

Article

Different Shades of Mental Illness in Ama Ata Aidoo's *Anowa* and Emeka Nwabueze's *Spokesman for the Oracle*

Ikechukwu Erojikwe, Uche Nwaozuzu, Emeka Nwabueze

Department of Theatre and Film Studies, University of Nigeria, Nsukka

Correspondence: ikechukwu.erojikwe@unn.edu.ng

Abstract

Good health, positive psychology, and psychological well-being have been man's concerns from primordial days to the present age. It seems that mental health awareness and positive psychology are increasing when placed against other major health concerns in Nigeria. Predominant cases of mental health in Nigeria range from schizophrenia, bipolar disorder, manic depressive disorder, and others, and this is often left unabated. Most times, these states are not adequately diagnosed. First, superstition militates against mental health, and secondly, refusal by family members to accept the mental state of their loved ones. It, therefore, creates diverse models. The situation results in people with undiagnosed mental health disorders co-existing in the community, living seemingly ordinary lifestyles without clinical care. Another scenario is those people who are protected and locked up by their families due to fear of stigmatization. A third and most alarming are those abandoned by their families to roam the streets. This position necessitated by cultural barriers and intrusions is examined. This study sought to take a close look at how literature has contributed to mental health awareness. Aside from the plays, information and data were also collected from the field through in-depth interviews and discussions. The choice of plays was deliberate because it would create gender balance in the study and allow the researchers to carry out a healthy reading of the two plays. The playwrights' critical portrayal of health concerns in their works helps to raise a needed consciousness. Within the ambit of reader response theory and drama theory, this study attempted to validate the need for creative writers to engage, stimulate, negotiate, and investigate how to grow knowledge of health concerns through dramatic literature.

Keywords: Mental health, positive psychology, psychological wellbeing, dramatic literature, cultural barriers, health humanities

Introduction

This study examined dramatic literature's role in health humanities (positive psychology and psychological wellbeing). The core focus is how drama has created mental awareness for positive psychology and psychological well-being in Sub-Saharan Africa. To fulfill this work's primary objective, the study was anchored on the emerging discipline of Health Humanities to provide the space and place for effective progression in this research. The World Health Organization defines health as the deficiency of illness and an absolute condition of mental, physical, and social well-being (World Health Organization, 1946). This led to a modification in the focal point from an overemphasis of the medical model towards developing a public health model and finally to health humanities (health management strategies) from an illness treatment pathogenic course to a health advertising and illness avoidance. Health humanities refer to the application of the arts and humanities to discuss, express, and promote dimensions of human health, positive psychology and psychological well-being. In health humanities, human health (and health promotion) is understood according to the constructivist principle inherent in the arts and humanities. Well-being is a self-motivated conception that includes subjective, social,



and psychological scope and health-related behaviours. We concentrated on psychological well-being, which can be defined as the pursuit of goals, attempts to realise one's potential, experiencing good connection to others, managing surrounding demands and posing positive self-regards that will enhance happiness, pleasure and satisfaction (more hedonistic and epicurean views). Viewed as a cognitive component, psychological well-being encompasses six distinct dimensions of wellness (Autonomy, Environmental Mastery, Personal Growth, Positive Relations With Others, Purpose in Life, Self-Acceptance), used in the discussion part of this study. Positive psychology promotes well-being and a fulfilling life overflowing with meaning, happiness, commitment, positive relationships and achievement. Gable and Haidt (2005) defined positive psychology as "the study of the circumstances and processes that add to the flourishing or most favourable functioning of people, groups, and institutions. Mental health and health humanities cannot exist without positive psychology.

The primary goal and objective of the convergence between health and humanities are to seek good health, positive psychology and man's psychological well-being. Developing from medical humanities, health humanities seeks a broader convergence and a robust cross-disciplinary approach to human health. This paper focuses on Emeka Nwabueze's *Spokesman for the Oracle* as illustrative tools and Ama Aidoo's *Anowa*.

The theoretical framework adopted for this study is Drama Theory, Vygotsky's Stage Theory and Reader Response Critical Approach. Vygotsky's stage theory is on the psychology of art. It deals with how to produce emotional performances and create positive psychology based on a theatrical script and perform them convincingly to have an emotional response to enhance mental health and psychological well-being in viewers aware of the deception of acting on the stage. However, the technique alone is insufficient for the convincing replication of deep emotional states to enhance well-being, positive psychology, and mental health to stimulate the catharsis Vygotsky discusses in *The Psychology of Art*. On the other hand, the Reader Response Critical Approach enables us to reread the play and find fresh interpretations from the reader's perspective. In defining drama theory, Lawrence Kincaid states that:

The essence of drama is confrontation, which generates emotion. Emotion is the motivational force that drives the characters' actions, leading to conflict and its resolution. Using involvement and identification, the confrontation and emotional response of the characters generate a corresponding emotional response in the audience (150).

Furthermore, this theory gives us the negotiating gambit to analyse the plays using positive psychology and psychological well-being as appropriate health communication tools. Drama theory as a model system of communication identifies with the notion that we learn (experiences) from what we see (perception). According to Kincaid, drama theory focuses on how social relationships and emotions displayed in a drama affect audience behaviour. He argues that "observing such changes in a drama, some audience will undergo the same kind of change themselves." That is stimulus perception to response through belief and attitudes (46). Wolfgang Iser, a

leading proponent of this theory, provides a treatise on the approach in the preface to his book *Prospecting: from Reader-Response to Literary Anthropology*. He states that:

What has come to be called reader-response criticism provides a framework for understanding text processing, revealing how the reader's faculties are both acted upon and activated. By putting the response-inviting structures of a literary text under scrutiny, a theory of aesthetic response provides guidelines for elucidating the interaction between text and reader (vii).

This means that readers' faculties vary depending on their experiences with the situations presented in the drama. M. H. Abrams and Geoffrey Harpham in *A Glossary of Literary Terms* also acknowledge that "at least to some considerable degree, the meanings of a text are the "production" or "creation" of the individual reader experiences, hence that there is no one "correct" meaning for all readers either of the linguistic parts or the artistic whole of a text" (266) because of individual differences which are acquired through physiological, psychological and environmental experiences learned.

The health issues raised by the playwrights and discussed in this study traverse reproductive and mental health problems, all of which form part of major health issues militating against sustainable development in Nigeria today. This is because Nigeria, as we know it, is perceived to focus on not maintaining the social order, which Erojikwe (2018) describes as "dislocated spaces and contaminated spaces", in contrast to more individualised pursuits in the Western contexts, which represent different shades of mental health across cultures. The texts studied serve as deep-rooted and timeless historical material that reflects the fears of a world plagued by other sicknesses and possible strategies for overcoming current/future health situations. The plays reveal that the collective (collectivist culture) will of a people to live plays a crucial role in well-being and good health.

Health Humanities – Relevance of Art in Health

Health humanities is an emerging discipline that attempts to look at areas of convergence between health and the humanities. Paul Crawford and others in *Health Humanities* note that:

There is a growing need for a new kind of debate due to the emergence of positive psychology at the intersection of the humanities and healthcare, health and well-being. In the recent past, the field of medical humanities has increased, but it is timely and appropriate to address the rising and broadening demand from other professions to become involved, to accommodate new sectors of the healthcare workforce and the public, and to extend 'appliedness' about how arts and humanities converge knowledge and practices to inform and transform healthcare... (1)

The cross-disciplinary approach that health humanities encourage provides the grounds for theatre artists to become strong players in health practices. Therefore, theatre, film and various media of the performing arts can be used as solid intervention strategies to alleviate positive psychology, enhance psychological well-being and curb the menace of health concerns through "Psychodrama". Furthermore,

the question asked by Victor Fuchs, quoted by Hyacinth Ichoku, "Who shall live?" (11), is no longer a medical declaration alone. The humanities and theatre, precisely, have become major stakeholders in the pursuit of the wellness and well-being of humanity to curb mental illness.

The complexity of healthcare provision in the light of different illnesses plaguing humanity today cannot exclude health humanities as a reliable strategy for ameliorating pervasive ailments and increasing well-being in our society today. Theatre has been identified as that strategy, the missing link that can help reduce ignorance and illiteracy that undermine efforts at enhancing positive psychology and psychological well-being for effective healthcare delivery. Austin Asagba, discussing the power of theatre to create change, quotes Irina Bokova, Director General of the United Nations Educational, Scientific and Cultural Organization (UNESCO), as averring that "Theatre has the power to move, inspire, transform and educate in ways that no other art form can. Theatre reflects the extraordinary diversity of cultures and our shared human condition, in all its vulnerability and strength." (18) Similarly, Oga S. Abah, one of the leading advocates of Theatre for Development (TfD) in "Perspective in Popular Theatre: Orality as a Definition of New Realities." declares that:

In situations of deprivation, of poverty, of disease, insecurity and of hunger, should theatre be complacent or should it be active in confronting issues, in shaping and indeed altering ways of perception, thinking and attitudes? I should think that theatre needs to declare itself an active practice in favour of enlightenment and change. This means that theatre should no longer restrict itself to simply reflecting society. It should be engaged in mediating society; and even more, it should be involved in critical intervention. Theatre should therefore be a practice in search of solution and action. This implies a new perspective, different from the conception of theatre for entertainment or purgation. (81)

Therefore, drama's dynamic role in society and its efficacious role in health situations to enhance positive psychology and psychological well-being should be fully utilised. Through health humanities, drama has come to show a rich tradition of focusing on aspects of human behaviour and experience that may be perceived as complex or controversial. In other words, devised scripts and theatrical productions can be valuable in raising public awareness about the influence of positive psychology, psychological well-being and mental health to provide safe public venues for discussing sensitive experiences and emotional responses from the audience. The need for the theatre to remain complacent in the wake of numerous societal problems should be de-emphasized. In mediating society, such plays as *Anowa* and *Spokesman for the Oracle* identify themselves with this role. In this study, we aimed to provide drama practitioners, psychologists, health practitioners, and the general public with information to view the human mind and behaviour from a different perspective and point of view relating to what society usually neglects.

The different shades of mental illness situations have appeared in dramatic literature in various modern Nigerian dramas. For instance, it could be observed that Nwabueze, in his play *Echoes of Madness*, had his protagonist Obiorah go mad at the

end of the play. *When the Arrow Rebounds*, which is an adaptation of Chinua Achebe's *Arrow of God*, also portrays the protagonist Ezeulu as mad at the end of the play. From the ongoing, it can be observed that three of Nwabueze's texts treated the issue of mental health. The different shades they appear probably illustrate the various dangers associated with this health condition. One particular factor that Nwabueze tried to expose is the multiple ways the mentally challenged individual is taken care of by their family or how the sick individual is destroyed or dislocated from their psychological space. To illustrate further, while Obiorah is denied help by his family, Ikem receives absolute care (controlled spaces) from his parents. In this study, we devised drama performance to highlight the subjective damage that is the consequence of mental illness, stigma, and absence of positive psychology and well-being through an educational intervention that gives voice to both the individual and the caregiver in the family and society. The need to take care and, if possible, seek immediate help is imperative. It is necessary at this point to give a brief synopsis of the two plays.

Synopsis of *Spokesman for the Oracle*

Nwabueze's *Spokesman for the Oracle*, a play set in contemporary Nigerian society, is a play that happens within a day. It tells the painful story of Ikem, a boy driven mad by society. Ikem lives with his birth father (Chidi) and foster mother (Oyibo, without any idea). The duo of Ossi and Oforma lure Ikem to an obscene pyjamas party where he loses his virginity to a girl (Nneka, the birth mother) with no knowledge that she is his birth mother. This was because Nneka threw the little boy (Ikem) away, and the Okafor picked him and took him as their son since Oyibo could not give Chidi a child. Ikem's maternal grandfather and Nneka's father, Amadi, appear at the Okafor's house to claim paternity to the boy after eighteen years. The visit of Amadi leads to the recognition that Chidi is Ikem's father. On her visit to lay claim on Ikem, Nneka sees his portrait, discovers that she slept with the son, and leaves devastated. Ikem, on his own, learns about his paternity and that he has slept with his mother and crashes into nothingness. In this study, our approach, the narratives were used to generate examples of dramatic practice and performance rather than to evaluate the play's value to communicate scientific information about an illness and the absence of positive psychology and psychological well-being to targeted audiences. The researchers aimed to provide drama practitioners, psychologists, the audience, and the entire society with information on learning to view the human mind and behaviour from a different perspective and point of view for relating to those societies that push mental illness and usually neglect it.

Synopsis of *Anowa*

The play *Anowa* is a tragic drama written by Ama Aidoo, one of Africa's most prolific and versatile female writers. The play is set mainly in two rural communities in the Gold Coast (Present day Ghana), Yebi and Oguaa. The play revolves around Anowa—a vibrant and strong-willed lady who rejects all the suitors proposed by her parents, Osam and Badua and goes on to marry a stranger named Kofi Ako, who, despite her parents' warnings and advice. Anowa, who is strong-spirited, leaves her home in Yebi against her mother Badua's admonition and sets off to begin a new life with Kofi Ako in Oguaa. Anowa's modern, independent, and attention-seeking attitude annoys Kofi

Ako, and he asks her to be like other average village women. Habitually, maladaptive attention-seeking behaviours are discounted as character flaws, a dramatic personality, or manipulation in an individual's illusionary world. Excessive or maladaptive attention seeking is a central component in specific mental health disorder diagnoses, particularly Histrionic Personality Disorder and Borderline Personality Disorder. However, as a tactical method, it is often used in combat and theatre (upstaging) and is fundamental to marketing. One strategy used to counter various types of attention-seeking behaviour is planned to ignore, which Kofi Ako failed to apply. Anowa lives in an illusionary world, and the sorrow of not bearing a child depresses her. Her wealthy husband gets frustrated with her and asks her to leave him. Anowa engages in an argument with him and discovers that he has lost his ability to bear children, which makes him responsible for their childlessness, not her. This shows that drama has an affluent tradition of highlighting an aspect of human behaviour and incidents that may be perceived as tricky or notorious. In this, the contained space and tacit convention of audience behaviour agree to the concealed nadir of partaking in the unfolding scenes of communication, act and emotion that are often hard to sufficiently express in the ultimate ovations and departures that mark events ending.

Since this study intends to examine and effectively understand the way drama has tried to communicate mental health concerns, the two plays reveal that both Anowa and Ikem were victims of what they never planned (dislocated intimate spaces). While a lack of Love propels Anowa's situation, Ikem's situation is brought about by over-caring and ersatz love that leads to over-protection and excessive lying. When the truth eventually hits the individual, it devastates him. (Quote from health humanities). This examines the impact of staging positive psychology, psychological well-being and mental health on theatre audiences, which enthralls the artist and the psychologist. From an artistic summit of view, the study sets out to see the sights and further the role of theatre in helping to commune in a deeper understanding of positive psychology, psychological well-being and mental health issues and also look at the possibilities of using drama as a means of unlearning mental illness and learning about mental health and wellbeing.

Seeking Care- Helping Hands

Ikem is portrayed as a young man with great potential and dreams. The first time he is introduced, the audience may not understand him because he is brought home drunk. In the next scene, when he apologises to his mother, we find a brilliant, sophisticated young man with great potential. Part of his dream is to be a clinical psychologist.

When he begins to show symptoms of bipolar disorder, the father, Chidi, does not waste a minute in sending for a clinical psychologist who will commit him to a psychiatric hospital where he will receive immediate medical attention. Chidi gives cultural backing to his speed in seeking psychiatric intervention (quote from play). His reaction reveals a cultural foundation and the cultural response associated with mental sickness and well-being in Nigeria. In the play, the advance to devised monologues derives from a desire to experiment artistically and democratically in a way that can lend a hand to the audiences to develop their social awareness and

contribute to the combat of mental illness and stigma through the performing arts by increasing the positive side of psychology and wellbeing. For the artist, the interest is not necessarily in the diagnostic medical description of bipolar or its treatment. This is because it is habitually recognised that there is not always as much 'daylight' between disorders as the diagnostic manuals might lead one to believe. To a certain extent, the monologue's connotation lies in democratising mental illness by bringing mental illness into domestic situations by presenting how mental illness is a contemporary event happening in families as it happened in the play can also happen to family members of the audience.

In the same way, we aimed to democratise positive psychology and psychological well-being on stage: using the dramatic conventions to convey onstage what is habitually hidden behind closed doors, heartening public discourse and raising social wakefulness about mental health, positive psychology, and gaining insight into people's relationships, which is also a psychological interest. Also, from a psychological point of view, the monologues tender an opening for the audience to openly view interpersonal dynamics associated with mental health from a positive psychology and psychological well-being position.

A famous maxim in Igbo states that "even if you cure madness, you can never cure the mad person talking to himself", so the speed with which people who are aware respond to mental illness is not just because of their love to treat the sick person, but out of an innate desire to treat and save themselves from stigma, deprivation, castigation, possible dislocation and alienation. In the same hint, we row that devised performance can bring to light the subjective harm that is the consequence of mental illness stigma through an educational intervention that gives voice to both the individual and the caregiver in society. It has been stated that stigma has many 'types'; the monologues demonstrate both external stigma (perceived stigma from the outside) and self-stigma. This is especially prominent in actual world settings when individuals and their caregivers who share the stigma experience reduced self-esteem, negative core self-evaluation, and fragility to happiness and confidence due to their internalisation of myths and negative beliefs associated with mental illness. Most Nigerian communities perceive mental illness from a very negative standpoint. Most people will not want to marry from a family where any mentally deranged person has been identified. Again, the stigma due to lack of adequate awareness is terrible. The superstition issue worsens it because no one wants to share or partake in the curse—for instance, some communities in South Eastern Nigeria associate madness exceptionally with marital infidelity. Most times, whether this is true or not, the position ascribed determines the level of care the sick person gets.

In the play, Ikem, in a position of dislocation, intimate spaces and disbelief, laments,

IKEM: My life? What life? My peace has been lamed like overgrown grass, killed from the root like an unwanted tree. (to Dr Ezenagu) Can't you see it? My name would now cause humanity to spit and wrinkle the forehead... Better be dead than forever a dreaded man. (84)

Nwabueze, in Ikem's line above, clearly illustrates the perception of madmen in society. Even Oyibo and Chidi, Ikem's parents, fail to understand the proper position of their son's mental health.

CHIDI: Where are you taking him to?

EZENAGU: (frowned) Do you need to ask that question? (Lowers his voice) and answered

“To the Mental hospital” ...

Chidi’s statement clearly shows this lack of understanding of the actual situation. Ikem, discovering that he is about to be committed, looks for solace under the table, but he is rescued and taken out. This study addresses how self-stigma isolates the individuals affected into separate spheres of loneliness. This shows that the stigma of mental illness frequently closes the door to the everyday sharing of a natural therapeutic agency and isolates us as prisoners in an often anxious and paranoid state of seclusion. Another painful dimension emanates when mentally challenged persons are kept under house arrest in chains and locks. The person is kept out of public view due to the stigma associated with mental illness.

Some caregivers prefer to take their sick to the home of native doctors (traditional medicine homes) who use herbs and unorthodox/alternative means like music, dance and role play for healing. This takes us back to the demonological era instead of informing us on the lack of and relevance of positive psychology and psychological well-being. The cases of spiritual homes are also evident. Though many such charlatans are parading to have powers to heal and deliver, they are the ones that perpetuate the level of ignorance among unsuspecting victims. Despite all these fraudsters, certified homes that use unorthodox alternative means for healing, well-being, and restoration still exist. To illustrate, in a play like Esiaba Irobi’s *The Colour of Rusting Gold*, Irobi describes the protagonist Otagburuagu as an expert in all cases of mental illness; ironically, as the conflict of the play is being resolved, Otagburuagu, the psychic doctor of mentally deranged persons becomes mad, due to enhanced post-traumatic stress disorder. The mad person he healed goes to the community to announce that Otagburuagu has become angry.

The exciting atmosphere drama creates on the page or the stage reveals, to a large extent, its role as an active ingredient and propellant in creating an atmosphere of awareness. *Spokesman for the Oracle* and *The Colour of Rusting Gold* Ikem and Otagburuagu receive immediate attention, unlike the case of Anowa, as we would discover.

Anowa – Alternative Reading

Anowa’s case is harrowing and agonising. Even though Anowa does not evoke the right emotions due to her nature of being assertive, the story of Anowa, derived from a famous folktale that cuts across various African societies, attempts to checkmate the excesses of children and young adults and teach the correct values. Kefu Kathrac, in *Politics of the Female Body: Post-Colonial Female Writers of the Third World*, writes that “in Ama Ata Aidoo’s *Anowa*, the protagonist is ostracized socially because she is unable to have a child (though the text implies her husband is sterile).” (160) Kathrac was possibly looking at the subjection of women to all blames in the family. Though Anowa has no child, the community never tried to assess the cause of the childlessness in the family. The society concludes that the woman is responsible for the failure, exonerating the impotent husband. Julia Udofia in *New Feminism: Gender*

Complementarity in Akachi Adimorah-Ezigbo's Fiction also admits that "in the same vein, Badua in Ama Ata Aidoo's *Anowa* declares that a woman's roles are "marrying, bearing children and tending a farm" and that for her man to be man, a woman must not think or talk." (85) This is similar to Kathrac's view above. Udofia looks at how women are restricted in the family and society. The perspective is still on gender inequality and the deprivation of rights. Eldred Jones points out, "Anowa and Kofi Ako represent ideas in conflict. Ultimately, they are both destroyed since, to get married, they burnt their boats socially and set out to provide for their world. When they fail, a whole world lies in ruins around them." (30) Eldred's view mirrors a once beautiful love that soared after marriage. His analysis gears towards marital conflicts and their dangerous consequences. Anowa and Kofi, against families' objections, got married but found themselves in a conflict they could not resolve.

Carole Davis dwells more on Anowa's socio-religious responsibility and failure to rise to the occasion. She writes that:

Yet, in my view, the ritual power that women get in the "mother-healer" position does not translate into the social and political power by which the international community operate. Thus, Anowa is a dislocated figure who has rejected all the possibilities for containment or power within her society... (57)

Davis suggests, thus, that Anowa is believed to be chosen by the gods as their messenger. Therefore, the community, disregarding her right to choose freely, tries to force the "mother-healer" responsibility on her. If she had become a priestess, Anowa would have belonged within the traditional ritual and religious frameworks that contained her strength and unusual creativity. Without that containment, Anowa becomes a danger to herself and society. Kathrac buttresses this view when he infers that,

Expression or denial of sexuality is controlled through a patriarchal and political interpretation of traditional religion and ritual, as in Aidoo's *Anowa*, whose mother prevented from being betrothed as a priestess and whose inability to bear children is blamed on this contravention of tradition. Anowa "had the nibble feet of one meant to dance for the gods. (164)

Instead of allowing Anowa to suffer the consequences of her strong-headed nature, she possibly repents her perceived negative attitudes and becomes a changed person. Aidoo does not do that, even when Anowa is abandoned, firstly for not living up to societal demands of childbearing; her society attempts to alienate her from her marital space to dislocated places. If Aidoo maintained the folktale in her play, the play may not have evoked the right emotions and would have been melodramatic. Anowa's ability to carry the tragic situation, which orchestrated the sad effect, helped drive the play's message.

Who gives the woman her voice? Depending on society, the woman may be allowed to speak or not. Part of Anowa's crime was that she had a voice in a parochial, chauvinistic, patriarchal society. Saving the woman leads us to question the position and relevance of women as to who she is and the role they are assumed to play or not play. Negotiating the position of women will probably make us rethink our wish to save the woman who is also our mother.

Conclusion and Recommendations

This paper argued for the contribution of drama in health humanities with particular attention to positive psychology, psychological well-being, and mental health. From the evidence collected from both dramas, we discovered the progression and the artistic upshot of devising theatre studies based on superstitions, stigma, psychiatric evidence, and narratives, and the payback was observed. We also discovered that the care people receive (social support) determines their immediate and sustained positive psychology and psychological well-being. The different mental health situations found in the play were isolated and discussed. Aidoo's and Nwabueze's understanding of cognitive symptoms and consequences will improve readers' awareness. The dramatic piece highlighted the subjective damage caused by types of superstition, lack of social support and stigma by trying to increase the mental health literacy, positive psychology and psychological well-being of the public through an educational intercession which gives voice to both the individual and the caregiver. Though the two approached the subject matter from variant perspectives, the reconciliation discovered is that mental illness is severe, and the level of poverty and disillusionment in most low-income or middle-income earning nations propel this situation. Performance knows how to hoist social-psychological issues that like the weight of concern and the need for public opportunities for caregivers to talk concerning their incident of having a family member diagnosed with mental illness. Depression, stress, stigma, hunger and sometimes superstition were all identified and discussed. From the ongoing, the collated reflections on the performance observed that transforming narratives from page to stage can stimulate debate, enhance learning, promote positive psychology, and improve psychological well-being, mental health, and health humanities.

The paper recommends deeper cross-disciplinary collaborations between the humanities-theatre and the social sciences-psychology. This collaboration will enable fresh perspectives to scholarship and reduce mental health situation incidences in society.

This study also advocates for a better social support system since most survivors of mental health challenges are often confused by superstition and afraid of stigma-free zones, knowledge about positive psychology, psychological well-being, and mental health motivated by health humanities will build better conversation around mental health situations.

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