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URHOB0 ART AND MEDICINE: IMAGES OF ILLNESS, DEATH AND THERAPEUTICS IN UDJE SONG-POETRY

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Abstract

The subject of health is evidently the most significant aspect of humanity, which is conveyed in all cultural expressions, including artistic traditions. By implication, the state of one's physical and mental wellbeing is pivotal to one's existence and productivity in the social domain. Given the import of human health in the general social function, literary arts — oral and written— have represented, at varying degrees, issues that border on illnesses and therapeutic relationships, the aim of which is to create awareness on the clinical symptoms and treatments for different pathological conditions that manifest in people. Existing studies on the representation of illnesses and diseases in African literature focus mainly on modern African literature with no significant attention on oral arts. Prior to the emergence of written literature in Africa, indigenous arts were used to convey the socio-cultural and economic realities of the people, including human health difficulties, cure and mortality. This article, therefore, examines images of physiological and mental health conditions and therapeutic process in Udje song-poetry of the Urhobo people. Five oral poems are purposively selected from the appendices of G. G. Darah's seminal work on Udje, *Battles of Songs: Udje Tradition of the Urhobo* and are subjected to literary analysis, highlighting episodes of illness and therapeutic strategies appropriated in them. The analysis of the selected song-poems, 'Logbo', 'Kikon', 'Odile', 'Yangbeyan' and 'Edevo's Death', is anchored on pathotextualism which foregrounds the intersection of patho (illness and disease) and text (literary text) to show the interdisciplinary relationship between literature and medicine. The study reveals that Udje song-poetry conveys indigenous health philosophy of the Urhobo people.

Keywords: Medical themes, Illness and therapeutics, Udje dance-song, indigenous health.

Introduction

“Medicine is a science of uncertainty and an art of probability”— William Osler

“The art of medicine consists of amusing of the patient while nature cures the disease”— Voltaire

The quotations above were authored by two notable scholars from medicine and the humanities—William Osler was a Canadian physician who mentored young medical doctors to imbibe empathy in the therapeutic process while Voltaire was a French writer, historian and philosopher. The assertions of these great scholars do not only show the symbiotic relationship between the sciences and the arts in medical practice, they also foreground the supremacy of the supernatural in the business of healthcare. By implication, the healthcare providers in the therapeutic process do not rely solely on bio-scientific knowledge which has been adjudged to be empirical; they often invoke supernatural forces during consultations and treatments. So, when Osler observes that medicine is ‘a science of uncertainty’ and ‘an art of possibility’, he privileges the connection between the humanities and bioscience in medical practice. Voltaire, on the other hand, argues that the core business of medical practice demands of the physician to play the artistic, humanistic role of ‘amusing the patient’ while the important task of healing is left for nature. This interaction with the supreme healer of the universe is done in the form of supplications and/or incantations. In other words, the physician or medicine-man in both traditional and modern medicine serves as a mediator between the ‘super-natural’ healer and the patient, to provide care that underscores humanistic and biomedical strategies, the artistic and the scientific, for the overall benefits of the patient. The job of the physician or medicine-man transcends the physicality of the sick person in the medical procedure—he or she seeks divine inspiration and guidance during the diagnostic and therapeutic process. This is to say that in any medical procedure, the artistic and scientific cultures intersect—for example, dialogues, humour, incision and suturing are common artistic tools that constitute the *modus operandi* of the medical profession.

The social construction of illness, healing and mortality is a significant aspect of all human societies, which is conveyed in the people’s artistic culture. Humanity, from inception, engages the subject of physical and mental wellness and death. Since the question of illness signals medicalization and healing, it is impossible for any human society to exist without interrogating human health situation and challenges. From the psycho-spiritual perspective, human beings pray for good health and longevity, and when there are clinical symptoms of physiological and psychological disintegration, the individual negotiates therapeutic strategies for recuperation. So,

if literature is to be truly socially committed, issues that border on health should constitute its analytical breath. S. Neeraja illustrates this point thus:

Health and medicine are matters of public culture as well as popular culture. They encode power relations, questions of narrative method and stereotyping – and therefore might be profitably examined for language, discourse and narrative strategies in the Humanities. Since humanities is defined as “all things that constitute the human” and medical (with attendant condition of health, sickness, cure) is central to the very idea of the human, it is necessary to, I believe, to study discourses of health, illness and medicine to examine what forms of the “human” emerge, thus making health and medicine subjects for Humanities (1).

Neeraja’s position above is helpful in portraying the interface between literature, society and public health. The thematization of illness and mortality constitutes a major layer of literature and medicine. In the essay, “Literature and Medicine: Narratives of Physical Illness”, Faith McLellan notes that narratives that convey the horrifying experiences of sick people, either in autobiographical form or in the third person, observant form, are relevant texts in the field of literature and medicine. In the written dimension of literature, a good number of literary writers have explored different episodes of physical and mental conditions; such creative works help to create awareness on the manifestations of illnesses and diseases in people, the sufferings of patients and the nature of therapeutic relationships established between care-givers and patients. Rita Charon’s *Narrative Medicine: Honoring the Stories of Illness* and Kleinman’s *The Illness Narratives: Suffering, Healing and the Human Condition*, are significant contributions to the literary representation of human health episodes.

Either oral or written, literature has consistently played a pivotal role in conveying socio-cultural experiences, and these include issues that border on illnesses, diseases, treatments and mortality. The episodes above constitute the thematic thrust of both African indigenous arts and written literature. This is probably why Wole Soyinka argues that “the artist has always functioned in African society as the recorder of the mores and experiences of his society and as the voice of vision in his own time” (36). The utilitarian value of literature and its justifiable intersection with medicine is demonstrated by Emmanuel Babatunde Omobowale when he observes that “literature is a reflection of life and human medicine guarantees physiological and psycho-social equilibrium” (6). On this note, Stephen Kekeghe states:

The connection between Literature and Medicine as an interdisciplinary study amplifies the social function of literature to society. Since illnesses and medical interventions are prevalent in the society, the artist's representation of human health conditions attests, significantly, to the inevitability of diseases in human beings, the patients' experiences and prescriptive measures for medicalisation (436).

In Africa, the subject of health and wellness predates the era of European colonialism. By implication, before the colonization and Europeanisation of the African continent, which brought about the emergence of modern medicine, Africa had, for centuries, negotiated different indigenous health strategies. For instance, the Greek and Egyptian philosopher, Hippocrates, is universally celebrated as the father of medicine and inventor of the "case note tradition" used by physicians to record the medical history of patients in modern medical practice. It should be noted that medical knowledge in ancient Egypt is one of the oldest documented health philosophies and strategies in the world. Right from the beginnings of the civilization in the late fourth millennium B.C. until the Persian invasion of 525 B.C., Egyptian medical practice was significantly unique and stable. Black African people existed and experienced various illnesses and diseases through their indigenous science of healthcare; it is reasonable to infer that they upheld a reliable health philosophy prior to European colonialism and westernization of the African continent. David T. Okpako, a Professor of Pharmacy at the University of Ibadan, has emphasized this point in his article on Traditional African Medicine (TAM), entitled: "Speculations on the Origin of Ideas in Traditional African Medicine: An Urhobo Perspective" that:

The discourse of African Traditional Medicine has over the years been given little attention by scholars who dismissed it as either an area without serious empirical merit or as superstitions resulting from ignorance. African Traditional Medicine (TAM) represents an important aspect of the people's indigenous knowledge handed down from ancient times. It sustained the people's life in times of serious health challenges even before the advent of western education (163).

As highlighted above, Africans maintain a unique indigenous healthcare system which is potent in a very special way. Like modern medicine, the therapeutic relationship in African traditional medicine has proven to be very remedial. Josephine Ozioma Ezekwesili-Ofili and Antoinette Nwamaka Chinwe Okaka (2019) observe that "African traditional medicine is a form of holistic health care system organized into three levels of specialty, namely, divination, spiritualism, and

herbalism” (191). Like the physician in modern medicine who relies on bio-scientific methods in the therapeutic process, in the African society, “the traditional healer provides health care services based on culture, religious background, knowledge, attitudes, and beliefs that are prevalent in his community” (Ezekwesili-Ofili and Okaka, 2019: 192). The implication is that the health-care system practised in Africa is not inferior to modern, scientific medicine— they both thrive on one objective, which is the treatment and recuperation of the patient. On this note, Okpako emphasizes that if what the Europeans regard as irrational superstition is what has sustained the health of African peoples prior to colonial times, it would be unfair to dismiss such practices as irrational superstitions. In his words, “if these beliefs collectively constituted the framework for millennia, there must be more to them than irrational superstitions. That is to say, the beliefs must have in them ideas that were relevant to healthcare in Africa” (Okpako, 164). Okpako’s submission is relevant to this study in the way it helps to unfold the orientations that formed the bedrock of the pre-modern African health system and pathologisation, with particular reflection on Urhobo traditional medical philosophy and strategies. Studies like Natako’s “Honouring the African Traditional Herbalist”, White’s “The Concept of Disease and Healthcare in African Traditional Religion in Ghana” and Kofi-Tsekpo’s “Institutionalization of African Traditional Medicine in Healthcare Systems in Africa”, underscore the potency of African indigenous medicine and its therapeutic strategies.

Okpako, in another study, *Wellness: Urhobo Emuerinvwin—An African Holistic Health Ideology*, examines home-grown health philosophy of the Urhobo people which constitutes part of the treatment process of different illnesses and diseases. The implication is that Urhobo, prior to European invasion, had their own indigenous medicine and health strategies which are practised till date. Okpako highlights that the ancestral root to wellness in the Urhobo society “links serious illness to bad behaviour” (Okpako, 97). He also discusses the potency of “plant remedies” for the treatment of malaria disease (Okpako, 145). Similarly, Richard C. Onwuanibe reveals that “a general observation about the causes and cures of sickness in the traditional practice reveals that the native African refers to them, in most cases, ultimately to persons— human or spiritual— rather than natural causes, which are seen as resulting from the manipulations of men, spirits, gods or God” (25). As stated above, Okpako’s studies on Urhobo indigenous health system are

from the sociological, scientific perspectives. Emergent studies on the representation of illnesses in Nigerian literature focus mainly on written texts (see Omobowale, 2001, Owonibi, 2010 and Kekeghe, 2018).

Kekeghe's examination of medical episodes in two Urhobo folktales is a significant study that highlights medical themes in oral literature. In that study, Kekeghe discusses the tales under the ambit of pathotextualism, a theory he formulated to illustrate that the reflection of illnesses and diseases (pathos) in literature (text), is evidence of the symbiotic relationship between literature and medicine, which further underscores the utilitarian significance of literary products. Kekeghe (2020) observes: "African oral art, particularly the narrative genre, expresses the sensibilities and the philosophy of the people in relation to the diagnoses and treatment of different illnesses and diseases" (435). By implication, as a way of conveying social reality, the African artists also acknowledge human health experiences.

The Udje tradition of the Urhobo people "is said to have derived from ancient songs of derision with which feuding parties attacked each other" (Darah, 2005: 25). As a rivalry art, Udje is a rich satiric form that helped strengthen the dignity and mores that defined the existence of the Urhobo people long before their contact with western civilization (Clark, 1965; Ojaide, 2003; Darah, 2005 and Okpako, 2011). In Kekeghe's "Mores and Aesthetic Cadences in Udje Song-poetry of the Urhobo", he examines moral and artistic resources in texts of Udje. The exploration of medical metaphors and mortality has not been given much critical attention. This paper, therefore, examines the representation of illnesses, death and therapeutic strategies in selected Udje song-poems.

Analysis and Discussion of the Texts

The selected texts, 'Logbo', 'Kikon', 'Odile', 'Yangbeyan' and 'Edevo's Death', are subjected to critical analysis, highlighting physical and mental conditions as well as indigenous clinical methods used to foreground them. The pathotextual reading of the selected song-poems is to show the interplay of literary and medical knowledge as conveyed in their content and form.

The song-poem, “Logbo”, conveys disorder of the human sexual and reproductive healthcare and the indigenous therapeutic strategies adopted by the Urhobo people of Nigeria in handling such medical conditions. The text reveals that Logbo, a polygamist, could not make his second wife pregnant. Since he could make one of his two wives pregnant, it is assumed that the second wife, Sati, is infertile. In order to treat the wife’s infertility, Logbo consults an Ijaw medicine man, a gynaecologist who subjects Sati to a medical examination to ascertain the state of her sexual and reproductive system. Contrary to Logbo’s expectation, after a thorough diagnosis, the medicine man certifies Sati as fertile. Given the result of Sati’s medical history, Logbo also submits himself for medical examination. In this case, the medicine man plays the role of urologist, a physician that specializes in the diagnoses and treatment of disorder of male sexual and reproductive healthcare. The medicine man declares Logbo’s incurable infertility, caused by a huge worm that ate up his virile vein. In narratological and dialogical strategies, the performers convey:

1st Solo: Witness an enigma, oh Logbo
 A man marries two wives to attain greatness
 Group: But if one is barren the man suffers disappointment
 2nd Solo: Logbo is the name of Sati’s husband
 As I sing Sati’s song observe her closely
 This is the much-talked-about barren
 Oh, types of barrenness are legion
 The one who loses babies frequently has her identity
 Sati’s barrenness is natural
 Sati went for marriage in Logbo’s household
 It is Hwofadon’s children Sati nurses there
 (*Battles*, 217).

As characteristic of the Udje tradition that thrives on verbal exchanges, the audience is entertained by the misfortune of Logbo who married two wives “But had sperm enough to fertilize one of them/Had procreative energy for only one of them” (217). This illustration is meant to expose the sterility of Logbo as well as the importance attached to fertility and procreation in the traditional Urhobo society. Given the patriarchal structure of the Urhobo society, the woman is mostly held accountable for any episode of infertility in the family. The initial narrative that revolves around Sati’s infertility appears convincing since her co-wife has given birth to children. This is why Logbo consults a gynaecologist for Sati:

Sati's childlessness worried Logbo to no end
 He spent a fortune to cure it
 Logbo went to Ogbodobri to invite an Ijo masseur
 To cure Sati's womb problems
 To set aright Sati's womb
 When the masseur put hand to her belly
 He pronounced Sati a fertile woman
 He confirmed Sati's fertility
 (*Battles*, 217)

The professional way the gynaecologist handles Sati's case attests to the potency of African traditional medicine (TAM) which Eurocentric scholars discard (rather ignorantly) as irrational superstitions. There is an impressive adherence to medical ethics and objectivity in the consultative and diagnostic encounters in the text. Having certified Sati as fertile, the medicine man also diagnoses Logbo and confirms his sterility caused by circumstances:

Renowned gynaecologists also treat men
 To ascertain how fertile they are
Logbo, lie down let me examine you
 When the masseur finished his examination of Logbo
 He said a huge worn had eaten up his virile veins
You tell Sati her chance is lost
Logbo kalarigha zigha he added in Ijo language
 ...
That means you can no longer bear children
 (*Battles*, 217-218).

Since Sati has been subjected to series of humiliation which the patriarchal Urhobo society is capable of constructing against infertile women, the diagnoses that confirm her fertile and her husband, infertile, remind her of the years of torments. Bearing such a dysphoric mood, she confronts Logbo. Sati's anger condition is informed by the overwhelming influence of patriarchal domination and its repressive tendency which holds the woman responsible for any case of infertility in the marital space. Being a male-chauvinist, Logbo unremorsefully attacks her in return:

Sati: You knew I ended my menstrual period today
 You brought a useless penis to my bedroom
 You brought an empty penis to my bedroom
 Since my bridal days I have had no womb complications

The Ijo masseur you invited confirmed it all
 My womb is open not sterile
 Logbo asked: Is the womb open for child-bearing?
 I spend money to invite Ijo experts
 It is your alimentary canal they repair instead
 You who ate hot starch to block your foetus
 (*Battles*, 218).

The excerpt above highlights the philosophy of health-care and management that characterizes the indigenous Urhobo society. The characters featured in the song do not engage in self-medications in handling their health conditions; they consult specialists who diagnose and convey their health history to them so as to ascertain the best medical prescription, and this marks the first ethical step towards recuperation. The therapeutic relationships between the patients and the medicine-man also show some high ethical standards. This is the case between Logbo, Sati and the medicine-man in the song. While this song-poem, “Logbo”, borders on sexual and reproductive healthcare, there are a number of other song-texts that explore different domains of physical and mental conditions, mortality and therapeutic processes.

In the song-poem, “Yangbeyan”, for instance, the audience is made to understand that when Yangbeyan took ill, the family members made several consultations to ascertain the triggers of her illness. Some of these consultations show the intersection between natural, human forces and the supernatural elements of the universe. In other words, the science of medicine in Urhobo has a significant connection with the supernatural forces, the givers and takers of lives. Kekeghe illustrates this point when he remarks: “Like modern medicine that relies on bio-scientific methods, in the African traditional society, the diagnoses and treatment of illnesses transcend the physical realm— there is a deep connection between medicalisation and the supernatural. This is what defines the science of African medicine” (435). This idea is demonstrated in the following lines of “Yangbeyan”:

1st Solo: When illness attacked Yangbeyan, the oracle was consulted
 It was discovered she committed abomination
 All the gods abandoned her
 All communal guardian spirits abandoned her
Oghwroghwro
 (*Battles*, 149).

The consultations with ancestral or supernatural forces were meant to ascertain the causes of Yangbeyan's illness. This, in other words, is the diagnostic strategy for her condition. As Richard Onwuanibe points out, "the philosophy of African medical practice is rooted in the African world view" (25). Though Yangbeyan eventually dies, her relatives were not reckless about her health condition: they made systematic efforts to adhere to the ethical issues of consultation, diagnosis and treatment that constitute the Urhobo traditional worldview. The theme of mortality in this song-poem, like others, underlines the helplessness of man over death. The point is clear: no matter the experience of the medicine man, if the ancestors or the supernatural beings who reign supreme, decide to take such a life, man is powerless. As such, the medicine man helps to mediate between the sick person and the ancestors. The medication to be given has to come from the ancestral spirits. When the ancestors refuse to release any prescription for the condition of the sick person, such a condition is regarded as incurable. The following excerpt of the song attests to this reasoning:

Group: Erivwin has taken her
 2nd Solo: Truly Yangbeyan has died
 Kpokiro, how would you lament this?
 Truly, Yangbeyan is dead
 Kpokiro, how would you grieve this?
 (*Battles*, 149)

The word, 'erivwin' as used in the extract above suggests the land of the dead or the ancestral abode. The term is used euphemistically to imply the death of Yangbeyan. The image of 'erivwin' paints a vivid picture of the interplay of the supernatural in the affairs of the living, including experiences that border on illnesses and medicalization. Another socially convincing aspect of this song-poem is the thematization of death and distress. The death of Kpokiro's daughter, Yangbeyan, devastates her to the extent that she manifests episodes of deep emotional agony. The poem reveals that moments of anguish can trigger mental disorientation. Kpokiro's depressive mood is evident in the following lines:

Kpokiro started recounting:
I initiated into womanhood two, three daughters

None of them gave birth
Yangbeyan only it was who was pregnant
And I was all expectation for a grand child
They say she gave birth and died?
It is incredible what you say
Yangbeyan and child are in quarantine
Open the door let me see her
 3rd Solo: So Yangbeyan is really dead

...
 This is why I am wailing too
 (Battles, 149)

Kpokiro's mental burden is evidently textured through the images of anguish appropriated in the song. Her disconcerting mood and emotional brokenness manifest in the following lines: "It is incredible what you say/Yangbeyan and child are in quarantine/Open the door let me see her" (149). She finds it difficult to accept the reality that she has lost her daughter to the cold hands of death. So, the lines of the song-poem convey Kpokiro's distressing mood, which manifests in her utterance and physical disposition, showing episodes of jumpiness and distractibility. These symptoms of depression can be deconstructed from Kpokiro's utterance above.

The tenor of death and psychological breakdown is also foregrounded in "Odile". The song narrates the mysterious illness and death of Odile shortly after the death of his brother, Rhashaive, which plunges their mother into depression. Odile's mother, Ihien, is traumatized by the strange illness and death of her two sons. It is learnt from the song-poem that Ihien, married to a man at Gbogidi, experienced marital challenges and left the marriage with her children. Ihien left her first marriage because of being addressed as a slave in her husband's house. She retired to her parents' house in protest. Regrettably, Ihien suffered a tragedy with the sudden death of one of her sons, Rhashaive:

Group: Ihien got married at Gbogidi
 After a short stay she complained of being addressed as a slave
 She took her children and retired home in protest
 Ill-omened retirement and tragic death met in mutual embrace
 Mother and children were hardly home when a fatal
 Illness attacked Rhashaive
 A contagious disease that sends one
 To quarantine attacked the youth

What reward for retirement from matrimonial home!
(*Battles*, 168-169)

Shortly after Rhashaive's mysterious illness and death, Odile too falls ill and dies. Odile's illness, like his brother's, defies medical explanation based on the Urhobo indigenous health philosophy. The song reveals the ethical dimension to medical practice in the traditional Urhobo society. Before medicine is administered for any health condition, consultations are made with a medicine-man who sometimes doubles as a diviner. In Odile's case, "A diviner was called to ward off Death/The medicinal bottle exploded and presaged danger" (*Battles*, 170). The supernatural signs shown in the process of administering therapeutics emphasize the severity or otherwise of the condition. To the medicine-man and other members of the society, Odile's illness defies all medical explanations and attentions. The artist reveals that the strange signs shown when treatment was to be administered on Odile point to the fact that he would not survive the illness: "I was certain that the illness would kill Odile/But who would have believed if anyone dared say so?/How could Odile have survived?" (*Battles*, 170). The narrator gives a vivid narration of Odile's health difficulties and eventual death:

Group: Odile too was attacked by a minor illness
 Hope was that he would recover after a few days
 When the illness increased in intensity
 Everyone became apprehensive

...

Leader: Greetings to all
 The mother prepared him a peppery soup
 Odile, please rise up and eat
 But he could not answer
 Odile shook his hand feebly:
 Mother my limbs are weary already
 Get ready to consult a diviner
 Maybe I can survive the year
 My dreams cause me great worry
 I saw in my dream last night that late Gbomo
 and others arrived in a boat
 I am not sure if I will live much longer
 After uttering this Odile reclined on the wall
 And instantly gave up the ghost
 Loud wailing pierced the air

Mourners collapsed on one another, grieving
(*Battles*, 169)

Odile's request for a diviner further attests to the socio-spiritual perspective to health management among the Urhobo people. The supernatural tenor laced in the song attests to the fact that the supernatural world plays a significant role in the wellness of human beings in the society. As stated above, the strange signs shown when the diviner or medicine man appears, are evidence of a negative omen of Odile's presumed death. The diagnosis of the severity of Odile's condition is marked by the explosion of the 'medicinal bottle', which according to them, 'presaged danger' (170). The implication is that in any health challenge faced by a member of the Urhobo society, consultations and diagnoses are made before the actual treatment and cure of the symptoms.

Besides the physical health difficulties suffered by Odile leading to his sudden death, there is also the mental agony suffered by his loved ones and parents. The emotional and psychological trauma which the living members of the society are made to face after the death of their loved ones is fully captured in the song-poem, 'Odile'. In other words, the mental and emotional anguish of Odile's family members, which constitute the content of the song is worthy of investigation. Odile's mother, Ihien, experiences emotional brokenness following the death of her sons. This tone of despondency is conveyed in the excerpt below:

Group: Oh God I am horrified
As I grieve Odile's death
Who has witnessed such tragedy before?
Odile my source of widespread fame
Suddenly, *Erivwin* snatched him away
With Odile gone, Ihien how will you manage your life?
Odile left me alone, accursed be the authors of this crime
What is it you say, that Odile is really dead?

Leader: Academic work is such an ordeal, yet
Odile patiently succeeded
Shortly before he was to be employed, Death killed him
Hear a horrible story!
(*Battles*, 168).

The anguished narrator is horrified by the fact that Odile was at the peak of his career when death struck. This, obviously, makes the tragedy more shocking. The emotional and psychological brokenness of the poet-narrator is conveyed in these lines: “Odile left me alone, accursed be the authors of this crime/What is it you say, that Odile is really dead?” (169). In the Urhobo society, it is believed that sicknesses and death of young people are either manipulated by evil doers who are jealous of the person’s fame or the resultant punishment for the evils manifested by the sick person. In the latter category, the illness serves as a form of punishment. This is why the narrator believes that there are ‘authors of this crime’ (168), implying those behind Odile’s death.

The tenor of deep emotional distress that runs through the song-poems are discussed here as episodes of psychopathology. The anguish and depression generated by death are evident in a good number of songs examined in this article. For instance, in “Edevo’s Death”, the audience is exposed to Edevo’s manifestations of symptoms of manic depression which culminates in suicide. Besides the depressive symptoms exhibited by Edevo, his family members and loved ones also show different levels of mental and emotional torture. The elegiac narrative offered by the song evidently underscores the mood of dysphoria and depression:

Leader: News of Edevo’s death, the scream of wailers rent the air
 When we got there, behold a star singer lying prostrate!
 The scribe of Orhunghworun died from an acid drink
 The suicide note he left behind
 The note was read out:
Mienka, take care of the children
I can no longer endure the hardship
Goodbye till we meet in the next world
 (Battles, 101)

Edevo’s committing of suicide is a symptom of manic depression, and it was triggered by his poor economic condition. This interpretation is supported by Olatawura’s observation that “suicide may be the first and last symptom of depression” (160). Edevo’s feeling of worthlessness occasioned by his pathetic economic status leads him to take his life. By dying, his id (the unconscious) makes him feel some relief from the social hardship that he has been exposed to. The agony of poverty and the shame it brings lead to the gradual dissolving of Edevo’s ego (the rational principle), leading to low sense of self-consciousness and self-worth, which eventually

ends in suicidal instincts. The suicide note he drops for Mienka, presumably his brother, unfolds his inner burden: “*Mienka, take care of the children/I can no longer endure the hardship*” (101). This is to say that the Udje song artists of the Urhobo are conscious of the social triggers of physical and mental illnesses that manifest in people, and this attests to the social significance of the poetic tradition.

Similarly, in “Kikon”, the audience is made to experiment with the psychological trauma of Kikon after losing her son, Kwaire, to the river. The shocking tragedy of Kwaire’s death leaves Kikon heartbroken and mentally disoriented. The poet-narrators reveal that Kikon loses possession of her thoughts and begins to act childishly:

Leader: Oh Kikon, the bereaved always acts foolishly
 Akikon, the bereaved always acts naively
 Kwaire went to work, news came he was dead
 Death of Kikon’s son, its grief is unabatable
 Group: Death of Akakpovwaire remained with Gakuma till old-age
 Hardly a word is uttered and Kikon would break into lament:
Since I got married at Aladja I have not crossed the river to Warri
The only gods I have set my eyes on are masquerades
Omaloku knew this well yet spared those who frequent the river
Were my son killed by a god on land,
it would have been less painful.
 Kikon’s farm lies fallow on Ugbologode
 The cassava lies abandoned; the bereaved experiences a lot
 Kikon acquired sorcery of filth, how has it profited her?
 Ekokomena who went to sea died a sudden death too
 Kikon bewailed: *Death made me run nude across a market*
I reached for raiment but in vain, what a life!
 (Battles, 212)

The excerpt above clearly conveys the mood of disorder suffered by Kikon after losing her son. The musician reveals that Kikon, like other bereaved people, “always acts foolishly” (212). Such disconcerted behaviour is as a result of the dissolving ego or collapse of the mental plane which traumatic incidents provoke. Manifestations of psychiatric episodes are evident in the poor mental quality of people. With those signs exhibited by Kikon, it is apparent that Kikon’s experience of deep distress is escalating to a severe mental illness of the psychotic category. Mbanefo aptly explains this point:

...it may be said, in a broad generalization that mental illness is here conceived as a continuum, from mild disturbance of affect as seen in psychoneuroses, to gross disintegration of personality that is seen in severe psychoses when the patient has lost contact with reality that he behaves childishly (p. 16).

Kikon, therefore, manifests symptoms of reactive depression or Posttraumatic Stress Disorder (PTSD), which are triggered by the despairing memories of her son's death. Slight conversations bring flashbacks of her beautiful memories with her son. The artists illustrate: "Death of Akakpovwaire remained with Gakuma till old age/Hardly a word is uttered and Kikon would break into lament" (212). She had also witnessed such a tragic death of a son in the past. The combination of these distressing memories gives her mental breakdown such that she manifests traits that characterize the early appearance of schizophrenia that bears catatonic features like passivity, vacant staring, unawareness of self and thought-broadcast. The following lines attest to Kikon's mental crumbling: "Kikon bewailed: *Death made me run nude across a market/I reached for raiment but in vain, what a life!*" (212). Our discussion of the song-poem, "Kikon", reveals that traumatic episodes like death of loved ones can trigger mental disintegration in people. In Kikon's case, she shows symptoms that characterize different mental illness, from the neurotic to the psychotic category.

Conclusion

The discussion in this study underscores the social significance of Urhobo song-poetry in conveying human pathological conditions and medicalisation strategies. The five song-poems analysed in the article, 'Logbo', 'Kikon', 'Odile', 'Yangbeyan' and 'Edevo's Death', explore both physical and mental disorders as well as the therapeutic relationships shared between the caregivers and the patients. The Urhobo people's indigenous health philosophy in relation to diagnoses and treatments is foregrounded in the oral texts, and it agrees significantly with the ethical standards of modern medicine. Like the bio-science of western medical practice, one comes across in the examined songs the Urhobo people's indigenous science of health management, which is rooted in supernatural beliefs. The exploration of physiological and psychopathological episodes in the texts confirms the significance of literature (oral or written) in

the representation of human's experiences. The various experiences of illnesses, death and the psychological trauma elicited by such despairing episodes in the selected Udje song-texts are discussed from the psychophysical perspective of human health.

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