

# Psychological Response to Negative Paradoxical Metaphors of Terminal Illness in Promise Ogochukwu's *Sorrow's Joy*

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**Abstract:** Creative writers wield literary tropes in exemplifying thoughts in the minds of characters. As literature is given impetus by the thoughts and actions of humans, the utilization of literary tropes in depicting preoccupations in the minds of characters is a reflection of the human mind, which harbours thoughts laden with these tropes, especially metaphors. Hence, textual representations of characters experiencing pain from terminal illnesses often feature paradoxical metaphors (para-metaphors). Existing studies on illnesses/diseases privileged trauma, depraved mental and physical conditions, however, inadequate attention has been given to the effect, which the literary representations of illnesses, through debasing paradoxes and metaphors, have on affected characters. This study, therefore, investigates the impact of para-metaphors on the character, Sefi, who suffers from cancer in Promise Ogochukwu's *Sorrow's Joy*. The primacy of the unconscious and repression, facets of Sigmund Freud's psychoanalytic theory, are used to account for the psychological state of affected characters. The theory bears relevance to the text, which is purposively selected and critically analysed to highlight the destructive influence of para-metaphors related to the underlying disease in the text. As the major character, Sefi, holds on to the paradoxically metaphoric ideas, her cognitive psychological state continues to diminish. She becomes paranoid, schizophrenic; depressed, which are additional derailing weights to the underlying disease she suffers from. As a literary endeavour, meanings are implicit in the para-metaphorical expressions distilled from the selected illness-text; this has implications, both on patients' understanding of their ailments and on the critical reception of the text.

**Keywords:** Literature and Medicine, Paradoxical-metaphors, Cervical Intraepithelial Neoplasm, Terminal Disease, Mental Preoccupations, Paradoxical Metaphors, Cancer, Terminal, Psyche

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## 1. Introduction

Literature, as a field of humanistic study, "is the art form that arises out of the human ability to create language" Simon and Delyse [1]. The ability to create is resident in the human mind, which generates thoughts from experiences, knowledge or otherwise. Thoughts generated can influence the wellbeing of an individual bringing to bear medicine, as a scientific study of prevention and curative measures that sustain and enhance the wellbeing of an individual. Hence, the interface implicit in literature, the mind and medicine. The mind has been referred to as the seat of all emotions, and

emotions are substantiated by the expressions affected individuals make. For instance, the mind is easily affected negatively in the case of an illness, which is a bionic communication that occurs when there is an impairment in the normal communication of cells that make up the body. The nerve system senses the impaired communication and sends information to the brain which then brings the information to the consciousness of the individual. The individual affected, in turn, constructs and reconstructs ideas and beliefs surrounding the illness from the causes and symptoms he or she experiences. The emotions of the individual are laden with these ideas and beliefs and they are

usually objectified via paradoxes and metaphors, which are literary tropes. It is on this note that this essay is set to explore the effect of paradoxical metaphors laden in the expressions of the affected character in Promise Ogochukwu's *Sorrow's Joy*, [2] an illness text from Nigeria. The primacy of the unconscious and repression, aspects of Sigmund Freud's psychoanalytic theory, are used to examine the character's psychological response to the negative, paradoxically metaphoric representations of illness in the text. This research is situated in the interdisciplinary field of Literature and Medicine.

### 1.1. Literature and Medicine: A Synergy

The interdisciplinary field of literature and medicine deals with the non-pharmacological interventions in physicians' understanding of patients' welfare. [3-11]

For Oyeboode [8], the emergence of literature and medicine was against the backdrop of poor physician-patient relationship. Commenting on the sustenance of the field, he states that, 'the argument for including the humanities within undergraduate curricula has in the main been won.' [8]. He also reiterates that in 'the USA, where medicine is studied as a graduate subject, a substantial proportion of students come into medicine after a first degree in the liberal arts.' [8]. In his view, Omobowale opines that literature 'assists in making medicine a more people-oriented and outward looking profession.' [7]. Calman avers that with the humanities and creative arts, more compassionate doctors that regard human valences in alignment with the patient's illness, will emerge. [12].

This essay is distinct in the sense that it explores the influence of creative expressions formed by affected characters in the selected text, in relation to the myth, causes, symptoms; outcome, surrounding the disease that befalls them. The derailing effect of creative expressions is embedded in paradoxically metaphoric statements used by characters. Scholars such as Susan Sontag [13-14], Scott Gilbert [15] attest to this. Gilbert succinctly avers:

*Society, too, develops its own metaphors, and like those of science and religion, they are apt to change and confront one another. ...certain of these metaphors are critical to the perceptions of society and the self-perceptions of individuals within it and that changes in these analogies reflect, and in part, create, changes in society itself. (Furthermore, it will be seen that metaphors, by their ability to channel our perceptions, can be oppressive), and that several of the most important changes in society are being wrought at the level of metaphor. Such upheaval is presently occurring within our most crucial biologically-based metaphors, those concerning society, nature and humanity. [15] (Emphasis mine.)*

This occurs most effectively when the signified in the literary expressions is confused with or misinterpreted as the actual object and the indirect representation or figuration replaces the actual circumstance. So, we would see in the analysis how characters are affected by the misinterpretations of the signified – the illness and the situations surrounding

them.

### 1.2. Metaphor and Paradox

A metaphor is a device used to create and recreate new perceptions. Ferrara, in clarifying an important characteristic of metaphors, states that metaphors are used to counter established facts by ascribing arbitrariness to something concrete or by ascribing concreteness to something arbitrary. [16]. Paradoxically, by countering established truths, metaphors generate a special relationship with truths, hence, approximating truths. Consequently, many metaphors, for a concept, together form a coherent picture. This essay explores the role of metaphors from the backdrop of its features of indeterminacy, and unresolved interpretation.

On the other hand, Quine sees paradox as 'just any conclusion that at first, sounds absurd but that has an argument to sustain it.' [17] Joyce Osland and Ashjorn Osland, define paradox 'as a situation involving the presence of contradictory mutually exclusive elements that operate equally at the same time.' [18]. At first sight, paradoxical statements have a seemingly senseless prerogative but with a second/deep observation, they turn out logical.

### 1.3. The Idea of Paradoxical Metaphor

The term, paradoxical metaphor – (para-metaphor) is used subsequently in this essay. The idea originates from the introspection that metaphors can also be paradoxical, hence the generation of the term, paradoxical metaphors or para-metaphors. These metaphors while giving a concept a name that arbitrarily designates another concept, create a sense of amazement, a distinctive inherent contradiction, and open themselves to polysemously decentred meanings characteristic of paradox. For instance, the statement that life is time, or time is life is an extrinsic metaphor that gives time or life a name (life or time respectively), which does not belong to it. Simply illustrating this, one finds: T=Time and L=Life. Hence, Time=Life

If T=L or L=T, it is paradoxical in the sense that the contradiction lies in the succeeding premise that, if L can be turned off, can T be turned off? Life can be stopped completely, obstructed or paused literally or literally but can Time be stopped completely, obstructed or paused literally?

### 1.4. Terminal Illness

Robert Veatch asserts that an illness becomes terminal when there is a 'reasonable estimation ... made prospectively... that a person will die within a relatively short time.' [19]. The definition above gives rise to a number of questions: Is the affected individual tied to a stipulated life span? How certain is the prognosis and are the medical personnel helpless when it comes to illnesses that are termed terminal? Emily Collis and Katherine Sleeman give a clinical definition from the legal perspective in the UK, stating that an illness is terminal when the disease is progressive and

when death may be expected within six months. [20]. So to say, regardless of any amount of care and treatment, an imminent death will certainly occur which is not a natural death. Therefore, terminal in terminal illness refers to the incurability of the illness and its hyper life limiting effect. The text selected for this investigation thematises cancer as a terminal disease.

The term, cancer, first emerged in the works of Hippocrates (460-370 BC), the father of Medicine. Mandal states that he used the terms, 'carcinomas and carcinoma,' to describe non-ulcer forming and ulcer-forming tumors.' [21]. Celsus (28-50 BC) a Roman Physician, translated the Greek terms, 'carcinomas and carcinoma' to the Latin word cancer which also means crab. The understanding of its cellular involvement is credited to the German philosopher, Rudolf Virchow in the mid nineteenth century when he proposed the cellular theory which relates that all living organisms are made from cells and that cells beget cells, what he called – *omnis cellula e cellula*. Mandal clarifies that, 'Virchow founded the basis for pathologic study of cancers under the microscope.' [21]. Mukherjee notes that Virchow decided that if 'cells arose from cells, then growth could occur in only two ways,' [22] hyperplasia – increase in number of cells and hypertrophy – increase in size of cells. The growth could be normal or pathological. It is pathological when it has to do with the nature, causes, processes, development, and consequences of disease. And that is what this study is particular about. Mukherjee accounts that:

*Cancer was a disease of pathological hyperplasia in which cells acquired an autonomous will to divide. This aberrant, uncontrolled cell division created masses of tissue (tumors) that invaded organs and destroyed normal tissues. These tumors could also spread from one site to another, causing outcroppings of the disease – called metastases – in distant sites, such as the bones, the brain, or the lungs.* [22].

Well known areas where cancer has ravaged the human body are the digestive system, the genitalia, the skin and the breasts, [23]. Marjorie E. Schlotterbeck. Cancer could also come in forms of leukemia – uncontrollable proliferation of the white blood cells or lymphoma – malignant tumor in the lymph nodes. The speed with which cancer cells multiply and invade the cells of the body is such that the cells should be surgically expunged from the cells of the body or killed by radiation.

## 2. Meta-critical Study on Related Literature

Ferrara focuses on the actual and situated uses of metaphors in therapeutic discourse, from a discourse-centred perspective [16]. A chapter, 'Glimmers: Therapeutic Uses of Metaphor', in her book, *Therapeutic Ways with Words*, explores the healing quality of metaphors when they are used and interpreted by the patients and therapists. Uchenna Eze keeping up this view, states: 'through arts people find the

voice to express their often seemingly difficult experiences with disease' [24]. This essay, however, deals with the destructive tendencies of metaphorical statements when they are used to refer to terminal illnesses or the sufferings of the affected characters or patients.

Users of metaphor aim to draw one's attention to diverse ways of perceiving reality. This is achieved as one figures out the unexpected associations the metaphors attract one's mind to. This essay strongly holds that metaphor or the meaning from metaphor just like beauty, is in the eye of the beholder. The meaning is dependent on the one who beholds the metaphor or the interpreter. The use of metaphors remains the focus of this essay. Against the backdrop of Richard and Sheehan's the rhetorical-hermeneutic perspective of how metaphors are used will be employed. [25]. To Richard and Sheehan, hermeneutics emphasize the tie between interpretation and understanding. There is a relationship between the text/speaker, the interpreter and the context in which the rhetoric occurs. By making hermeneutic guesses, the interpreter tries to relate the content of the text or speech with experiences he or she had had, and arrives at an understanding within the context of the discussion. Notably, by identifying metaphors in a text or speech, inventing meaning and creating a narration from the meaning, one takes on a cyclic hermeneutic process where the text/speaker uses a metaphor to create a narrative and the interpreter, via hermeneutic guesses identifies the metaphor, generates meaning and creates another narration from his or her understanding of the text.

Additionally, Ferrara states that a positive feature of metaphor is that it distils and compresses thoughts and feelings and allows for an economical condensation of themes. [16]. For Ferrara, metaphors provide a glimmer of understanding by summing up and generalizing global insights. The metaphoric language is expected to enhance mutual understanding. The indeterminacy of metaphors and the inexhaustibility of implications are highlighted in her admirations. In this, the extent of verisimilitude between the concept X and the signified Y is left to the discussants to decipher. Hence, the major premise is left vague. Ferrara sees this as an advantage. But, this essay, agreeing that this is where interpretation comes in, argues that the interpretations could be misgiving, as metaphorical trappings engraved in sociocultural interpretations surrounding terminal illnesses are disadvantageous and more destructive. Richard and Sheehan complement the standpoint of this essay stating that, 'there is always a risk in describing a process when discussing interpretation, especially when one refuses, as I do, to hazard guesses about what is going on inside the grey matter,' [25]. Since the metaphors are unresolved, in between the statement and the effect, lies a reverberation of tensions as a result of unresolved meaning by the affected character. For instance, if the affected character is told that he or she is cursed or believes it from encountered life experiences, the character negotiates, trying to decipher what he or she did to deserve the sentence to death, why it would be him or her, cursed

when, by whom, where, for what reason and how? These questions are not just dispiriting but are delirious.

Tons of scholars have classified paradox in different ways, this study, however, will utilise Quine's classification. Quine highlights three classes of paradox: veridical paradox, with its conclusion true regardless of the absurdity. [17]. Falsidical paradox which has falsehood in its conclusion. And antinomies which have contradictory conclusions. Lycan avers that Quine's classification relies on 'the current state of one's knowledge and one's ability to figure things out,' hence, one's interpretation. [26]. The focus of this research is hinged on Quine's antinomies because, as he puts it, they 'bring on the crises in thought,' [17] and Lycan ratifies this in his assertion that 'they show the need of drastic revision in our customary way of looking at things.' [26]. As such, because antinomies have contradictory conclusions, the interpretation will be based on one's inferences or impressions.

Perceptions, ideas, beliefs; conceptions which are most times metaphoric or paradoxical or sometimes metaphorically paradoxical or paradoxically metaphoric, have consequences and can alter the behaviour of an entire society. As a persuasive strategy for this essay, Akhinwu, Osunde, Omeje, Efunkoya. and Amole, point out that identified myths and negative perceptions to illnesses or curative measures have to be addressed with adequate counselling to help improve patients' acceptance of proper procedures.' [27]. Gilbert in his essay, *The Metaphorical Structuring of Social Perceptions*, avers that since metaphors cannot be divorced from the individual perceptions of the society, and are able to manipulate an individual's perception, they can be 'oppressive.' [15].

### 3. Theoretical Framework: Psychoanalysis

The study of psychoanalysis began with Sigmund Freud's (1856-1939) quest to understand the human's psyche and aid mentally affected patients. Hence, he explored issues of repression, hysteria, sexuality and dreams. The processes reveal individuals' thoughts, dreams and fantasies. Some of the principles involved are: primacy of the unconscious, dreams and dream symbols, repression, the significance of death, the meaning of sexuality, tripartite psyche, symbols, creativity and summing up.

The primacy of the unconscious, dream symbols and repression, will be used in analysing prejudiced perceptions surrounding the discussed terminal illness, cancer, in the texts. The 'Primacy of the Unconscious' is the notion that 'human beings are motivated by desires, fears, needs and conflicts of which they are unaware – that is the unconscious,' Tyson [28]. The unconscious, to psychoanalysts, is not a passive reservoir of neutral data, it is rather a dynamic entity that engages us at the deepest level of our being. In relation to the unconscious, Eze

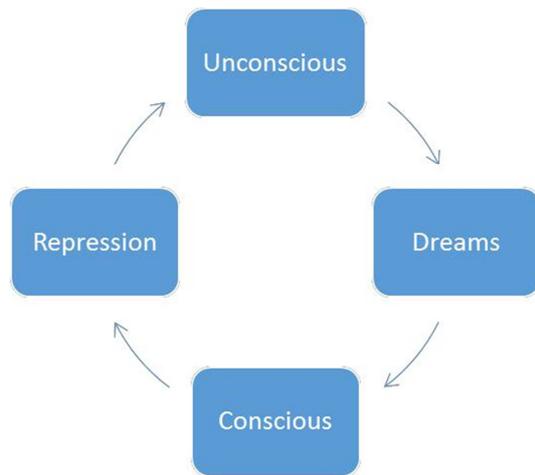
asserts that Freud believes that the human mind is related to the iceberg, being that it is most times concealed in the unconscious. [24]. He also holds that the mind's conscious level is similar to an iceberg's tip since it can be seen. But the unconscious, the unseen part of the iceberg, is mysterious in the sense that it is eclipsed and shadowed in the human's mind. The pre-conscious or subconscious is a third aspect of human's personality that defies awareness but is easily assessable. Hence, the unconscious is a germane aspect of one's actions, dispositions, feelings and expressions though one is most times insensitive to its presence and operations. Dobie [29].

Carl Gustav Jung propounded psychological concepts like dream symbols, synchronicity, archetypal phenomena, the collective unconscious and extroversion and introversion. To him, they are the core of human maturation. Exploring dream symbols, Jung first distinguishes between symbols and signs stating that while signs simply 'denote the object to which they are attached,' symbols are 'familiar in daily life, yet,' they 'possess specific connotations in addition to its conventional and obvious meaning.' [30]. Thus, symbols are inherent in the language of man and they have meanings beyond their conspicuous referents. Jung acknowledges the fact that dreams are part of the unconscious and are seen as 'points of departure for a process of free association.' [30]. But then, he differs from Freud at this point stating that 'free association' leads one outside the text of the dream but dreams are symbolic and they deliver specific information from the unconscious to the conscious.

So for Jung, free association takes one away from the actual message the dream conveys. It is on this note that he vehemently states,

*...when we want to investigate man's faculty to produce symbols, dreams prove to be the most basic and accessible material for this purpose. The two fundamental points in dealing with dreams are these: First, the dream should be treated as a fact, about which one must make no previous assumption except that it somehow makes sense; and second, the dream is a specific expression of the unconscious. [30].*

Hence, dreams communicate indirectly though they represent concrete aspects of our everyday life. On the aspect of repression, Brown, N. notes that to understand Freud's thought, one must understand repression. He avers that in Freud's words, 'the whole edifice of psychoanalysis is based upon the theory of repression,' [31]. Repression occurs when one rejects or opposes an idea that belongs to him or her. What is repressed is pushed away and most of the time is forced out of consciousness. The individual does not appreciate or acknowledge the reality of his human existence. These repressed ideas according to Freud are relayed in the individual's dreams and symptoms of neurosis.



(Eyisi Jr., J. 2018:39).

**Figure 1.** Cyclic relationship between the conscious and the unconscious.

Figure 1 Eyisi Jr., J. [32], serves to expatiate the cyclic relationship between the conscious and the unconscious. The conscious is eclipsed and made unconscious by repression and the unconscious is brought back to consciousness by dream materials. This is because as Jung notes, dream symbols 'are for the most part manifestations of a psyche that is beyond the control of the conscious mind,' [30]. Brown states that repression arises as a result of the conflict between the pleasure principle and the reality principle. [31]. The pleasure principle refers to man's quest for tranquillity and joy and the reality principle denies man of this quest. As such, the principles conflict, and this conflict results to repression.

These psychological concepts above are relevant in analysing characters' inward states. One is let into the suppressed unconscious of victims of psychological crisis and in some instances, these revealed experiences form the core of experiences represented in creative writing.

#### 4. Textual Analysis and Discussion

A picture held us captive and we could not get outside it, for it lay in our language and language seemed to repeat it to us inexorably – Wittgenstein, (Philosophical Investigations). [33].

Wittgenstein's idea in the ambit of this essay succinctly states that, characters are enslaved by the images of some para-metaphors in their minds. Promise Ogochukwu's *Sorrow's Joy: a passage through cancer*, [2], is a narrative based on a true story. It evinces the psychological and emotional journey of Sefi Nodi, the central character, who suffers from cancer of the cervix.

First, there is the presupposition - the images of preoccupations going on in the mind of the characters. As Sefi points out in *Sorrow's Joy*, characters search within themselves, constructing and reconstructing ideas, around the illness they suffer from. For her, she keeps conversations going on within her, more often wondering why she is a victim of the illness that invades her. She states:

*I keep trying to reach within me, seeking the company of*

*an old friend I do not recognise. It is in here I must weave the looms of thoughts that just might carry me through the turbulent sea I see ahead. (SJ, 4).*

These images in 'looms of thoughts' are brought to the fore by language. In this case, the language which is para-metaphoric, is destructive because it weighs down the mind of the characters ruthlessly (inexorably). These silhouettes of para-metaphorical perceptions affect the psychology of affected characters. The effects of the para-metaphoric constructions and reconstructions, surrounding the experiences of the characters with the illness, cancer are discussed below in subheadings, against the backdrop of the psychoanalytic theory.

##### 4.1. Guilt Complex and Paranoia

Sefi in *Sorrow's Joy* (SJ) experiences a grand level of guilt complex as a result of the constructions and reconstructions going on in her mind concerning the illness she suffers from. Prior to the illness, her superego had worked against the id to repress socially unacceptable desires into the unconscious. At the period of her illness, her unconscious guilt becomes overwhelming, making her suffer from a serious guilt complex. Sefi holds on to the belief that her mother's illness was as a result of the sins she has committed. She seems to believe, and she confirms that her mother had multiple partners, transported cocaine through her cervix and sold semen for dubious purposes. And so she wonders what wrong she has committed since she did not engage in the vices her mother was found guilty of. This reflects in the weavings of her thoughts:

*I want to see the man I love... My heart and body belong to this one man. Only him. Well, he is not the only man that has ever made love to me. One silly fellow did before him. But after him, there has been no other. And could this odenosquamous crap move into my cervix for the idiocy of my adolescent years? It was only once, a singular error of naivety. Was that once, enough to cause these mean cells to keep multiplying in the very place my womanhood pulsates? (SJ, 36).*

Sefi, here, refers to Kadiri, her neighbour, at the time they were teenagers. The incident occurred when she was twelve years old. This time she is thirty-six and this incidence she had locked up in her memory resurfaced not as a result of the illness she experiences, but due to the para-metaphoric perception of the illness she suffers from. She equates cancer to punishment. In her opinion, the cancer of the cervix comes as a punishment for those who misuse their cervix. Her mother serves as an example for her. Auntie Bena, her paternal aunt, confirms that, 'it is not a disease that comes on its own', (SJ, 237) and so she believes that since she did not commit any of the societal wrongs her mother committed, she must have done other wrongs. That is why she dug up that incident. When she hears Kadiri's wife also suffers from cancer, she wonders, 'What, this cancer was it in the spermatozoa lodged in his loins which he distributed at random?' (SJ, 61)

This guilt complex which she undergoes also causes another eruption from her unconscious, an incidence she has locked up in her mind for over twenty-four years begins to haunt her. She affirms,

*I locked up that incidence in my heart. Occasionally, I would recall it and shudder at all the things I could not explain. My life and that of others I do not know, remaining a puzzle. ...I am surprised that this silly experience locked away pops up from its hiding without any prompting, refusing to remain in the recess of my mind, (SJ, 178).*

The title of this paper was called from Sefi's statement above. This is because it suitably befits the effect of Para-metaphors on the affected characters. At the time, Sefi comes late to school, and on a particular day, her teacher flogs her. This makes Andrew Jnr. Emodi, one of the senior pupils, to offer to help her by waiting at a spot for her to join him in the car that brings him to school. One fateful day, Andrew sends the driver away and strips for her, but she lashes him with words and leaves his car. And in the same vein, he returns her insult with curses, '... may you die of the worst kind of disease, AIDS, no, cancer,' and he repeats to passers-by watching, 'she will certainly die of a terminal disease ... AIDS can kill anybody, cancer too, but there is cancer for women. That's what she'll have. Their claws clawing her till she dies!' (SJ, 173-174). Moreover, though she tries to fight it off, it keeps resurfacing voluntarily. And when she succeeds without letting her husband know the full details, it is with her husband assuring her of not being superstitious. She resolves to still bury it in her unconscious, to not give it life, to 'keep it down, crush it even,' (SJ, 179), because it embarrasses her. However, Sefi's statement, 'the scary thing was that everything followed that sequence,' (SJ, 175) is weighty. Although it can be argued that she means everything her head teacher said regarding punishing Andrew, the word, 'everything,' without any specificity, gives room for series of interpretations. And if 'everything followed that sequence,' then it means that suffering from cancer is also part of the fulfilment of that sequence. The statement thus, reveals her unconscious belief that she is cursed, that the cancer she suffers from is as a result of a curse.

She also feels that if these things are not working against her then, her seemingly cruel words to Rhonda, her father's mistress, is working against her. Rhonda picks her drunken and broken father up from the streets of England, saves him, washes him, gives him a roof over his head and feeds him. And Sefi's father thinks serving Rhonda in any capacity for the rest of his life and beyond is not even enough to appreciate Rhonda. So, Sefi's father does the dishes, makes Rhonda happy sexually, and when he becomes weak on the verge of death, he lets his son, Ayo continue from where he stopped. When Sefi visits her sick father in Rhonda's apartment, she is disgusted at the sight – her sick father in a wheel chair, all bones, Ayo her brother, busy satisfying Rhonda sexually, all under her father's nose. She flares up and lets her mouth loose. When she became ill, she began to think that her words were so despicable, and that she is

paying for them with the pain she experiences from the illness. She states,

*But I have said despicable things, things that sounded quite ruthless when I reviewed them, for which I did not offer any apology, especially to Rhonda when I finally met her. ... When I do tell it, I urge anyone who hears it not to judge me too harshly for I have already paid the price. And if I do get a further penalty, a life sentence perhaps, with anything worse than chemotherapy and radiotherapy, rest assured that a loud throbbing of conscience has long kept me on bended knees, (SJ, 273).*

Thus, Sefi strongly feels she is already being punished. The guilt complex, most times switches to what she calls, 'persecution complex.' (SJ, 338). This is because, she feels sometimes that she is being persecuted, being harassed just because she is pursuing a worthy course. But then, she feels the complex does not hold water, not only because she thinks she might not have any worthy cause to fulfil but more so because, she sees herself far away from attaining sainthood since she seems to herself to be worse in character than her father, mother, brother and Rhonda.

Her belief that she is being punished implies that Dr. Watega who also experienced the cancer of the lungs but now has an all clear result of cancer, was also being punished for some wrong doings. But why are Rhoda, Ayo, Kadiri, and Eddy not punished? They all live their highly sexually active lives with reckless abandon. The fact from the text then, that cancer is a nemesis or a curse is para-metaphoric. This para-metaphoric belief thus, results in Sefi additionally suffering from, paranoia, a psychotic disorder that is characterised by delusions and persecutions.

#### **4.2. Irrational Behaviours and Manic Depression**

In *Sorrow's Joy*, Sefi seems to see cancer as supreme. She notices that metastasis has occurred and as she states though, 'we know that nothing worked with me ... we keep fighting the almighty it, hoping for the best'. (SJ, 380). At that moment to Sefi, cancer becomes the 'almighty it,' exuding complete power, authority and importance. Pondering about her grave and why people who love her will fight with her only up to the doorstep of her grave. She notes,

*Why do I have to be the one that would lie in there, covered in an engraved box, with other people's silly tears trickling down slowly unto the soil which I am fast becoming? This thing growing in me, why did it choose me? I would have thought that having killed my mother, it would spare my mother's only daughter, (SJ, 27).*

While buttressing the idea that cancer is equivalent to death, it is seen that cancer, as Sefi describes, can take or spare life. To Sefi, cancer has the authority to choose who to kill and who not to kill. It has the authority to choose what part of an individual to take or spare. Corroborating this, Sisi Sigi, appears to her daughter, Sefi, in the specialist hospital where Sefi was hospitalized. And in the discussion that ensued between dead mother and the seemingly alive, but dying daughter, Sisi Sigi tells her daughter, that, 'cervical

cancer is one of those aberrations of life which hug anyone they choose'. (SJ, 86). This metaphor is paradoxical in that, if cancer can give and take life and cancer is equivalent to death, can death give life? Hence, the statement, *having killed my mother, it would spare my mother's only daughter*, (SJ, 27), are quite para-metaphoric.

The perception of the supremacy of the illness, and not exactly the illness itself makes affected characters experience an undulating psychological state, ranging from moments of joy to repression, descent into depression, a surge of hope, signs of recovery and a swing back to relapse as the texts indicate. In *Sorrow's Joy*, Sefi's irrational behaviour reflects in the altercations she creates with her husband. She claims she does not know why she does it, but she still goes ahead with it. She feels she is a dying woman and should be given all the care and attention. When her husband leaves for work, she feels he is on his way to meet another woman besides her. Sometimes, Sefi pushes him to anger and instead of fighting her, he walks away. And she would say, 'you are walking out on me, Kosi? That's not how to treat a wife who is a cancer patient!' (SJ, 269). Kosi, Sefi's husband does not want her to dwell in self-pity. He wants to share her pain and he is of the opinion that her attitude matters much more than the illness because, like Dr. Idigo enlightened Sefi, '... I want to say that even though it is weighty, our fear of it is more of a big deal. It is not so much trouble as our attitude to it ... the weight of it all is in your attitude. There is no illness worse than a defeatist approach to it'. (SJ, 159).

At some point, she becomes suicidal. Sefi attempts suicide, moving at a very high speed on the speed lane of a lonely express way she knows nothing about, in Lagos. This is a symptom of manic depression. It is characterised by mood swings: from a high energy state to a very low state. She feels she is possessed as she allows an internal monologue in her mind that urges her if she can to, 'run the car into a ditch then. Go at top speed so there'll be no bones left uncrushed'. (SJ, 311). She maintains that she could, and the thought alerts her, 'have I not asked you to get over this, but you wouldn't listen. So, go, plunge headlong. You are approaching a sea. If you can't drive in, stop and take a dive'. (SJ, 312). However, she begins to come back to herself and the reality of living as she remembers her family. Sefi finally takes action towards averting the suicide attempt when the thought ridicules her,

*Well then they'll (her family) will recognise the real you from the headlines: "Beautiful diva, owner of Spa 29, thought twinges are for others. When a little discomfort came her way, she took a jumping dive, leaving two lovely children and a charming husband behind!"* (SJ, 312 Emphasis mine).

At this point, being thoroughly shaken, with the desire to live overwhelming her, she slows down, leaves the speed lane and then, gets off the lonely express way. It is at this point that she comes in contact with a near fatal accident. She offers to help carry victims to the nearest hospital, and by saving lives, she states that she seems to have found her *sorrow's joy*. Despite the fact that she claims to have found her "*sorrow's joy*", she seems to be more devastated, which makes it rather arguable to state, that it could be "joy's

sorrow". She thus, experiences a strong level of depression. She suddenly begins to grieve more, and soon finds herself in the hospital with a very high blood pressure. One then wonders what the essence of the joy found in sorrow is. Speaking about Sefi picking up and rescuing accident victims by taking them to the hospital, her doctor, Doctor Watega advises,

*I know it will help if you don't get involved with things that will get you so emotionally down you cry and faint and end up in the hospital. I am sure you know what I mean. Mrs. Nodi, when you started this, I commended you especially as it wasn't having such negative effect on you. Now, it is, and I think it is not good for you after all.* (SJ, 354).

Describing these psychological processes, Sefi, the affected character, allows her id to reflect. Her ego and superego have been dissolved and she becomes unconscious of her environment when she acts irrationally. The id which is narcissistic overwhelms the ego and superego that are meant to guide the individual to exhibit actions that are socially acceptable, and to exhibit those actions also at the right time.

### 4.3. Reflections in Dreams and Shadows

Carl Jung would always say, 'let's get back to your dream. What does your dream say?' when he deals professionally with his clients. He made this known in his essay, *The Importance of Dreams* published in a collection of essays entitled, *Man and His Symbols* [30]. This is because he believes that in dealing with psychological issues, dreams are the expressions of the unconscious. They reflect the conflicts going on in the individual's personality and they also function to 'restore our psychological balance by producing dream materials that re-establishes, in a subtle way, the total psychic equilibrium,' [30]. Jung refers to this as the 'complementary (or compensatory)' function of dreams. Dream symbols are more often the materialisations of one's psyche that is outside the limits of the conscious mind. And so, the dreams in *Sorrow's Joy*, that are relevant to this essay, are a reflection of Sefi's psyche. This makes her seem clairvoyant (able to see things that cannot be perceived by the normal senses), but then, the dream materials portray the perceptions Sefi has built up in her mind regarding the illness, cancer, she suffers from.

Accordingly, Sefi in SJ, experiences a number of dreams and interior monologues. She seems to be schizophrenic at the cognitive level. At some point, she seems to be disoriented, she experiences delusion and disorder in her thoughts. These additional psychopathological conditions arise as a result of the beliefs she holds on to regarding the illness that weighs her down. On one occasion while she lies on the floor, half asleep and half awake, she says 'I may have been dreaming'. (SJ, 51). She seems to know someone is at the gate and she begins to see shadows. She narrates,

*I am in that position when I think I heard the gate open to let the car in. the only trouble is that I feel numb and unable to rise to see what is going on. I am aware of*

*someone shutting the gate. I listen for voices outside the house, but I am not fully awake, I am drifting in and out of sleep. But someone surely is at the door. I try to force my eyes open. I feel ridiculous as I feel shadows all around. It is as if they are taking position at different spots in the house. ... Shadows! ... Perhaps when my eyes finally open, they shall have lifted me from the floor and carried me away where sleep shall no longer seduce me and I shall not submit to it in the least, (SJ, 42).*

This dream is in sync with her perception of cancer as a 'guest standing at the door, lurking by the window sill, faceless, nameless, clueless, yet determined to stand in my way. (SJ, 3-4). She has fed herself with the idea that cancer is a guest, an enemy that has come to destroy. This idea laid in her unconscious is brought to the conscious through her dream. She does not expect a visitor but she is sure someone is at the gate. Perhaps, the person at the door represents the unwanted guest cancer. In the morning when she asks Sule, the gateman, he asserts that he was fully awake at night and saw no one at the gate. And then, she begins to feel shadows. Further in the text, Sefi is seen speaking to her dead father and mother. Some of the shadows she sees, she believes to be her father's and mother's and she engages them in a long conversation. The shadows also seem to torment her, 'I leave everything and get into the house. But it seems as if the shadows get under my skin. They walk about inside me and I know I cannot ask Mike and Sule if they are under their skin.' (SJ, 44). It is assumed that the shadows push her to act irrationally because, as she sees them in their numbers pass by the window, twenty-nine of them and still counting with no end in sight, she fights to shut them off. And in the process, she uses her kitchen knife to cut her wrist slightly missing a very important vein. (SJ, 50). She holds long conversations with her dead parents, and she even begins to speak recklessly to people not minding the consequences. (SJ, 158). Lamenting about her situation she recounts, 'I hear voices, I dream bad dreams. A while ago I had to chase my father away (her dead father). How normal really is this? Am I getting psychopathic?' (SJ, 134). Hearing voices and seeing shadows are symptoms of perceptual disorders, which manifest in a schizophrenic psychosis.

The perception of cancer being an enemy and also a punishment is further represented in Sefi's daughter's dream. Kinky is disturbed for she dreams that in their father's absence, her mother is picked up and thrown down by Robo Cop. Robo Cop did not stop there, he walks all over her and crushes her, and there was nothing Kinky and Kelo, her children could do to stop him. That was the first dream. In the second, she sees her mother in the ring with Dick Tiger and it is assumed that her mother also lost because, Kinky did not complete her statement, she represses it because of the dread it entails. These dreams (SJ, 79), portray the war in which Sefi finds herself. Though she asks her children to 'discard the dreams', (SJ, 80), she affirms them stating,

*how would it be if I say to them, "you know, your dream comes quite close to the reality I am having to deal with at the moment. I am actually in a life threatening situation.*

*Yes, I am wrestling with something more lethal than Dracula, Dick Tiger and Mike Tyson put together. And yes, Robo Cop which has come in the form of cancer is about to crush me. Who knows maybe by the time you return home, you will no longer have a mother; (SJ, 81).*

Cancer as Dick Tiger, is arguably a representation of cancer as the enemy. In addition, the affirmation that Robo Cop came in form of cancer, reiterates her perception that cancer is a punishment. Robo Cop, is a character in the 1987 American cyberpunk action film, the character is a robot police officer designed for crime prevention. As such, the character attacks criminals. This is to say that if Robo Cop comes for her then she has committed a crime. That Robo Cop will insist on crushing her implies that the crime she committed is grave. This further augments the perception she holds on to, that the disease came to her as a punishment.

## 5. Conclusion

In sum, as a result of the para-metaphorical trappings that have made cancer dreadful and hellish, the characters suffering from the illness are psychologically derailed. The para-metaphors contribute destructively to the affected characters' psyche. With the identified para-metaphorical trappings rooted in the minds of the affected characters, the characters act irrationally, are tormented by dreams and shadows and their relationships with their loved ones are affected. Hence, they additionally suffer from schizophrenia, paranoia, depression, among other illnesses and diseases. The reputation given to cancer in the text is quite strong. This keeps the character subjected in the face of the illness as she seems to give the illness the upper hand in her life.

The study advocates that illness or disease should be seen for what it simply is – a discomfort in the body. It should not be magnified, or assessed too highly let alone higher than the individuals describing it. This emphasises the age-long adage that *Knowledge is Power*. Illustrations from the text reveal this. When Sefi laments to Dr. Idigo that what actually makes her sad is cancer, he tells Sefi in a deadpan manner that cancer is no big deal. This makes her smile. She was also relieved for that period, thus, she remarks, 'I must note it in my diary today, I met a crazy doctor who blew the fear of my disease away'. (SJ, 160). But regardless of these encouraging instances, Sefi still held on one way or the other to the paradoxical metaphors, and she got weighed down, psychologically. Imagine then, how her state of mind would have been strengthened, if she had not held on to the para-metaphors.

The stability of the mind of characters and readers will be ensured if they know that these para-metaphors though meaningful, are in themselves contradictory. As such, they are arguably meaningless. The physicians in *Sorrow's Joy* make this clear in their discussions with Sefi. Dr. Watega tells her, 'you are the deciding factor in this matter. Without you, we won't get anywhere. You need to rise now and I with you along with everyone who cares about you. But you must lead'. (SJ, 76). This implies that Sefi needs to rise with

respect to her state of mind. Dr. Idigo speaking to Sefi also insists, ‘... even though it (cancer) is weighty, our fear of it is more of a big deal. It is not so much trouble as our attitude to it. ... the weight of it all is in your attitude. There is no illness worse than a defeatist approach to it’. (SJ, 139 *Emphasis mine*). Remarkably, emphasis is placed on enforcing and empowering the mind of the affected individual.

Cousins, in his book *Anatomy of an Illness as Perceived by the Patient*, reiterates this view for he vehemently argues that an individual’s attitude can help combat any illness. [34]. He notes clearly in his memoir, *The Healing Heart* that illness utilises panic and depression as tools to render the affected individual, powerless. In his words, ‘depressions are frequently an integral part of the panic cycle. Being free of panic at the start helped to free me of its usual aftermath of uncertainty and dread.’ [35]. Cousins’ experience of surviving from heart attack, and the collagen illness in his heart, supports his claim. Cousins emphasises that the doctor’s part of the deal in treatment is to help the affected individual use his or her will power, perseverance and laughter in the process. While the affected individual is left with the assignment of mobilising his or her own internal and natural resources.

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## References

- [1] Simon and Delyse. *What is Literature?* (n.y). [https://resource.acu.edu.au/siryan/Academy/Foundation/What\\_Is\\_Literature.htm](https://resource.acu.edu.au/siryan/Academy/Foundation/What_Is_Literature.htm).
- [2] Ogochukwu, Promise. *Sorrow’s Joy*. Ibadan: Bookcraft, 2015.
- [3] McLellan, M. F. Literature and Medicine: Physician-Writers. *The Lancet*, 1997; (349): 564-567.
- [4] Jones, A. H. Literature and Medicine: Traditions and Innovations. *The Body and the Text: Comparative Essays in Literature and Medicine*. Lubbock: Texas Tech University Press, 1990.
- [5] Abse, D. More than a Green Placebo. *The Lancet* 351.2. 1998: 362-364.
- [6] Taylor, N. D. and Kassai, R. The Healer and the Healed: Works and Life of Kenzaburo Oe. *The Lancet*, 1998. (352): 642-644.
- [7] Omobowale, E. B. Literature and Medicine: A Study of Selected Creative Works of Nigerian Physicians. PhD Thesis, University of Ibadan, (Unpublished 2001).
- [8] Oyeboode, F. The Humanities in Postgraduate Medical Education. *Advances in Psychiatric Treatment*, 2009; (15): 224-229.
- [9] Evans, M. Roles of literature in medical education. *Mindreadings: literature and psychiatry*. Ed. Oyeboode, F. London: RCPsych Publications. 2009, 15-24.
- [10] Owonibi, S. Patient-Writers’ Portrayal of Disease and Psychological Trauma. Ph.D Thesis submitted to the Department of English, University of Ibadan (Unpublished, 2010).
- [11] Kekeghe, S. E. Psychiatric Conditions in Selected Nigerian Literary Texts. Ph.D Thesis in the Department of English, University of Ibadan, Nigeria, (Unpublished, 2018).
- [12] Caiman, Kenneth C. Literature in the Education of the Doctor. *The Lancet* 350, no. 9091 (1997): 1622-1624.
- [13] Sontag, S. *Illness as Metaphor*. New York: Farrar, Straus and Giroux. 1978.
- [14] Sontag, S. *AIDS and Its Metaphors*. Toronto: Collins Publishers. 1988.
- [15] Gilbert, S. F. The Metaphorical Structuring of Social Perceptions. *Soundings: An Interdisciplinary Journal*. 1979. (62.2). 166-186. <https://www.jstor.org>.
- [16] Ferrara, K. W. *Therapeutic Ways with Words*. New York: Oxford University Press. 1994.
- [17] Quine, W. Paradox. *Scientific American*. 1962. (206.4). 84-99. <https://www.jstor.org>.
- [18] Osland, J. & Osland A. Expatriate Paradoxes and Cultural Involvement. *International Studies of Management & Organisation*. 2005. (35.4). 91-114. <https://www.jstor.org>.
- [19] Veatch, R. Justice and the Economics of Terminal Illness. *The Hastings Center Report*. 1988. (18.4). 34-40. Retrieved June 18, 2018, from <https://www.jstor.org>.
- [20] Collis, E., Sleeman, K & Blackhall, L. Do Patients Need to Know They Are Terminally Ill? *British Medical Journal*. 2013. (346.7905). 20-21. <https://www.jstor.org>.
- [21] Mandal, A. Cancer History. *News Medical Life Sciences*. News.medical.net. 2017.
- [22] Mukherjee, S. *The Emperor of All Maladies: A Biography of Cancer*. New York: Scribner. 2010.
- [23] Schlotterbeck, M. What is Cancer? *The American Journal of Nursing*. 1949. (49.5): 300. <https://www.jstor.org>.
- [24] Eze, U. Disease, Trauma and Literary Introspections in Norman Cousins’s *The Healing Heart* and Robert J. Grant’s *Love and Roses from David*. MA Dissertation in the Department of English, University of Ibadan, Nigeria. (Unpublished, 2015).
- [25] Richard, D. and Sheehan, J. Metaphor as Hermeneutic. *Rhetoric Society Quarterly*. 1999. (29.2). 47-64. <https://www.jstor.org>.
- [26] Lycan, W. G. *What, Exactly, is a Paradox?* University of North Carolina. 2010. <https://philpapers.org> > rec > LYCWEL.
- [27] Akhinwu, B. I., Osunde, O. D., Omeje, K. U., Efunkoya, A. A. and Amole, O. I. Cultural Myths and Perceptions Regarding the Usage of Nasogastric Tube Amongst Adult Maxillofacial Surgery Patients of a Tertiary Health Centre in Nigeria. *Journal of Advances in Medical and Medical research*. 2013. (22.4). 1-5. [www.sciencedomain.org](http://www.sciencedomain.org).
- [28] Tyson, L. *Critical Theory Today: a user friendly guide*. New York: Routledge. 2006.
- [29] Dobie, A. *Theory into Practice: An Introduction to Literary Criticism*. Boston: Wadsworth Cengage Learning. 2009.
- [30] Jung, C. *Man and His Symbols*. The Importance of Dreams. New York: Dell Publishing. 1964.

- [31] Brown, N. *Life Against Death. The Psychoanalytical Meaning of History*. Middletown: Wesleyan University Press. 1954. <https://www.goodreads.com/quotes/113615-a-picture-held-us-captive-and-we-could-not-get>.
- [32] Eyisi Jr., J. Metaphors and Paradoxes of Terminal Illness in John Green's *The Fault in Our Stars* and Promise Ogochukwu's *Sorrow's Joy*. MA Dissertation in the Department of English, University of Ibadan, Nigeria. (Unpublished, 2018).
- [33] Wittgenstein, L. *Philosophical Investigations*. 1953.
- [34] Cousins, N. *Anatomy of an Illness as Perceived by the Patient: Reflections on Healing and Regeneration*. New York: Norton. 1979.
- [35] Cousins, N. *The Healing Heart: Antidotes to Panic and Helplessness*. New York: W. W. Norton and Company, Inc. 1983.