

Dissociation Narrative: Manic Depression in Chris Abani's *Becoming Abigail*

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Abstract

The literary exploration of psychopathology underscores the psychological dimension of reality, which stimulates conversations on mental health. Besides the palpable narration of psychiatric conditions, novelists also consciously distort the texture of language and narrative as a postmodernist way of reflecting on the subject of psychological disintegration. This article examines episodes of manic depression, which are engendered by traumatic memories, in Chris Abani's *Becoming Abigail*. The text is subjected to a critical evaluation, paying a close attention to the characters' conducts and utterances as well as its narrative texture. The analysis rests on the tenets of Psychoanalysis and Trauma model. The combination of these critical theories helps in the diagnosis of the characters' psychological states, accentuated by the overall fragmentation of the narrative form. In other words, the two approaches deployed in this article enable the researchers to account for the various manifestations of mental instability by the protagonist and other characters, as evident in the content and form of the text. The researchers argue that besides the distressing episodes that constitute the centre-stage of the novel, Abani utilises a characteristic dissociative language to foreground the morbid minds of the characters featured in the novel.

Keywords: Trauma model; Literature and psychiatry; Dissociation in narrative; Chris Abani

Introduction

The representation of psychological trauma and mental health experiences constitute the thrust of much of African literary texts. Trauma is simply known as an emotional response to distressing

experiences. It is an experience of deep distress, which is capable of fragmenting the individual's consciousness. Psychological trauma is characterized with a feeling of profound anguish. Scholars like Caruth (1996),

Herman (1997), Ibarrola-Armendariz (2011) and Kekeghe et al (2026) acknowledge the exploration of traumatic episodes in literature, which has facilitated discourses on psychological health.

Trauma studies is an interdisciplinary area that explores psychological problems that are elicited by wars, political violence, spousal betrayals, tortures and natural disasters in order to stimulate therapeutic strategies for survivors (Balaev, 2018; Mambrol, 2018). According to Herman (1997), “the traumatic event [...] destroys the belief that one can be oneself in relation to others” (p. 53). By implication, traumatic experiences are capable of rupturing the composition of the self. Like physical wounds, psychological trauma damages the mindscape of the witnessing population. This is why Caruth (1996) regards trauma as “a shock that appears to work very much like a bodily threat, but is in fact a break in the mind’s experience of time” (p. 61). Drawing on the pioneering work of Sigmund Freud, Caruth (1996) argues that through literary imagination and expression, it is possible to explore the realities of traumatic experiences that pervade the society. In “recounting trauma through literature” (Abubakar 2017, p.13), writers explore the intersections of social agonies and the complex human psyche.

Literary narratives have shown that traumatic events, which provoke psychological and emotional disturbances, can deteriorate to severe mental conditions if not properly handled. Mental illnesses are often narrated by literary writers with the aim of facilitating psychological wellbeing. At varying degrees of representations, writers have depicted the various socioeconomic and political triggers of mental conditions (Jones, 1997; Oyeboade, 2012; Kekeghe, 2018; Omobowale & Kekeghe, 2020). Nigerian Psychiatrists and clinical psychologists like Mbanefo (1991), Olatawura (2008), and Oyeboade (2009) observe that economic, marital, environmental and political experiences are some of the engendering factors for mental disintegration. Symptoms of mental disorder can be deduced from literary narratives both in terms of themes and the dissociative language deployed in such narratives. On this note, Sass (1992) argues that mental disintegration and fragmented language which constitute most of the twentieth Century literature and arts are ways through which mental disorders are communicated in literature. The social intensifiers of such psychiatric symptoms are also evidently explored by such writers; and at other point, can be deduced from the dislocated language.

This article examines the exploration of psychiatric conditions like

manic depression, which are triggered by traumatic memories, in Chris Abani's *Becoming Abigail*. Though the crux of the analysis is on the above mental features, critical reflections are also made on schizophrenic symptoms which are shown at its earliest stage by the protagonist, Abigail. Through the infusion of the techniques of interior monologue and fragmentation, Abani is able to narrate experiences that reside in the mindscape of his characters.

Manic depression is a characteristic mental disorder that arises from persistent depression and/or elevated mood. The elevated mood is known as mania or hypomania depending on its psychotic severity. During depression, there are harrowing experiences such as weeping, heartbrokenness leading to the contemplation for suicide arising from the negative outlook on life. The manic features might be that of restlessness which might result in irrational decisions. These psychiatric features are manifested by different characters in Abani's novella, *Becoming Abigail*, particularly, Abigail, her father, and Peter. Besides Abigail's devastated mindscape which is the index point of the analysis, her father's display of manic depression becomes manifest in suicide, and Peter's exhibition of hypomanic symptoms such as his show of irrational dis-inhibited behavior are worthy of critical examination for the

overall mental disorders narrated in this novel. From the deployment of a fragmented narrative rhythm and a dissociative language that characterizes mental disorientation, Abani captures the dislocated inner-life of his characters, unfolding the various psychiatric symptoms manifested by them as well as the general socio-cultural experiences that trigger such psychotic conditions.

Born in Afikpo in Ebonyi State, Nigeria, in 1966, Chris Abani is a Nigerian and American writer. His father was an Igbo and his mother was of English descent. The publication of his entrant novel, *Masters of the Board* in 1985 at the age of 16 later led Abani into prison for six months on suspicion of an attempt to overthrow the government. The novel is a political thriller used to parody military coups in Nigeria. He continued to write after his release from jail but imprisoned again after the publication of his second novel, *Sirocco*. He was even imprisoned the third time and placed on a death row following his anti-government plays which he composed. The moment he was released through his friend, Abani moved to the United Kingdom, living there until 1999 but later shifted to the United State where he currently lives. The suffocating era of political recklessness under which Abani was born must have engendered his concrete imagination of what could

be termed a postmodernist configuration of a mad world.

Theoretical Framework

This study adopts Psychoanalysis and Trauma Theory. Psychoanalysis is a form of psychotherapeutic theory propounded by Sigmund Freud, which stems from the clinical works of Josef Breuer, a reputed Austrian physician that made remarkable discoveries on neurophysiology. Notable among Breuer's discoveries is his 1880s work with Anna O (Bertha Pappenheim), a mental patient that suffered from paralysis of her limbs, anaesthesias and disorders of vision and speech (Zangwill, 1987, p. 276). Breuer later observed that the troubling symptoms of Anna O eventually disappeared after they were made known to her and extensively discussed. That is, through the process of narrating her experiences to Breuer, Anna O received mental invigoration. This therapeutic strategy is known as the "talking cure" (Gay, 1988, p. 65). It is this experience that informed Freud's "cathartic method" on mental health. Breuer's medical exercise impacted greatly on Freud in the area of psycho-healing or psychiatry. Through psychoanalysis, the patient is made to talk freely in such a manner that the repressed fears and conflicts which are causing the problems are brought into the conscious mind and openly faced, rather

than remaining 'buried' in the unconscious.

The efforts further made by Freud and Breuer to document their deliberations of the illness of Anna O and other case studies relating to neurology in their book, *Studies in Hysteria* (1895), shaped the core tenets of psychoanalysis. Freud's theory of traumatic memories is applicable to this study. Traumatic memories manifest in the form of flashbacks, which is simply referred to as posttraumatic stress disorder (PTSD). Trauma has been medicalized by the new classification of PTSD of the *American Psychiatric Association*, third edition. Freud's position that traumatic experiences are repressed feelings that rupture the ego, and which require narrative healing, is very key to the development of trauma theory. Sigmund Freud's idea on trauma influenced the scholarly presumptions of Cathy Caruth, Shoshana Felman and others who developed the trauma model and its applicability in literature.

Cathy Caruth is one of the foremost scholars of Trauma Theory. Trauma theorists have shown a particular interest in acts of 'testimony' in literary and historical texts. Cathy Caruth's trauma model reveals that trauma is an event that fragments the individual's consciousness. The model draws attention to the severity of the suffering by suggesting that traumatic experiences

irrevocably damage the psyche. The traumatic experiences exert a negative and recurrently pathological effect on consciousness and memory that prevents the past from becoming incorporated into life narrative (Caruth, 1996). The tenets of Trauma Theory are captured in Cathy Caruth's study, *Unclaimed Experience: Trauma, Narrative, History* (1996). Caruth made efforts to reevaluate the ideas of Sigmund Freud on Trauma discourse, thereby expanding such thoughts to post-structural concerns. Caruth (1996) argues that latency and dissociation caused by trauma disrupts the ability to fully understand or represent traumatic experiences and collective historical extreme incidents are ultimately never known directly but only through an interrupted referentiality that points to the meaning of the past only as a type of reproduction or performance (p.11). Caruth (1996) further contends that trauma is "not locatable in the simple violent or original event in the individual's past" (p. 17).

The adoption of Psychoanalysis and Trauma model in this article accounts for the mental state of the characters as reflected in the content and form of the text. The traumatic and manic-depressive episodes foregrounded in the content of the novel are diagnosed using the tenets of psychoanalysis, a theory of the mind. This psychological disintegration is also accounted for by the dissociative language and

fragmentation which constitute the form of the novel. These are interpreted as a reflection of the disordered mental world of the characters. Also, through the utilization of the postmodernist principles, other horrifying and messy incidents in the novel are given a close reading as depictions of an unhealthy world. Therefore, the combination of the two theories helps in the literary-diagnosis of the mental states of the characters featured in the novel.

Inward Narrative: Manic Depression in Chris Abani's *Becoming Abigail*

Abani's *Becoming Abigail* is an inward narrative of the despairing experiences of the protagonist, Abigail, a young girl of fourteen who had lost her mother during her birth. The renaming of Abigail after her late mother signals the beginning of her mental crisis as she expresses a characteristic fragmentation in her psychic composition. While Abigail suffers the psychological torture of social construct by being configured as a reincarnated ghost of the mother, her mindscape is later devastated by her father who commits suicide out of his own depression arising from his feeling of aloneness. Though at this point, Abigail's mental state is already conveyed to the reader, the worst damage to her mind is the rape and dehumanization she suffers in the hands of Peter who deceives her to London under the pretense of giving her a better

education and standard of living. Thus, the persistent exposure of Abigail to distressing situations turns her into a beast and she loses every sense of human moderation and reason. This sense of unreason and bestiality are manifestation of manic depressive conditions. It is at the peak of such features that she bites off Peter's genitalia and runs into the street naked.

At the beginning of the narrative, the reader is already exposed to the mental state of Abigail. She is introduced to us as anguished and mentally fragmented. As the narrative progresses, the reader begins to experiment with the series of traumatic experiences that trigger the devastation of her mind. Her numbness is partly elicited by the absence of a motherly care in her life; and her being confined by societal ties to live as a ghost of her mother who had died during her birth. It is observed that Abigail lived a happy, innocent life until the grief over her mother's death, which eventual leaves her heartbroken (p. 29). At the beginning she shows mild depressive symptoms of the neurotic category, but as she continues to prod over her condition, her thought drifts to recollect despairing memories. She recounts:

It was strange
enough just to think
about this as
grieving. Her

mother had died in
childbirth—her
birth... To catch his
child who looked so
much like his wife,
grieve. As though
she was a young
version of his wife,
grieving her own
death in advance
(Abani, 2006, p.
30).

Obviously, social constructs on Abigail as a reincarnated ghost of his mother contribute to her mental crisis. However, the rise in Abigail's depressive condition at the beginning of the novella is heightened by her father's constant thought of his late wife (Abigail's mother). In other words, Abigail's downheartedness is heightened by his father's. The narrator conveys the hazy mood of Abigail's father:

Always in this
memory she stood
next to her father, a
tall whip of
blackness like an
undecided but
upright cobra. And
he held her hand in
this, another lie. He
was silent, but ran
down his face. It
wasn't the tears that
bothered her. It was

the way his body
shuddered every few
moment. Not a sob,
it was more
struggling to
remember how to
breathe, fighting the
knowledge that most
of him was riding in
that coffin sinking
into the dark loam
(Abani, 2006, p. 12).

The depressive mood of Abigail's father while he narrates his harrowing experiences to Abigail further devastates Abigail's mind. She becomes mentally numb as she tries to visualise the despairing episodes of her mother's death during her birth as revealed in her father's narrative. At this point, the reader is already following Abigail's gradual display of depressive neurosis as her mind floats from one thought to the other:

But how could she
be sure she
remembered this
correctly? He was
her father and the
coffin held all that
was left of her
mother,
Abigail...But how
do you remember an
event you were not
there for? Abigail

had died in childbirth
and she, Abigail, this
Abigail, the
daughter, not the
dead one, the mother,
was a baby sleeping
in the crook of some
aunt's arm
completely unaware
of the world (Abani,
2006, p. 12).

Abigail does not experience motherly care as she is nursed by foster parents after the demise of her mother. At the beginning of the narrative, we are made to understand that her mental disturbances are mostly elicited by her father's show of depressive episodes. In other words, the mental ill-health of Abigail's father triggers her own psychological deadness. As characteristic of depressive conditions, Abigail's father takes to alcohol and music to drift his mind way from the despairing situation:

He had been
drinking, which he
did sometimes when
he was sad.
Although that word,
sad, seemed
inadequate. And this
sadness was the
memory of Abigail
overwhelming him.
When he felt it rise,
he would drink and

play jazz (Abani,
2006, p.13).

Alcohol, hallucinogenic drugs and music are commonly consumed by depressed individuals so as to drift the mind away from the sad reality. Just as “writing entails emotional ventilation” (Kekeghe, 2016: p. 391), so is music relevant in healing melancholia and depression. However, considering the severity, of Abigail father’s depressive condition, this application of music to placate his mind leaves him with a temporal relief. Thus, many a time he will be displaying schizoid symptoms with the wife’s photograph clenched to his chest. His inability to manage his traumatic memories eventually leads to his committing of suicide which is acknowledged as a common symptom of manic depression. According to Olatawura (2008) “suicide may be the first and last symptom of depression” (p. 160). The narrator reveals:

This was how she
found her father.
Hanging. The week
she was to leave with
Peter. Hanging.
From the hook where
the ceiling fan had
been. And now a
cruel breeze blew in
and he swayed in the
raveling and
unraveling of the

hemp rope. Road.
And round. Like a
crazy Christmas
ornament. And down
one leg and pooling
on the floor his
reluctance. Yellow.
And in the heart,
putrid, rank with
him. His life. His
loss. And she didn’t
cry. Didn’t seem
shocked. Knew.
Always knew. It was
more a matter of
when. And how. She
sat on the floor
beneath him. Felt his
toes brush her cheek
with every turn. Turn
by turn. His big toe
spiced with his urine.
And the uncut
toenail, rough on her
face. Sharp enough
to cut. Cut a small
line. line linking her
to him... (Abani,
2006, p. 77).

From the excerpt above, it is evident that Abani deliberately distorts the texture of the narrative through the use of sentence fragment, to account for the disintegrated inward of Abigail. While Abigail’s mind is severely devastated by the death of her father, the height of her mental disintegration is witnessed when she

follows Peter to London. Peter does children trafficking. He manifests common symptoms of a hypomanic patient—he cannot control his libidinal driver for sex; and he manifests the unreason through a constant impulsive deviation from social decorum. His display of obsession for sex exposes his hypomanic traits. He also shows signs of Hysterical Personality Disorder (HPD), which is typified by over reactive and intensely expressed behaviors such as angry outbursts and tantrums (Olatawura, 2008: p. 179). When Abigail fights the strange man brought by Peter to rape her, Peter confines Abigail to a doghouse with chains where he dehumanizes and even rapes her. When his wife pleads for Abigail, he threatens to chain the two of them:

The ground was cold and wet with dew and frost and Abigail's nightgown was streaked, dirty, by the time he stopped in front of the empty doghouse. He handcuffed her to the chain lying in front of it. She pulled against it. It was firmly embedded in the ground. "This is what we do to dogs", he said. He spat at

her and she flinched away... pulling his penis out, he peed all over her laughing as she thrashed about "That is my dirty dog", he said. "Dirty Dog" (Abani, 2006, p. 86).

This dehumanization of Abigail by Peter continues with masochist sex, and this leads to her loss of virginity and suppleness, leaving Abigail completely depressed. Peter shows such symptoms as agitated depression, obsessional depression and hypomania. The patient who suffers from the above-named mental conditions is said to manifest a characteristic restlessness and anxiety, obsession, as well as overactive disinhibited conducts (Mbanefo, 1991, pp. 26-27). Based on the above mental symptoms, Peter lacks sense for social moderation as evident in his show of hostility to his wife and Abigail. He had once pushed his wife, Mary, with the new born from a storey building, leading to the death of the infant child. The only justification he has in committing such a heinous crime is that Mary gave birth to a girl child instead of a boy child. Peter's behavior falls within the limit of unreasonableness. Besides his display of libidinal lunacy to all the girls he takes to London, Peter manifests a characteristic bestiality which shows that he lacks a conscious ego and a monitoring super-

ego. Peter's sexual plunder on Abigail greatly attests. We are made to understand from the narrative that Peter engages brutal men to rape Abigail, and in one of such accounts, we feel for Abigail while she struggles with the man:

“Who are you?” She demanded.

“You don't need to know”, the man said.

He was now standing in front of her. Menacing. She tried to retreat under the bedclothes. He pulled them away. She scuttled back but he grabbed her and pushed his weight into her. She fought him. Shouting. The sound caught deep into her throat. Calling for Mary. The man was like an incubus. The weight of his lust crushing her. The more she fought, the heavier he got...

...she closed her eyes and brought her knee up and all the fight went out of him. The man squealed and fell off (Abani, 2006, p. 85).

After this episode, Peter confines Abigail to a doghouse where he pees on her and rapes her regularly. From such postmodernist manifestations, it is obvious that Peter is not mentally well. His gait, utterances and actions in the

story convincingly show that Peter is mentally disoriented. One wonders what sexual pleasure he derives from sleeping with a little girl whom he treats messily in a doghouse. The narrator reveals this tortuous experience which Abigail is subjected to:

And Peter came everyday. Twice a day. At dawn. At dusk. To feed and water her. With rotting food. Rancid water. Sometimes his piss. By the tenth day she no longer cared. Couldn't tell the difference (Abani, 2006, p. 89).

Peter's display of hypomanic episodes might have been engendered by accumulation of a number of social problems including unsuccessful attempts to have a male child. We are made to understand that he yearns for a male child, and he has demonstrated so much irrational bestiality arising from his uncontrolled craves for his desires. From the narrative, it is discovered that Peter's wife, Mary finds it difficult to tolerate his excesses. The relatives of the hypomanic find it difficult to stand his overactive, dis-inhibited behavior (Mbanefo, 1991, p. 27). Mary feels the tortuous escapades which Abigail is subjected to by her husband but she is

too afraid to interrogate her husband's unrestrained behavior. As a result of Abigail's exposure to series of brutalizing experiences in the hands of Peter and other heartless men, she turns "a girl slowly becoming a dog" (Abani, 2006, p. 89). Abigail's sordid response to the various brutal experiences is justifiable—it is a pointer to the fact that she has been terribly dehumanized and has lost her humanness. In other words, Abigail's mental burdens have weighed her down such that she nurses a feeling of worthlessness which is a symptom of manic depression. The narrative is remarkably manipulated to reflect the wounded mindscape of Abigail and other mentally disturbed characters in the text. Thus, in one of such rape attempts, she cuts off Peter's genitalia which she perceives as the organ of oppression:

One night.
Unable to stand it
anymore, she screamed.
Invoking the spirit of
Abigail
And with her teeth tore
Off Peter's penis
(Abani, 2006, p. 92).

After this fierce reaction to cruelty, "Abigail ran out, half naked, the severed penis clutched in her hand. Though the streets were crowded, only a few people noticed this gorgon with bloody mouth and hands" (Abani, 2006, p. 93). Repression triggers anger condition

(Ilolo, 2018). Abigail's gait and action at this moment show the true disposition of a psychotic patient who has drifted from reality. Madness is deduced from body texture, utterances and behavior. At this stage, Abigail begins to show symptoms of schizoid which is the earlier stage of schizophrenia. When the police officer, Derek, engages her, she shows schizoid symptoms such as intense introverted nature, arising from periods of severe depression. She loses knowledge of herself and everything; and it becomes difficult to get her speak up. Consequently, "Derek's colleagues recommended psychiatric treatment in a confined facility, but he fought them. He didn't believe she was crazy" (Abani, 2006, pp. 102-103). According to Sass (1992), "the most common primordial personality of schizophrenics is the schizoid type, usually characterized by intense social alienation and extreme self-consciousness" (p. 227). This is evidently manifested by Abigail in this novella. It is lucid to say that Abigail's earlier show of schizophrenic symptom such as thought-blocking is engendered by her earlier display of bipolar features arising from extreme depression.

Since Abigail had been subjected to different dehumanizing encounters which leave her heartbroken and numb, her constant relationship with the police officer, Derek, lights up her mood. Thus, she falls in love with Derek and even lures him into lovemaking. After her

father, Derek becomes Abigail's second object of love. As such, she does not survive the mental torture triggered by her guilty conscience when Derek is apprehended for sleeping with her. This is because at fourteen (14), she is considered to be a minor. The description of the sexual escapade reveals her sincere feeling for Derek:

Later that night, in Derek's home while his wife slept in their wallpapered bedroom under the warmth of bedclothes, they made love on the sofa. And Abigail was giving. For the first time, she wasn't taken. And she slept for her joy and for the loss of Derek's wife upstairs dreaming the dreams of love amidst all that floral wallpaper...Abigail, this Abigail, only this Abigail, felt herself becoming, even in this moment of taking... And in the tears running down her face she tasted herself for the

first time (Abani, 2006, pp. 46-47).

Pained by the arrest of Derek and the jail terms meant for him, Abigail exhibits manic depressive psychosis; and she takes to smoking to nurse her ailing mindscape:

She stood gazing out at the dark cold presence of the Thames. Breaking open a pocket of cigarettes she fumbled clumsily to light one. She didn't smoke. With her first drag, she imagined she could see the ghosts of those who had also ended it here. At the needle. Suddenly afraid she smothered a sob, choking on the harshness of the tobacco, eyes tearing like the loss of virginity (Abani, 2006, pp. 20).

Abigail recalls a particular occasion when Derek inquires of the meaning of dots in her. Her narrative here shows that

she is mentally fragmented. Obviously, Chris Abani deliberately manipulates the texture of the narrative to capture the inner burden of Abigail. This deployment of dissociative language or what Femi Oyeode refers to as “disintegrative madness” (Oyeode, 2012, pp. 44), is evident in the following dialogue between Abigail and Derek:

“This one”, she said, touching the ones on each breast, first one then the other. “This one is you, this, me. The middle is Greenwich. Here,” and she was down on her stomach, “is my hunger, my need, mine, not my mother’s. And here, and here and here and here, here, here, here, here, me, me, me. Don’t you see?” and she showed him the words branded in her skin...”This is my mother”, she was saying. This is my mother. Words. And words. And words. But me? These dots. Me, Abigail” (Abani, 2006, pp. 48-49).

From the extract above, one can recall those experiences that lead to Abigail’s

depressive state. Besides the death of her father and her eventual subjection to brutal episodes, involving masochism in the hands of men, Abigail’s pretense to live like the ghost of her late mother and the apprehension of Derek by the law, aggravates her mental state. The entire narrative is told from the end. This implies that, we follow a fragmented narrative rhythm that conveys the distress of Abigail from one stage of her life to the other. Thus, the narrator focuses on Abigail’s inward, revealing the different traumatic episodes that facilitate her mental disintegration. The entire narrative shows that Derek is Abigail’s object of love. In psychoanalysis, the object of love is one significant image formed in the mind (Fairbairn, 1986). In another occasion, she recounts her affection for Derek:

And she did love him, in spite of his dirty habits. Now, here, she missed them...and how he wouldn’t always bathe. She knew this because of the way his penis would smell and taste when rolled back the foreskin. Funky, like the old earth: the taste of her mother’s grave...I miss him, she thought. Will miss him, she corrected. Before the cigarette burned

out, she pressed it
against her skin.
DSHND. Death shall
have no dominion
(Abani, 2006, p. 34).

Apparently, Abani defamiliarizes his narrative by infusing sentence fragments and interior monologues which help to reveal the disconcerting inner life of the characters. Derek's regarding of Armah's *Fragment* as his favorite novel underscores Abani's conscious deployment of disjointed narrative language to reflect the inner state of the characters. Thus, from the systematic distortion of language, Abani exposes his reader to the psychiatric message that pervades the text. The display of bipolar features by Abigail is conveyed by the narrative rhythm of the novella. For instance, Abigail's persistent recounting of poetic lines that are "dripping melancholy and loss" (Abani, 2006, p. 23), attests to her gradual mental disintegration arising from depressive conditions. This distortion of narrative texture to account for Abigail's mental state is evident in the following passage:

The cigarette burnt her finger as it
smoked down the filter...

She pulled up her left
sleeve and absently
traced the healed
welts of her
burning...there were
also the ugly whip

marks of cigarette
tips. Angry.
Impatient. And the
words: Not Abigail.
My Abigail. Her
Abigail? Ghosts.
Death. Me. Me. Me.
Not, nobody, she
stared at them
(Abani, 2006, p. 27).

Here, we notice Abigail's display of command hallucination, a form of auditory hallucination that is obeyed without hesitation (Sass, 1992, p. 231). Perceptual disorders such as visual and auditory hallucination are regarded as schizophrenic symptoms. This shows that the depressive condition of Abigail is becoming escalated to a schizophrenic psychosis.

Conclusion

The critical discussion above shows that Chris Abani's *Becoming Abigail* reflects the disintegrated inner-life of the protagonist and other characters in the text. Through a deliberate distortion of narrative texture, Abani evidently captures the disconcerting and dislocated mindscape of the characters that manifest mental symptoms ranging from hypomania and manic depression. The various natural social strains that engender such psychiatric episodes are also foregrounded in the text. This stands to prove that Abani is conscious of the

role of literature in narrating and encouraging improved management of the individual's mental health—in the novel, Abani demonstrates the possible escalation of traumatic memories to a more severe mental condition like depression with manic symptoms. The analysis of Abani's *Becoming Abigail*, therefore, underscores the role of literature in creating awareness on mental health.

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