therefore, this paper identifies the intersection between literature and psychiatry, as well as explores the value of analysing literary works for insights into the human psyche, particularly in mental health and psychiatric disorders. In pursuit of this argument— the convergence of literature and medicine—

Omobowale asserts that this discipline focuses analysis on three layers: narratives by physician-writers, narratives by patients and narratives by non-physician writers like Habila whose novel, *Measuring Time*, presents a captivating story that portrays the complexities of psychoses.

Central to the exploration of psychoses in Habila's *Measuring Time* is postcolonial psychoanalysis, which contextualises psychopathologies within larger historical, cultural, and sociopolitical contexts of postcolonial societies. This theoretical lens allows for an in-depth understanding of characters' psychological experiences triggered by broader societal conditions, justifying Frantz Fanon's assertion that colonialism leaves deep psychological scars that manifest in various mental disorders (249). This is a kind of reality mirrored in Habila's *Measuring Time*. The psychoanalytical theory, as noted by Peter Barry, uses the techniques of psychoanalysis in the interpretation of literature to portray these societal and psychological dynamics (7). Its aim is to 'cure mental disorder by investigating the interaction of the conscious and the unconscious elements of the mind.' Therefore, *Measuring Time* is not just a fictional story but a reflection of the real psychological and societal conditions in postcolonial African societies.

African Literature, History and Psychiatry: A Synergy

African Literature in synergy with history and psychiatry, offers a rich and multidimensional field of study into human conditions, social dynamics and mental health. This synergy provides a unique lens for exploring the complexities of the African experience, the historical legacies of colonialism and the psychological impact of the prevalent sociopolitical upheavals.

Historically, Africans have faced traumatic experiences such as slavery and colonialism, in the hands of the Europeans, which have negatively affected their mental health. The twentieth century ended colonialism, but cultural and psychological marginalisation persist. However, the rise of postcolonialism has empowered marginalised groups to project and defend themselves. It is on this note that Akachi Ezeigbo avows that African writers, in particular, are unrelenting in their struggles and have used their art to recreate the various experiences, battles, triumphs, inadequacies, and failings of their nations (1).

Modern African literature is crafted out of the principle of resistance and subversion, which challenges colonial portrayals of Africans as passive recipients of power. On this, Kekeghe believes that the bitter experiences of slavery, colonisation and neo-colonialism, which led to

the emergence of modern African literature, must be responsible for the anguished tone of the African writers (47). Also, Achille Mbembe is of the view that African literature engages with the world, portraying the lived experiences and inner lives of its characters as reflective of broader societal dynamics (178). This is obvious as many writers use their works to spread out the tragic socio-political and psychological conditions of their people, often containing catalogues of mental imbalances. This x-rays the relationship between literature and psychiatry, a sub-discipline in the field of literature and medicine. Therefore, the intersection of literature and psychiatry offers a rich framework for investigating the psychological complexities of the African experience and the interplay between historical events and mental health as depicted in literary works.

Furthermore, because African literature connects so much with history, the postcolonial theory provides the framework for the reading of the literatures of formerly colonised societies that developed in response to colonial domination, from the first point of colonial contact to the present. Lucy Vajime and Karen Dogoh believe that in the bid to legitimise colonialism, the colonisers propagate myth of primitive inferiority, claiming that they have come to raise the psyche of the primitive tribes, pacifying them when the need arises (4). However, the 'primitives' alone can counter from their point of view the myth written about them, and it is on this note that Wumi Raji sees postcolonialism as 'a counter discourse seeking to rewrite history from the point of view of the marginalised or the oppressed marshalling situations, characters and dialogues to subvert western prejudices' (231).

It is obvious that the history of a people points to their psychological surroundings. From the works of early African writers, pieces of evidence of psychotic dissonances exist. Examples abound in Chinua Achebe's novels. Achebe's short story, 'The Madman,' portrays psychosis as a social construct using Nwibe and the people of Ogbu. The story also sees individuals as having unknown psychiatric moments embedded in their social behaviours. Similarly, in *Things Fall Apart*, Okonkwo's suicide can be attributed to his psychiatric disproportion which leads him to anxiety, obsessional and manic-depressive states. In *Arrow of God*, Ezeulu is not left out; he undergoes some psychiatric moments pushed by his inability to take logical decisions in the affairs of the land when there is a clash between the colonialists and the people of Umuaro.

Likewise, the interface between literature, history and psychiatry can be seen in the works of the prominent Kenyan writer, Ngugi Wa

Thiong'o. In most of his works, he reveals a deep engagement with the psychological consequences of historical events and the impact of colonialism on the mental health of his characters. He also demonstrates through his works, the trauma and the sociopolitical context that shape the psyche of his characters, which allows for an exploration of the intersection between literature, history and psychiatry. Echoing this, Simon Gikandi posits that 'African writers serve as cultural historians, whose works reflect the collective consciousness of their societies, often revealing the psychological scars left by historical and social traumas' (92).

Finally, the synergy between literature, history and psychiatry in African literature offers a rich framework that investigates the psychological complexities of the African experience and the interplay between historical events and mental health, as well as the diverse portrayal of psychopathology in African societies. While postcolonialism provides an in-depth understanding of the impact of history, atrocities of war, socioeconomic strains and conflict, psychoanalysis aids understanding of characters' mental health problems. As Peter Barry observes, psychoanalysis aims to 'cure mental disorder by investigating the interaction of the conscious and the unconscious elements of the mind' (7). Therefore, this paper examines how the historical realities portrayed in *Measuring Time* contribute to the psychological disturbances experienced by selected characters, with attention to representation of psychosis and its implications for individual and collective experience. The analysis demonstrates how characters are affected mentally, as well as the outcomes and situations surrounding their mental dissonance.

Schizophrenia, Suicidal Ideation, Manic or Bipolar Depression and Attempted Filicide in *Measuring Time*

Habila's *Measuring Time* has placed him as a socially relevant writer, who is committed to the 'mores and experiences' of the Nigerian society, which serves as background to his literary texts. Habila has made himself a voice of vision by consciously or unconsciously reflecting the postcolonial realities of the Nigerian society, thereby verifying Wole Soyinka's opinion about the African writer which says that 'the artist has always functioned in African society as the record of mores and experience of his society and as the voice of vision of his time' (50). According to Iwabi, Habila is a Nigerian literary writer whose art reflects more than what he may have consciously intended them to reflect (58).

Measuring Time is a historical novel that revisits Nigeria's postcolonial experience through the lives of ordinary people whose personal histories are shaped by larger political and historical forces. In the novel, Habila explores colonial legacies, the destructive impact of war—particularly the Nigerian Civil War—political violence, electoral conflicts, socioeconomic hardship, religious tensions, emotional betrayal and the psychological consequences of these experiences. While the novel engages with several social concerns, this study focuses on its representation of psychotic and neurotic conditions and examines how these mental disturbances emerge from the characters' encounters with violence, trauma, displacement and loss. Rather than presenting psychological disorders as isolated medical conditions, Habila situates them within the historical and social realities that shape his characters' lives. The psychological origins of these disorders are therefore examined in relation to the social environment, revealing how history continues to leave lasting impressions on individual consciousness. Through its portrayal of recurring episodes of trauma, anxiety, psychosis and emotional instability, the novel demonstrates that mental illness is not merely a personal experience but also a consequence of historical violence and social disruption.

In this text, Habila probes the psychological lives of his characters in ways that tend themselves to Freudian psychoanalytic reading. The first mental indisposition represented in the novel is that of uncle Haruna, whose psychological condition is closely linked to his experiences of war. *Measuring Time* traces the effects of war on the mental health of the characters. Many characters in the novel exhibit symptoms of extreme depression and psychosis elicited by exposure to war experiences. Uncle Haruna, an ex-soldier, returns home after many years the war had ended, and upon his return to his hometown, he looks so weak, unkempt, and sickly. The narrator describes him in these words:

The man looked wild, his hair was knotty and thick, his beard and mustache joined at the sides of his mouth to form a long circle. His clothes were tattered and looked as if he had been living in them for a long time. His lips, protruding from the hair-fringed O, were badly chapped and they bled when he spoke. At first Mamo couldn't make out what he said. He reached into his pocket to give him a coin, thinking he was a beggar... (37)

With the description of Uncle Haruna above, his first appearance justifies mental disintegration by physical outlook. This portrayal resonates with Freud's assertion that traumatic experiences can lead to severe psychological disturbances, which often manifest in various forms of psychosis. The description suggests that Uncle Haruna has suffered from the psychological consequences of his wartime experiences. After being welcomed, he appears mute because he never speaks to anyone. His overwhelming psychic wound leaves him in a silent mood. Unlike the one-legged Toma, whose response to the trauma is loquacity by recounting same stories of the war everywhere he goes. Therefore, in this novel, Habila foregrounds the despairing effects of war experiences on the psyche of the ex-soldiers, particularly on a minor character, Uncle Haruna, who manifests symptoms of schizophrenia at the beginning of the novel.

Furthermore, the omniscient narrator reveals that Uncle Haruna's psychosomatic breakdown is triggered by war. He becomes so emotionally downcast after losing his friend, Chris (his love object). This is revealed by the questions from Mamo about the Biafran war. Here, Haruna gives short, open and even fragmented answers that lay bare his anarchic thoughts. This is definitely attributed to his social isolation, thought broadcast and nightly monologues, which can be interpreted as him trying to recollect repressed memories from his estranged self. The narrator utters this: 'Sometimes, mostly at night, bits of memory would come back to him, then all nights, he'd pace up and down in his room, talking loudly as if there were another person in the room with him and finally there would be silence' (45).

Consequently, Uncle Haruna's loneliness and self-alienation from the people around him, steers him into manifesting manic-depressive symptoms. The nightly recollection of traumatic memories inflicts varying degrees of psychological pain on his mindscape. The Doctor observes him and confirms him as one who is '...losing his mind. After such recollections he hardly ate the next morning, he'd sit and stare into space, not smiling as usual, and gradually everyone got used to his sporadic moodiness and learned to ignore it' (45). Although Uncle Haruna's condition had not impaired his ability to perform familiar routine tasks, he could still shell the peanuts neatly. His mental state degenerates into him committing suicide six months later, which is another form of mental frailty. Prior to his suicide, the narrator exposes the readers to his constant moodiness, loss of appetite, isolation, thought

disorder, space staring, which are symptoms of a schizoid personality. According to the narrator:

...Haruna's life droned on and on, shelling peanuts and weaving rope and staring into space, till he committed suicide six months later. There was nothing interesting or spectacular about the occasion he woke up, he ate, he made a rope, he ate, he slept, then early the next morning Auntie Marina found him hanging from the flame tree in the backyard. She cut him down and put him on his bed face up, as if he were merely sleeping, with the sheet up to his chin, before going to call Lamang (46).

Through Uncle Haruna's mental degeneration, the story foregrounds the dangerous relationship that exists between war and psychosis, showing how prolonged exposure to violence can result to severe mental ailment. This reveals that insanity and war are affiliated. Therefore, the collapse of the ego under overwhelming psychological conflict may lead a person to contemplate suicide or even the taking of another person's life. In the text, Samuel Paul, LaMamo's friend, joins the rebels to avenge the death of his family and it expands the bestiality in him (196). Also, it can be interpreted that LaMamo's horrible and rugged look when he loses an eye in an ambush at Monrovia highlights the rage that characterises his inner-life. These things point to the mental disposition of the characters.

Similarly, Uncle Iliya experiences his own mental disease, after being a veteran of World War II for the British side. The narrator's use of flashback exposes Uncle Iliya as one who is burdened of moderate psychological damage of war and racism on the mental state of an individual. It is revealed that in one of the war engagements, Uncle Iliya and his black colleagues face the embarrassing stings of racism at the bath scenes when Indians came to see if they had tails (112). In addition, the lack of care for wounded black soldiers even his dear friend, Wilson, an Ivorian, by the British Army, which led to their deaths further emphasises the ferocity of the devastation of such traumatic events. After his return, he engages in reading, and he retires from government work and opens a school that preoccupied his mindscape. As a result, Uncle Iliya begins to manifest signs of depression and cognitive symptoms; however, his psychiatric symptoms are not in any way compared to that of his brother, Haruna.

Examining LaMamo's mental disposition, especially when he follows his cousin to Chad to join the rebel army, at his return, he begins to manifest some form of irrationality as a soldier. The superficial urge to be a hero with the desire for quick fame, makes him leave Keti to become a soldier. After ten years of fighting as a rebel soldier and mercenary, he begins to question life and the real purpose of fighting and he decides to return to his homeland, Keti. His new life makes him unable to cope with excruciating pain. Unfortunately, at his return, he is not welcomed as a hero as he earlier desired. The night he returns, Mamo notices LaMamo's face and body severely rugged, thin and haggard, a symptom of mental imbalance. With a sleepless first night, he displays a disordered behaviour that is seen as characteristic of a restless soldier, one who had seen too many deaths, and no longer has value for human life, not even his own life. LaMamo displays an irrational behaviour synonymous to psychosis; he consciously violates the rule of law and stubbornly incites the people of the community into a violent protest against the Mai and the crooked Waziri at the palace despite the warning from his twin brother. In a mass shooting exercise, while trying to counter the village rioters, LaMamo is killed (296). This shows that apart from hypomanic mood and behaviour, LaMamo exhibits the unfulfilled desire of heroism and elicit death instincts in him with the aim of 'saving' the people of Keti. Thus, he dies due to his inability to cope with disillusion and the collapse of his heroic aspirations.

More so, Auntie Marina depicts another prominent case of psychosis. Her mental disintegration can be traced to social pointers such as her failed marriage, her high religiosity and loss of her brother, Haruna, to suicide due to disintegration from war experiences. In the novel, she is projected as a hardworking and highly religious woman with motherly disposition. Her mental crisis is heightened by the religious clash that manifests in the novel. When the police detain her, she comes into depressive state and despondency, and at her release, she suffers intense reactive depression from her past traumas and later harrowing experiences that break her down. She is later hospitalised for mild stroke. This is a mental infirmity regarded as reactive depression—a depressive state that is precipitated by traumatic and devastating events in a person's life (Mostafa Showraki 755). Auntie Marina's depressive signs are restlessness, increased anxiety, irrational thoughts and visual hallucination as observed by the narrator who states that, 'Mamo had tried to calm her down, saying it was perhaps her imagination, or her ill health. Since she came back from the police cell...she had been sickly,

had suffered a mild stroke, and had spent days in the hospital. And now she was seeing ghosts' (301).

Medically, it is believed that excessive smoking and alcoholism could accentuate psychosis, a form of mental illness, in an individual. Helon Habila in this novel represents this fact which is often witnessed in the society. *Measuring Time* depicts that the intake of hallucinogenic drugs engenders the manifestation of psychotic episodes in people. Like psychosis, alcoholism also takes the mind away from reality. This is evident in the life of Asabar, Uncle Ilya's son, who goes into drinking and smoking of Indian hemp after his return from Chad. Out of frustration, he sees alcohol as the alternative left to relieve his mind of the numerous challenges threatening his mental state. Sadly, he is exposed to his inner burden the more, therefore, his mind gradually drifts into an extreme depressive condition. The hazy and restless mood is engendered by a number of factors— the unfulfilled ambition of becoming a soldier, poor relationship with his father, and libidinal urges for fame. The intensity of these experiences turns Asabar into an estrange of himself. He withdraws from his family and moves into his mud house to relish his solitary, a form of mental dissonance.

Again, Asabar begins to exhibit dysphoric moods such as hostility, violence and over-active dis-inhibited behaviours peculiar of a mentally ill person. These behaviours are triggered by his addiction to drugs and alcohol due to his bestiality, greed and ambition to capture power during the chairmanship election for Lamang. He resorts to the consumption of hard drugs as a way to reinforce himself. However, his plan to rig the party election with some party boys fails; just a bullet wound from police leaves him paralysed. After the incident, he returns from the hospital and begins to exhibit symptoms triggered by the traumatic experience such as obsessional rumination, hostility and loquacity that indicates depressive features. These features are definitely elicited by his excessive consumption of alcohol in his condition; the narrator notes that '...Asabar, who had once been tall and ambitious, but was now confined to his wheelchair and was always drunk before noon' (321).

Another notable case of mental degeneracy in *Measuring Time* is the case of Lamang, the father of Mamo and LaMamo. Lamang begins to manifest bipolar or manic depressive features and neurosis, elicited by his obsession, irrational anxiety and greed to attain political position, and his eventual loss of it. After the traumatic loss of the election and the court case, mood and thought disorders are activated in him. These mental episodes further escalate to more severe conditions such as

manic-depressive psychosis. Lamang manifests bipolar features symptoms such as impulsivity, restlessness, distractibility, disorganisation, depression, delusions, hostility and parasuicide. These signs lead to stroke – a hypertensive condition. In spite of his condition, he continues to show signs of mental disturbance as he contemplates suicide by neglecting to take his medications unless pressed to take it, and attempting to walk on his own without assistance to nowhere (181-182). At the end of the fall, ‘Lamang died in degrees. The doctors had said he would recover, but he didn’t. Mamo knew his father’s continued deterioration was a deliberate act of will. Lamang wanted to die’ (181). Through the interior monologue, Mamo reveals that he knows his father's continued deterioration was a deliberate act of will. Then Lamang's mind is fragmented because of his trauma as depicted in the text. He eventually dies after series of revelation and exposure of secrets and repressed thoughts from his son, Mamo.

In addition to the above cases, *Measuring Time* presents the most prominent case of psychological breakdown portrayed through Zara Dogo, Mamo's lover. Hers is a clear case of paranoid schizophrenia. From the narrative, it is deduced that Zara’s psychic breakdown is sparked by her experience of a loveless life, divorce and emotional betrayal—her mother’s betrayal of her trust leads to separation from her son, Sam, and engenders her psychotic state. Captain George, Zara's ex-husband, losses human feeling and dignity. He beats his wife with a belt when she informs him of divorce. Zara separates from her husband because he physically and emotionally abuses her. Her mother is also projected as one who is insensitive like Lamang, she is so materialistic and would want her daughter to continue enduring the marriage due to the financial gain she gets; she allows George to take away Zara's only son without her consent in her house. Therefore, Zara’s inability to manage her situations and experiences breaks her down mentally. She is eventually confined to her home for psychiatric treatments where she refuses to talk to anyone—family and friends. Using flashback, the narrator reveals:

She made it worse when one day she let George take the baby. I was away at the market; when I came back she told me that my husband had been to the house and had taken the baby. I left the house that night. I moved in with my friend at the state Low Cost Estate.

The next day, when I went to his house, George told me he had sent the boy to with his retired parents in the village. That was six months ago. I haven't seen my baby since then. I couldn't think clearly, so I decided to come to Keti, just to give my mind space to think (106-107).

Her mother's hostility and Mamo's betrayal increased her layers of psychic wounds on her mindscape. This makes her to feel emotionally betrayed from everywhere she expected true love. These fears are either outgrown or repressed. Then at a stage in the narration, she is depicted to be seeking escape from pains in the city where she lives and moved to her hometown, Keti and later to South Africa. After the court proceedings in the city which she clearly losses, she breaks up with Mamo and travels to Durban. This is as result of the devastation of the ruling and she reveals that, '... right now I can't see at all. Sometimes I feel as if I am losing my mind' (191). The acute depression and melancholia experienced by Zara is triggered by the hostility of her ex-husband and also her mother, who causes her trauma as a result of lack of marital and maternal love, with no regret or remorse whatsoever. Her inability to manage her depressive state escalates to paranoid schizophrenia and snowballs to the level of her attempting to kill her own child.

To further x-ray mental dissonance and its effects, Habila uses Zara's mental condition to project a case of attempted filicide, initiated by mind weakness premised on failed marriage. Filicide is a mental sickness in which a parent deliberately kills his/her own child. Such a child that is killed is usually between the ages of one to eighteen days. It is different from 'infanticide', an act in which a child under the age of one is murdered by his/her parent—or neonaticide, the killing by parent(s) of a baby within twenty-four hours it is born (Modahunsi 71). A reader easily recognizes Zara's mental disintegration through her behaviour. She reveals that in her early years, she had fears of different forms: fear of the dark, fear of failure, fear of abandonment and sibling rivalry. She says:

As a kid I was afraid of the dark, of being alone in the dark. But I outgrew that with time. Then in school I feared not being liked by the other girls, but I outgrew that with time also. After school it was the fear of failure—I still fear failure, but for a different reason, a more mature reason. I

fear it for myself. I don't want to fall below my expectations for myself, that'll be so unbearable, only that at times I don't even know what my expectations for myself are...I seem to keep mixing them up with other people's expectations of me. When does one stop growing up and become really grown up? (266)

Finally, Zara's love relationship with Mamo aids in the revelation of her mental derailment. The content of Zara's manuscript foregrounds the imperative of narrative—reading and writing, in the treatment of mental ill health. She actually writes to pour out her filled up emotion. This justifies the psychoanalytic theory propounded by Sigmund Freud. Zara's doctor reads the manuscripts and promptly realises that her 'mind is reaching back into the past, into happier times to escape the present...what ails her is here and now, and she must deal with it on those terms. Otherwise...' (313). The doctor's statement explains that Zara's healing can be facilitated if she continues to pen down her ill situations. This act fits into what is regarded as scriptotherapy—an act of exposing one's maladies in writing for therapeutic purpose, and psychoanalysis—a therapeutic diagnosis of a patient's past through narrative. From the doctor's question to Mamo, Zara's lover, one draws a conclusion of what to tag Zara's medical condition. The doctor asks, 'Tell me, what do you know about mental illness?' (312). In response to this, Mamo replies that it is when his uncle, Haruna, 'committed suicide'. Mamo's response is an affirmation of his ignorance of mental illness and his knowledge, just as many people in the society today are ignorant.

Conclusion

Helon Habila's *Measuring Time* paints pictures of mental health conditions in a society shattered by war and its atrocities, socioeconomic strains, and emotional betrayals. This reveals that the modern African writer is also socially obligated to re-create the experiences that border on health conditions—mental conditions especially, as seen in this paper. The analysis carried out here x-rays the interface between literature and the mind, thereby validating that literature is connected to psychiatry—a sub-discipline of literature and medicine. This shows that literature, particularly in the African context, often serves as a mirror to society, reflecting its complexities and pathologies. As M. Maboukou observes, 'black literature is first of all a literature in combat. The writer throws himself into demands for retribution' (29).

In the text, Helon Habila consciously or unconsciously explores trauma from hostilities, greed and loss, obsession, anxiety, emotional betrayal and religious fanaticism as social indicators and psychogenesis of mental dissonance. Lamang and Asabar become victims of pathological anger and symptoms associated with bipolar disorder. Their cravings for political power heighten their mental dissonance. Uncle Haruna, LaMamo and Uncle Iliya are exposed to post-traumatic stress disorder (PTSD) due to the devastating and traumatic experiences of war. Also, betrayal, hostility and traumatic memories plunge Zara into psychological distress after the unfair treatment she receives from her husband and mother, and her separation from Mamo. By portraying these psychological conditions, Habila highlights the need for further exploration of literature and medicine as a viable discipline within the ambits of medical humanities.

This study demonstrates the importance of recognising the role of the modern African writer in recreating experiences related to health conditions, particularly mental health, to raise awareness and promote empathy. Moreover, this analysis calls for the integration of mental health support and resources into communities affected by war, socioeconomic strains, and emotional betrayals, to address the root causes of mental health conditions and promote healing. As H. Adams reminds us, works of art are strategic naming of the situations, which allow the reader to better understand and gain a sort of control over societal happenings (n.p). By doing so, we can foster a deeper understanding of mental health, its social determinants, and the critical role literature plays in illuminating these complex issues.

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