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Lifting the Silence:

Ethical Representation of Mental Illness in

Contemporary Young Adult Fiction

A thesis

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Abstract

Young adult (YA) fiction is a fast-growing area of literature that is constantly responding to commercial pressures and the demands of its growing audience. Although it has a large commercial popularity, the critical focus on YA literature is lacking in some areas. As YA literature expands and increasingly engages with more complex issues, such as mental illness, there is a need for rigorous analysis of the ethical issues and questions raised by this fiction.

In answering recently scholarly calls for critical analysis of YA literature, this thesis considers two novels that fall under the often-used label of the “problem novels”—Neal Shusterman’s *Challenger Deep* (2015) and Sophie Kinsella’s *Finding Audrey* (2015)—in order to explore ethical representation of mental illness in YA fiction. The discussion is informed by the scholarship of Wayne C. Booth, whose *The Company We Keep: An Ethics of Fiction* foregrounds the ethical responsibilities of both writer and reader, and Mike Cadden, who seeks to improve the power dynamic between reader and writer through the use of double-voiced discourse theory.

This thesis is a creative practice thesis and the exegesis will be followed by a YA novella narrated by a teenage girl attempting to recover from an anxiety disorder and regain control of her life. The creative component is closely linked to the exegesis not only in terms of genre and theme, but also in its engagement with ethical issues. The creative component highlights that ethical representation is possible and beneficial, but also reveals that double-voiced discourse is a challenging theory to apply as it requires the writer to constantly step back from the narrative in a way that disrupts immersion in the creative process.
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Introduction

Throughout the 2000s, young adult (YA) literature has expanded at an incredibly fast pace. The popularity of the genre is highlighted, in particular, by the million dollar franchises of the Harry Potter and Hunger Games sagas. These narratives plunge readers and viewers into alternate worlds of magic and dystopian nightmare, but many of the most popular YA texts deal with real-world events and emotions. This is epitomized by staples *The Fault in Our Stars* (2014), *The Perks of Being a Wallflower* (2012), and *Now is Good* (2012), all films based on bestselling novels, which are centrally concerned with teen angst and internal, inter-personal and societal crises triggered by the difficulties of confronting severe illness. While *The Fault in Our Stars* and *Before I Die* focus on severe physical illness, *The Perks of Being a Wallflower* turns attention on an equally challenging but much less represented form of suffering: mental illness. This thesis focuses on two very recent YA novels that likewise profile mental illness: *Challenger Deep* by Neal Shusterman, 2015, and *Finding Audrey* by Sophie Kinsella, 2015. Given that narratives of this kind are becoming more prevalent, and are being read not only by their target YA audience, but also by adults and children, it is vital to interrogate the depiction of mental illness in such narratives and to analyse the complex ethics of weaving fictional narratives, at least in part designed to entertain, out of such fraught and difficult subject matter.

Surprisingly, very little has been written about the ethics of presenting YA narratives (Coats 316); in fact the YA area of literature has been largely overlooked by scholars for quite some time. Recently there have been calls for more substantial and sustained criticism, with Karen Coats complaining:
Young adult literature exerts a powerful influence over its readers at a particularly malleable time in their identity formation, and yet we still pay more critical scholarly attention to Antigone (Sophocles, c. 442) and The Great Gatsby (Fitzgerald, 1925) than we do to the potentially life-changing books our teens read on their own. (Coats 315-16)

In this thesis, I propose to answer the call to provide more rigorous analysis of YA fiction by examining the representation of mental illness in YA narratives, with a particular focus on questions of ethics. This endeavour is twofold; firstly, the analysis will explore the techniques authors can employ to ensure their depiction is ethical, realistic, and helpful to readers. Secondly, the reverse side needs to be acknowledged, with an interrogation of the way in which some popular YA novels promote potentially unethical ideas. Challenger Deep by Neal Shusterman and Finding Audrey by Sophie Kinsella, my chosen texts, were both written in 2015 and thus provide a very recent engagement with mental illness. In each novel, the teenage protagonist battles against a different form of mental illness, schizophrenia in Challenger Deep and social anxiety disorder in Finding Audrey. The analysis of these two very different novels and very different conditions ensures that the discussion can be nuanced and wide-ranging.

**Critical Approaches: The Question of Ethics**

My analysis is grounded in the work of two scholars, each concerned with different aspects of ethics. Mike Cadden focuses on a particular narrative technique—double-voiced discourse—in his discussion of the ironic relationship between reader and writer. Wayne C. Booth, in The Company We Keep: An Ethics
of Fiction, ranges more widely, canvassing the ethical responsibilities of readers and writers, and the challenges of defining what is ethical.

Cadden uses Bakhtin’s double-voiced discourse theory to tackle the ironic relationship between the YA author and the YA reader. This ironic relationship appears as the writer of YA fiction is establishing an authentic YA voice (Cadden 146). As these “age-based” novels are created by adult writers attempting to portray a teenage voice that is authentic, it becomes “inherently ironic” as this adolescent voice can and will never be “truly authentic” (Cadden 146).

Double-voiced discourse is defined by Cadden as a text that “represents voices as equal and provides alternative interpretations that offer, in their aggregate, no single and final answer for the reader” (147). More than one ideological position must be working in the text at the same time without “any one being in obvious control” (147). This does not mean the reader is not allowed to decide for themselves which position is the correct one (147), though, the text itself must not “clearly” argue “for that position” and must allow other positions a platform to be considered (147).

If a text is single-voiced, on the other hand, Cadden claims that one position is “dominant and didactic” and no other “legitimate” position has been discussed or represented (147).

Cadden contends that in terms of YA fiction, the writer does not provide readers with the tools necessary to “contest the perspectives or investigate alternative points of view” (Cadden 147). As most YA works are presented in first person, they often present limited and unchallenged singular perspectives “that the novelist knows to be incomplete and insufficient” (Cadden 146). Cadden does not believe that authors are doing this to “abandon” the adolescent reader (146),
instead the author “counts on the reader’s failure to see, understand, and subsequently regret the adult’s ironic construction of an ‘authentic’ adolescent’s voice” (146). But if the author were to instead help the YA reader “recognise the limits of the young adult consciousness…the author ethically trades the visibility of irony at one narrative level for the irony at another” (146). This matters, Cadden continues, due to the “top-down… power relationship” between adult writers and YA readers (146). This requires a need for “equal… power relations between the major characters within the text so that the young adult reader has the power to see the “opposing ideologies at play” (146). Without the ability to participate equally, the YA reader has “confident unawareness” (147).

While Cadden does not use double-voiced discourse to analyse the ethical representation of YA fiction but instead to ease the ironic relationship between adult writer and young adult reader, I believe this method could be beneficial in order to improve ethical representation. It should be noted that I do not argue that it is specifically needed for ethical representation, though.

In this thesis I will focus on one single-voiced text (*Finding Audrey*) and one double-voiced narrative (*Challenger Deep*) in order to show how double-voiced discourse can allow for improved representations of mental illness in YA novels.

Wayne C. Booth’s *The Company We Keep: An Ethics of Fiction* offers a more wide-ranging analysis of ethics in fiction and why ethical critique should be central to our engagement with fiction. Although his work does not specifically analyse ethics within the YA area of literature it provides a useful and necessary framework for discussion. Booth’s work does not define what makes a work ethical or unethical, but instead offers a series of insights into how these can be defined contextually and how these portrayals affect us as we read. The section of
Booth’s work in which he interrogates the ethical responsibilities of both reader and writer is of most direct relevance to my discussion.

It is important to understand that Booth does not mean for ethical to simply suggest the correct choice:

An ethical choice is for many strictly the right choice, the opposite of ‘unethical,’ just as a moral choice is the opposite of an immoral choice. For us here the word must cover all qualities in the character, or ethos, of authors and readers, whether these are judged good or bad. (Booth 8)

For some, an unethical act may be ethical, and vice versa. There is no way to accurately say if an act is truly unethical or ethical. Even though this is Booth’s belief, in my own analysis I will refer to some choices in the context of the novel as being potentially unethical. Of course, I cannot truly know whether an author’s choice is blatantly unethical, but I will show how these potentially unethical choices could have negative consequences not only for readers but for future YA writers in their current context. As Booth notes: “The fact that no narrative will be good or bad for all readers in all circumstances need not hinder us in our effort to discover what is good or bad for us in our condition here and now” (Booth 489).

As the ethical responsibilities for both reader and writer have grown and continue to, Booth admits that it is not difficult to understand why critics “have been tempted to reduce them to two: for the author, to make the work itself as good as it can be; and for the reader, to judge whether the work is in fact well-made” (Booth 138). When other ethical responsibilities are considered, which are similar to those we may find in other areas of life, it creates “complex conflicts and disharmonies” which disrupt the reason why we may have chosen to turn to art: as a way to escape these same ethical questions and responsibilities (Booth
138). Of course, all areas of criticism will at same point run into “controversy” or be challenged, as they are all “vulnerable to insensitive, unintelligent, or dogmatic practice” (138). But this is not a reason to disband with ethical criticism altogether, as Booth uses the example that even if “15 percent of all doctors” were ‘incompetent’ we would not give up on going to doctors (138). Of course, ethical responsibilities may be different for each writer and reader depending on their own expectations and needs, so it may not be right to simply narrow responsibilities down to generalised ideas.

Ethical representation of mental illness is necessary as these conditions often emerge during the teenage/adolescent years. If these illnesses find their way into teenagers’ lives more commonly than at other times, is it not necessary to educate teenagers on mental health to make them aware of any signs or symptoms, so they can ask for help before the illness reaches a detrimental state? Or if the illness has reached a life-impairing stage, should these narratives not allow sufferers to feel at ease hearing stories from other “people” who experience similar issues? I would argue, yes, and this is where the need for ethical representation becomes necessary. However, these are not the only concerns that need to be addressed. For example, do fictional works addressing difficult topics such as mental illness have an ethical duty to teach their readers, rather than simply entertain them? Booth’s general analysis of ethics in fiction tells us that simply stating that a novel is purely entertainment is wrong, and that on some level they are still didactic and teaching the reader. It would be unfair to pretend otherwise.
Gender and Representation

While representations of mental illness are the central concern of this analysis, these cannot be separated from issues of gender, in particular deeply ingrained gendered traits and stereotypes. Masculinity thus forms part of the discussion in the chapter on *Challenger Deep* and the perpetuation of passive female and active masculine traits is of core importance to the chapter on *Finding Audrey*.

Thomas W. Bean and Helen Harper discuss how the enforcement and “performance” of traditional heterosexual masculinity can have dire consequences not only in fiction but also in real life. The discussion of masculinity withinYA novels, especially those dealing with mental health issues, is extremely important due to changing expectations put on young men as they grow, especially in terms of expressing themselves emotionally. Mental illness, which already expects its sufferers to deal and recover in silence, is especially pertinent to young men as the expectation created by traditional masculinity is to avoid talking about emotion or feelings which could result in harmful repression of mental illness. As Bean and Harper state, these consequences to not performing traditional masculinity could also range from “name-calling to physical assault to suicide” (13).

YA novels that depict mental illness is a sub-genre that is commercially dominated by female authors and female protagonists, probably due to the stereotypical and harmful belief that discussing emotions is simply a feminine trait and not found in the performance of traditional masculinity (Oransky and Marecek 220). *Challenger Deep* provides a necessary and long overdue corrective, challenging stereotypical ideas about masculine performance through protagonist Caden’s intense discussion of his mental illness and willingness to open up about his condition and his emotions.
"Finding Audrey" is a more conventional narrative that links emotion to the feminine. The novel relies on deeply ingrained gendered tropes (specifically fairy-tale tropes), but instead of transgressing these it further problematises ideas around young girls and mental illness. While Karen Coats claims that “books about girls” with “relationship-intensive plotlines” are gone (318), this could not be further from the truth in "Finding Audrey." Instead the novel unwittingly reaffirms feminine stereotypes about passive women being in need of rescue by the male love interest. This is problematic. Bean and Harper believe young adult literature is the perfect platform to encourage young men and women to think about how gender roles affect their lives and how they are all expected to perform their genders (12). I agree with their assessment, especially in regards to the multiple ways stereotypical gender roles can negatively affect young adult’s lives, such as not reaching out for help when dealing with mental health problems.

**Genre Limitations and Possibilities**

"Challenger Deep" and "Finding Audrey" disrupt and expand the common genre structures associated with YA “problem novels” as they are so often referred to, which in turn affect the ethical representation of mental illness. Problem novels, “which rose to the prominence in the 1970s”, tend to involve “first person narration, an adolescent protagonist, and taboo subject matter” (Snider 299). Of course, problem novels in the 1970s are different from contemporary problem novels. Earlier problem novels tended to focus more on the subject matter (such as drugs, sex, and running away from home) “rather than telling a story” (Smith 8), whereas contemporary problem novels “feature stark themes, complex plot
lines, and ambiguous outcomes” (Smith 9). The latter is certainly an accurate definition for *Challenger Deep* and *Finding Audrey*.

*Challenger Deep* uses the serious tone most commonly associated with novels that deal with mental illness, with very little room for humour. The difference between *Challenger Deep* and similar YA novels is that while the main character, Caden, feels the full effect of the illness and the subsequent side-effects—which are mentally difficult to handle—he also challenges his own views rather than being controlled by them. But this usage is disrupted by the fact that the novel fuses the real with the surreal by Shusterman’s use of the main character’s hallucinations as a narrative tool. The fusion of the real and the surreal could be driven by the popularity of fantasy/magic and dystopian narratives (which often employ fantasy driven elements), which base their stories on something that feels real and relatable to the audience. This idea is certainly not uncommon as Karen Coats acknowledges: “YA texts tend to appear in thematic clusters, revealing an intertextuality that responds to the market, which in turn responds to prevailing cultural and personal fantasies” (318). The combination of this with the YA problem novel makes for an interesting mix.

*Finding Audrey* however, uses the uncommon tool of comedy to disrupt the serious tone so commonly applied to the genre. Comedy in YA literature, as Pam B. Cole acknowledges, was lacking in the years leading up to the 1990s causing critics to voice “concern over the lack” (182) This lack, Cole continues, is largely due to the mainstay of the “problem novel” (182) and the genre’s “heaviness and grittiness” (182). Cole believes, however, that this has changed in the twenty-first century: “Today, however, the young adult market has an abundance of humour; many are romantic spoofs or coming-of-age stories about sexual identity and
family relations” (182). Perhaps this is due to the area of literature expanding allowing more need for other genres to enter the fray.

With the emergence of comedy into the YA market, the need to discuss and teach humour to young adults becomes more apparent. Comedic novels have often been left out of the classroom, because comedy is often seen as “fluffy or unsuitable for classroom reading” (Cole 183). But there are plenty of reasons why a case can be made for the discussion of comedy in the classroom, as Cole notes, “Effective humor reduces melodrama and the likelihood of a singularly driven plot” (193).

Cole also highlights how humour is able to help readers connect with the protagonist instead of distancing them: “We admire a character who can laugh much more than a character who constantly laments” (193). Does a character with mental illness who laughs at their position make their story more relatable than someone who laments? This question underpins part of my discussion of Finding Audrey.

Both of my chosen novels also employ common tropes, which drive the plots of each respective text. In Challenger Deep the trope of the boy’s own adventure is used to subvert traditional masculinity stereotypes and stigmas related to schizophrenia. However, in Finding Audrey the princess in the tower trope reinforces traditional stereotypes placed on women. Both topics will be expanded upon in the subsequent chapters.

This thesis is a creative practice thesis, which begins with an exegesis and then shifts to the creative component. Both parts of the thesis are tightly linked through their focus on representations of mental illness in YA fiction. I begin with an analysis of Challenger Deep that demonstrates that ethical representation of
mental illness is possible, particularly when specific conditions are discussed with knowledge and when the author writes with empathy and a desire to enlarge understanding. Shusterman’s use of double-voiced discourse and interrogation and subversion of masculine stereotypes makes for a layered and perceptive text. In contrast, Finding Audrey is plagued by gender limitations, with the princess in the tower trope not only perpetuating reductive stereotypes of the damsel in distress but also creating an unethical narrative in which love is presented as the cure to mental illness. While Kinsella, like Shusterman, has done considerable research and helps to enlarge understanding of social anxiety disorder through her fiction, the gaps and silences in the narrative are likewise problematic. After chapters on each text, my Conclusion embeds the creative component in the broader context of myself as patient, reader, scholar, and creative writer.
Chapter One

*Challenger Deep: Journeys and Dualities*

Escapades on pirate ships, daring battles with sea monsters, and the hunt for long-lost treasure at the bottom of the ocean. Many children dream of these adventures, but as Caden Bosch descends into his illness this becomes his ‘reality’.

Neal Shusterman’s *Challenger Deep* is a complex and nuanced narrative, succeeding in its attempt to entertain while simultaneously enabling the reader to learn about the difficulties of living with mental illness. Through Caden’s journey with schizophrenia, Shusterman has created a fair yet realistic representation of mental illness. The complex narrative style, and use of sustained and sophisticated symbolism, challenges its young adult target audience. *Challenger Deep* is a novel that succeeds in being ethical, but the question I pose, is how does Shusterman create an ethical work of fiction? I pose this question in the hope that it may lead to an understanding of how future novels in this area may likewise broaden representations and understandings of mental illness in YA fiction.

Before turning to Shusterman’s complex narrative techniques and his subversion and transgression of gendered stereotypes and tropes, it is necessary to have a clear understanding of the mental illness (schizophrenia) his protagonist confronts and the author’s motives for writing.¹

*Challenger Deep* is an extremely personal novel for Shusterman. In the “Author’s Note”, Shusterman acknowledges his son’s battle with schizophrenia, in which he found his own “piece of sky”, and the loss of his closest friend to suicide who also dealt with the illness (Shusterman “Author’s Note”). Here,

¹ Even though the novel does not explicitly state Caden’s illness as being schizophrenia and tries to avoid the label, the book (in the publication details page) is classified under schizophrenia, so to avoid confusion Caden’s illness will be referred to as such.
Shusterman has acknowledged two outcomes, one unfortunate and painful, the other hopeful and uplifting. This reflects Shusterman’s hope that the novel will comfort those who have been there, letting them know that they are not alone. We also hope that it will help others to empathize, and to understand what it’s like to sail the dark, unpredictable waters of mental illness.

(Shusterman “Author’s Note”)

There are two messages Shusterman is relaying here. The first is that he intends this novel to provide comfort and help to those who also have the illness, and the second that he wishes the novel to help the outsider (those without the illness) to empathise with those with the illness and to broaden their understandings around schizophrenia, removing harmful stigmas and stereotypes. Throughout the chapter, Booth’s theories about ethical writing and ethical reading will be a connecting thread, while Mike Cadden’s double-voiced discourse theory will be especially pertinent.

“The label means nothing”: The Depiction of Schizophrenia

To analyse Shusterman’s ethical depiction of schizophrenia, firstly the structure of the novel must be discussed, as so much of the novel’s depiction of the illness relies on this structure.

*Challenger Deep* has a complex dual narrative structure. This is due to Caden’s schizophrenic hallucinations, which take up half of the novel, providing a distorted mirror image that echoes Caden’s reality. These hallucinations focus on one specific scenario: Caden’s journey on a ship to Challenger Deep, the deepest point of the Mariana Trench. The hallucinations allow Shusterman to create a work that does not just focus simply on the often-depressing realities of living
with mental illness, but instead allows him to provide an insight into living with schizophrenia through an exciting narrative of pirate ships and treasure hunting. As noted in the Introduction, this enables Shusterman to adhere to what Booth terms the “ethical responsibility” of the writer and make *Challenger Deep* simultaneously entertaining and didactic. Caden’s hallucinations provide important symbolic characters and images, which help guide him on his journey through his illness and provide a crucial underpinning structure.

The first key symbol is the sea that Caden travels across. This is filled with many monsters, such as the Crestmares above the surface (Shusterman 232), and the Abyssal Serpent, which lurks below the ocean ready to attack him: “That…was the Abyssal Serpent—a very formidable adversary. Once it sets its eye on you, it will track you until you, or it, are no more” (Shusterman 203). This is representative of Caden’s mental illness and the constant threat of being submerged and consumed by the condition.

Next, the pirate ship represents Sea View Memorial hospital, the hospital where Caden is receiving treatment for his schizophrenia. This is the place where his journey through his illness is at its peak in reality, and also a number of the patients and staff are symbolised as crew members in his hallucinations. With the threat of the monsters and turbulent sea below him, and the instability of the Captain on the ship, and his doubts as to whether or not to trust the ship’s parrot, it is easy to see how Caden feels constantly on the edge, unsure of the safety the ship provides and, by extension, the hospital.

The Captain of the pirate ship is a symbol for the allure of the complete descent into schizophrenia. We see this allure exemplified by the Captain’s real-life counterpart, a homeless man Caden met on holiday in his past: “I am terrified of
the man in the doorway…yet there is something so compelling about him that I feel I must have a closer look” (Shusterman 293). It can be assumed that he also has schizophrenia due to the man’s actions and because the hallucination version of the Captain symbolises someone who has completely descended into the illness. In the reality version of the Captain this is noted by the similarities in eyes between himself and Caden: “His eye is bright and alert…I know that means he’s “off.” Maybe worse than “off.” But I can’t help but notice that the color of his eye isn’t all that different from my own” (Shusterman 293). The word “off” I argue is standing in for either schizophrenia or a schizophrenic-like illness.

The parrot is representative of Dr. Poirot, Caden’s main doctor in the hospital. This can be discerned from the similarities of the names and also the small details that are similar between the characters. Caden is unsure whether or not he can trust the parrot (Dr. Poirot) over the Captain (illness). He tells Dr. Poirot: “I believe you want to help me…But in five minutes I might not believe it” (Shusterman 178). This shows his uncertainty and fears of placing his trust in Dr. Poirot and the parrot.

Reality and hallucinations frequently overlap. For instance, the Captain and the parrot represent Caden’s battle between succumbing to his illness (Captain/hallucination captain), or receiving help (Dr. Poirot/parrot). This is highlighted by the fact that he has to murder one or the other—“On one side the parrot and I plot mutiny…On the other side, the captain and I plot the parrot’s end” (Shusterman 132)—in his hallucinations, effectively choosing between succumbing to his illness, or healing in his reality.
The dualities in contention (thought/reality, captain/parrot) provide a structure that allows for a discussion that successfully removes many of the stigmas and stereotypes associated with schizophrenia.

*Challenger Deep* tackles these stigmas and stereotypes through its representation of symptoms, treatments, and community outreach within the novel. By raising these ideas, *Challenger Deep* aims to enhance understandings and empathy surrounding the illness, and subsequently creates a novel that is more ethically viable in the “here and now” (Booth 489) than novels that repeat stigmas and stereotypes.

Stigma has a deep-seated association with schizophrenia in terms of societal beliefs and self-stigmatisation by sufferers. Mason and Miller refer to this stigma as being “nearly as instinctual as fear of the dark” (Mason and Miller 88-89). They also acknowledge that the diagnosis of schizophrenia affects societal attitudes towards sufferers causing “an unwillingness to interact with those” (Mason and Miller 75) who have the illness. This often results in those with the illness having “feelings of shame and self-blame” (78) and if this then leads to “hopelessness, depression, and poor adherence” (78) these feelings can disrupt the sufferer’s ability to heal.

Types of stigmas that are associated with schizophrenia are that those with the illness are “frequently violent, childlike, or irresponsible” (Mueser and McGurk 2069). These stigmas can then exaggerate beliefs surrounding the level of danger schizophrenic patients pose to society and contribute to further negative societal attitudes (Mueser and McGurk 2069). This can then lead to discriminatory practices in terms of the work-place, and finding housing (Mueser and McGurk 2069). These stereotypes, that label schizophrenic sufferers as somehow
dangerous, come from a place of “ignorance and generalizations” (Miller and Mason 64). But stigma can have even more damning consequences for sufferers, such as denial of the illness entirely, which then leads to them delaying seeking help (Mueser and McGurk 2069). So it is important that authors challenge these stigmas.

For example, *Impulse* a YA novel by Ellen Hopkins, which at its core wishes to expand understandings of mental illness, unknowingly promotes common stigmas surrounding schizophrenia, which can be seen as unethical.

The mother of Vanessa, the novel’s female protagonist, has severe manic-depressive disorder, and schizophrenic like symptoms such as hallucinations,\(^2\) which results in people referring to her as “schizo” (Hopkins 92). The stigmatising of schizophrenia is apparent as the mother is depicted as violent, beating her daughter during her episodes: “Sometimes, to make herself/feel better, she took/to hitting things with her fists./Walls. Doors. Herself./Me” (Hopkins 94). Here manic-depressive disorder and by implication, schizophrenia are being stigmatised by presenting those with the illness as physically violent towards others. The novel is also unhelpful in its blurring of the two conditions, resulting in further confusion and stigmatisation.

While of course there are some cases where those with these illnesses may be violent, the continuous portrayal of them as violent further entrenches these stigmas, whereas Shusterman’s portrayal allows for a realistic discussion of the illness aiming to remove these stigmas, creating an ethical novel.

Challenging these stigmas and stereotypes in an ethical manner is exactly what *Challenger Deep* sets out to do. Shusterman’s personal awareness and experience

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\(^2\) The reader is never told whether Vanessa’s mother actually has schizophrenia.
of the condition enables him to provide an accurate discussion of the illness, but he does not let the story push a single agenda, as double-voiced discourse aims to avoid, allowing Caden and the audience to question his own beliefs as he lives them. Shusterman’s creation of space in which his audience can question what they are reading promotes an ethical response to the novel.

An accurate representation of schizophrenic symptoms is necessary as, for a lot of teenagers who read these novels, this may be their first point of interaction with ‘people’ who have similar issues to their own. This message is handled extremely well by Shusterman in *Challenger Deep* where Caden does not label his illness in his narration, but leaves it open to interpretation:

Schizophrenia, schizoaffective, bipolar I, bipolar II, major depression, psychotic depression, obsessive compulsive . . . The labels mean nothing, because no two cases are ever exactly alike. Just because we have the ability to label it, doesn’t mean we really know what’s in the box. (Shusterman 298)

Not only does this allow readers who may experience similar symptoms to Caden to connect with his story, but it also shows the complex nature of mental illness and the difficulty that comes with diagnosing. The experiences of those with mental illness are never the same as one another, of course, but the ability for readers who are dealing with the same illness to connect with the protagonist is still necessary.

It is extremely important that the information that is being given to young readers is accurate and true, not only for ethical reasons, but because they are at an impressionable stage where they may still be shaped and influenced by the information they receive. Variation, though, is also necessary, because as stated
before no two stories are the same. As well as the representation of symptoms, the discussion of medication and treatment is also very important.

Schizophrenia is a life-long “major mental illness” (Mueser and McGurk 2063), which generally begins its onset between “adolescence and young adulthood” (Miller and Mason 38). Its symptoms, according to Miller and Mason, can be categorised into three groups: positive, negative, and cognitive symptoms (41).

Positive symptoms can include disturbances of thought processes, delusions, and hallucinations (Miller and Mason 41-42). Negative symptoms may include lack of enjoyment, low energy, low motivation, and inability to make and keep friends (Miller and Mason 43). And cognitive symptoms “refer to difficulties with concentration and memory” (Miller and Mason 43) such as poor memory and concentration, disorganized thinking, slow thinking, and difficulty expressing thoughts (Miller and Mason 43).

In Challenger Deep, the main symptom Caden experiences are his hallucinations of the ship, which are present throughout the novel, mirroring his reality. Hallucinations are defined by Miller and Mason as “sensory perceptions that have the compelling sense of reality of a true perception, but that occur without external stimulation of the relevant sensory organ” (44). They can include auditory, visual, olfactory, tactile, and gustatory hallucinations (Miller and Mason 44). Caden’s hallucinations seem to mostly be visual, so are the only type that will be discussed here, but he does acknowledge that he occasionally experiences auditory hallucinations: “There are the voices…when it’s really bad” (Shusterman 163).
Delusions, although not as pervasive as Caden’s hallucinations, are still a prominent part of the story. Miller and Mason classify delusions in relation to schizophrenia as being false beliefs: “You think someone wants to hurt you even though this is not true” (44). This example is very similar to the one found in *Challenger Deep* when Caden believes a boy in his school wants to kill him: “Caden… if you don’t know him, and he’s never threatened you, and all he’s ever done is pass you in the hallway, what makes you think he wants to hurt you?” (Shusterman 12) Even though Caden has no reason to, he thinks this boy he has never met intends him harm. This false belief interferes with Caden’s life, causing extreme paranoia and anxiety, and, if the delusion was not addressed, it could also interrupt his ability to attend school.

In terms of the negative symptoms, Shusterman portrays lack of enjoyment, low energy, and low motivation (Miller and Mason 43) within the text, but they do not play as large a part in the novel as Caden’s inability to keep his friends. As he descends further into his illness and his symptoms become elevated, his best friends become confused and alienated by his changing behaviour:

Max and Shelby don’t come over anymore for our game-creation sessions.

Max doesn’t come at all even though my house has been like a second home to him. He even avoids me in school. (Shusterman 99)

Although his friends become distanced by his changing behaviour, they still care. Shelby confronts him about his change and immediately assumes Caden is abusing drugs and alcohol (Shusterman 100). Of course, even though Caden is not, he has no way to tell Shelby what is actually going on with him as he does not know himself: “I’m fine! I’m not doing anything” (Shusterman 100). Despite
this, Shelby still expresses support: “When you feel like talking about it, I’ll be here” (Shusterman 100).

This scene expresses the need for more public awareness of schizophrenia, as Shelby’s first instinct is to assume drug and alcohol abuse rather than Caden’s mental health. This lack of knowledge leaves Caden’s friends in a place of confusion, not allowing them to help or guide their friend in the right direction. Shusterman’s choice to acknowledge this common misunderstanding is important in the ethical portrayal of mental health, as although common perceptions need to be challenged, acknowledgement of societal beliefs and misunderstandings is also necessary.

When it is revealed that Caden has schizophrenia and Shelby visits him in the hospital, the guilt and upset she feels at believing he was abusing drugs is plain to see:

“I’m sorry for thinking that you…you know.”

“Thinking that I…?”

“That you were using.”

“Oh. That.” I pull back pieces of the last conversation we had in school. It feels like several lifetimes ago. “I was using,” I tell her. “And God was my drug dealer.”

She doesn’t get it…She has tears in her eyes now. “Stay strong Caden.”

(Shusterman 164)

Although the confusion on Shelby’s part is still apparent in the scene, there is also a large amount of guilt for not knowing what was going on with Caden. Perhaps if there was more public awareness this would not be the case, and Caden’s friends would also not feel as ostracised.
The final symptom group, cognitive, is also purposefully placed throughout the text, but to a lesser degree than the positive symptoms:

He taps his pen on the desk thoughtfully for a moment. It distracts me and I forget not just the gist of the conversation, but its entire direction as well. It’s one of those days. What were we talking about? Dinner, perhaps?

“Mutton,” I say.

“Mutton,” he says. “What about mutton?”

“I can’t be sure, but I think we’re eating the crewmen with no brains.”

(Shusterman 195)

Caden’s inability to concentrate, his poor memory, and his disorganised thinking are all very apparent in the above quote. Small distractions such as Dr. Poirot’s nodding and pen tapping distract Caden to a point where he is unable to concentrate on what he has just been asked. This leads to his poor memory, forgetting whether or not he has answered the questions. His disorganised thinking is mostly apparent as he forgets the entire point of the conversation and moves on to dinner talk. Obviously, these symptoms could be quite disruptive to someone’s life, but the patience and measured responses Dr. Poirot offers reflects the need for understanding, as it is not something Caden can control at this time.

Although there is no cure for schizophrenia, it can be treated with medication and therapy (Miller and Mason 50). Shusterman takes a measured approach in his discussion, neither promoting nor vilifying medication and its usage. He acknowledges the benefits, the negatives, the side effects and the fact that medication affects everyone differently. It seems he aims to educate rather than push an agenda.
Treatment plays an over-arching role in *Challenger Deep* with over half of the novel taking place in a mental health ward. We see both the medication and therapy aspects played out in the mental health ward to varying degrees. Caden’s doctor prescribes him with various medications through a trial and error way to find out what the best mix is for him. The main type of medications used to treat schizophrenia are antipsychotics, “with major effects on the reduction of psychotic symptoms and prevention of relapses” (Mueser and McGurk 2067).

Referred to as cocktails (Shusterman 25) in Caden’s hallucinations, the novel from the outset strives to portray an accurate representation:

> In addition to the occasional shot of Haldol, I now take four pills, twice a day. One to shut down my thoughts, another to shut down my actions. A third to address the side effects of the first two. And a fourth so the third doesn’t feel so lonely. The result leaves my brain somewhere in orbit beyond Saturn, where it can’t bother anyone, especially me. (Shusterman 169)

Here, some of the extreme (but necessary) effects of the medication can be seen, such as shutting down Caden’s thoughts and actions, with the first two medications, and the third and fourth treating the negative side effects that come with the first two.

Not only is medication represented in Caden’s reality, it is also symbolised in his thoughts: “Everyone here must find their own cocktail or you’ll be whipped soundly and sent off to bed. That’s how all nursery rhymes end here” (Shusterman 25). This refers to the fact that not all medications have the same affect on people, therefore it is necessary to find a cocktail, or mix, that specifically works for each individual. Being “whipped soundly” (25) refers to the meds being mandatory in the institution otherwise patients will be punished. And the “nursery rhymes”
(25), while not as clear, seem to reference the nurses who will enforce these rules, and hint at where Caden is (mental health hospital wing) before the novel has explicitly stated it.

Medication has a history surrounded by stigma and *Challenger Deep* accurately portrays this, even as it affects Caden: “the medication I so despise might actually be working” (Shusterman 243). Despite his desire to not have to take it due to the negative effects it has on his body, and his mind, Caden understands it is vital for him to learn to control his schizophrenia.

This stigma, in combination with the negative side effects creates a mindset of internal turmoil over whether or not those with the illness wish to use medication to treat their illness:

Sometimes you can see why you need the cocktail. Other times you can’t believe you even thought that. And so it goes, waxing and waning like a tide, both toxic and healing at the same time. (Shusterman 154)

Here, Caden acknowledges the need for his medication, but also his desire not to take them, “waxing and waning like a tide” (154). This inner turmoil fuelled in part by stigma can be incredibly dangerous as avoidance of treatments can often cause the illness to become more severe, or lead the sufferer to suicide in extreme cases, which is not unfounded as schizophrenia, especially untreated, has an increased risk of suicide (Mueser and McGurk 2064).

For some, especially those with schizophrenia, medication is important in improving their quality of life, rehabilitating them back to a point where they can live their life, or just to keep their symptoms at a level where they can cope. But Shusterman does not portray medication as being as simple as swallowing a pill. He highlights the side effects that can plague users often making the recovery
process difficult: “The numbness, the lack of focus, the artificial sense of peace when the meds first hit your system. The growing paranoia and anxiety as they wane” (Shusterman 154).

And often, with these side effects, comes the trial of different medications prolonging the wait until recovery can begin: “Everyone reacts differently to medication. That’s why Poirot keeps changing it up on you. He’s got to find the right cocktail” (Shusterman 200).

Sometimes this trial and error can be a hindrance to the recovery:

They bombard the whole body with bad crap, hoping it will knock out the disease, and leave the rest alive. The question is, will poisoning the voices kill them, or just make them really, really pissed off? (Shusterman 138)

“Poisoning the voices” can sometimes “make them really, really pissed off,” (138) in other words, heighten the symptoms. This is evident when Caden has an adverse reaction to the new medication Dr. Poirot prescribes him: “rapid heart beat and tremors”, incoherence, and “no memory” of his adverse reaction are some of the serious ill-effects Caden experiences (Shusterman 200).

While this is certainly a frightening portrayal, it is necessary in order to open the discussion of medication and its trial and error nature. Even though Caden has this adverse reaction, towards the end of the novel he accepts his need to take medication throughout his life in order to control the effects of his schizophrenia. The way Shusterman has discussed medication in his novel is important as he is allowing Caden to question his own worries about medication, but also showing the negative and positive sides of this form of treatment. The ability to question and see more than one side of the discussion is, again, important in the ethical representation of mental illness.
Medication is important in order to control schizophrenia, but Dr. Poirot also uses therapy to try and help Caden handle his illness. This comes in the form of one-on-one therapy and also group therapy with other adolescents in the ward.

Overall group therapy seems to be beneficial for Caden; this could be due to his close relationship with the facilitator Carlyle: “Carlyle is a good facilitator. He tries to be a fly on the wall, and lets us talk among ourselves, giving advice and guiding us only when he needs to” (Shusterman 210). Here, the patients are allowed to guide themselves in their discussion, allowing for agency within the teenagers to engage in therapy that works for them.

As Caden’s time in group therapy lengthens he becomes more confident in his thoughts and feelings. Over time this results in him being able to help others, in many respects thanks to his illness. Specifically, this is seen when Caden uses his art in group therapy to draw the other patient’s feelings rather than verbally express them when others are struggling (Shusterman 190): “They thrust their parchments before me, and I feverishly translate their feelings into line and color… Everyone claims that I’ve gotten them right” (Shusterman 193).

The group is clearly impressed by Caden’s talents and his ability to show their experiences through art.

In another instance, Caden confronts another patient, Alexa, in an insensitive manner during group therapy because of her refusal to move on from her past experiences:

Spoiler alert… The girl tries to kill herself, and her scumbag stepbrother takes off and disappears from everyone’s lives. It was a real tearjerker the first few times, but now it’s old—even for cable (Shusterman 211).
While this statement by Caden is particularly harsh, it seems necessary as no other tone is getting through to Alexa. But the way in which he tries to help her afterwards shows care and understanding, informing her to “never forget” what happened but instead to “process it and move on” (211), understanding the necessity of this in order to heal from what has happened and live a life not hindered by the event. For some, the sensitive approach does not work, and a tougher approach, like Caden’s is necessary. Not all forms of therapy work the same for everyone, just like medication.

This representation allows Shusterman to challenge stigmas and ideas that schizophrenia is a violent, unhelpful mental illness through concrete examples of how Caden helps those around him.

It should also be noted that Dr. Poirot uses one-on-one therapy to help Caden, in which Dr. Poirot takes a measured approach in order to help Caden on his journey: “Your parents and I— the entire staff here—we want what’s best for you. We’re here to help you get better. I need to know that you believe that” (Shusterman 177).

While showing the benefits of treatment is always important, Shusterman does not shy away from showing the possible dangers that come with refusing to take medication or not responding to therapy. The reader is able to witness the possible worst-case scenario when Caden’s roommate, Hal, tries to take his own life: “He took my plastic pencil sharpener,” I tell them. “He pried the little blade off the plastic part, and slit his wrists with it” (Shusterman 259). The act becomes personal to Caden as Hal used his art supplies to do it. Even though Hal does not lose his life (Shusterman 263), the shock consequences of avoiding doctor’s advice and medication has been explicitly made clear to the reader.
But despite what happened to Hal, Caden still chooses to not take his medication at one point, which leads to a near disastrous end. After choosing not to take his medication, despite strict instructions from his doctor to take the pills, Caden falls further into his illness, and further into Challenger Deep. As Caden states, he was “Cheeking” his “meds” (Shusterman 300), so that the nurses would not become aware that he was not taking them anymore.

In complete contrast to the negative consequences, *Challenger Deep* shows that correct usage and combination of medication can benefit someone with a schizophrenic or schizophrenic-like illness.

Carlyle, a young volunteer at the hospital, is schizo-affective, but through finding the right mix of medication he is able to live a life that is not severely hindered by his illness: “I’m cool as long as I’m on my meds. Learned it the hard way, but I learned. Haven’t had an episode for years” (Shusterman 229). The clear focus on the need for medication in Carlyle’s life in order to keep his illness under control is important.

Carlyle is an example of someone who has persevered through the difficult times and come out the other side with successes in life ranging from his degree in psychology to his job as a game developer, which he does when he is not volunteering at the hospital (Shusterman 229). The fact that he is a game developer is an intriguing trait as not only could it be a way for Shusterman to connect with the young audience, but it also coincides with Caden’s dream of making games, the RPG game project he and his friends work on in the beginning of the story.

This connection between Carlyle and Caden is definitely not a coincidence. As stated before, Carlyle is an example of someone who has stabilised his illness, but
more specifically he is an example of how healthy Caden could be if he can control his illness. Carlyle even reinforces hopeful messages to Caden stating, “Just because it’s a long voyage, it doesn’t mean you’re on it forever” (Shusterman 229). Within this quote, the “long voyage” symbolises Caden’s own personal journey through his illness.

An important but subtle message that is relayed throughout the novel is the importance of hearing stories by others who have dealt with the same mental health problems. These messages are important to combat another aspect that can often affect sufferers from getting help: stigma.

Caden’s story also acknowledges how mental illness not only affects the individual involved, but also their friends and family.

Most notably, the reader is able to see the effect on his family: “Right now it sucks to be me—but until now, it never occurred to me that it also sucks to be them” (Shusterman 266). A large part of Shusterman’s ability to acknowledge this difficulty on families, we can healthily assume comes from his experience as a father of someone with the illness.

Although Caden’s parents want to help their son more than anything, they are completely helpless in the situation: They want to do something—anything—to help me. Anything to change my situation. But they are as powerless as I am. The two of them are in a lifeboat, together, but so alone. Miles from shore, yet miles from me. The boat leaks, and they must bail in tandem to keep themselves afloat. It must be exhausting. (Shusterman 266)

The above quote shows the realities a proportion of parents go through when their children have mental health issues. They wish they could do anything to help
them, but ultimately, they are “powerless” (266) and when the situation worsens they must work together “to keep themselves afloat” (266).

More so than Caden’s parents, the confusion is worse for his younger sister, Mackenzie.

My parents bring Mackenzie to visit for the first time. I know why they haven’t done it until now. Because I’m scary sometimes. Maybe scary in a different way than I was at home, but still scary. (Shusterman 223)

Despite this confusion and the guilt Caden feels for his illness, Mackenzie still offers her brother love and support: “And Mackenzie says, ‘I get it.’ Then she reaches her hand out and puts it on mine” (Shusterman 226). This is important to show to not only challenge stigmas, but to express to readers the importance of family support for those with mental illness as challenging illness alone can often be very lonely and difficult.

Of course, support can come from other avenues, not just family. Caden expresses romantic feeling towards another patient, Callie (symbolised as Calliope in Caden’s thoughts) in the hospital, and while the feelings are not reciprocated in a wholly romantic way, the shared bond and experiences bring them together and they are able to comfort one another. The relationship is also not established until well into the story, meaning that the main plot, Caden’s battle with his illness, leaves no room for sub-plots, such as the relationship portion, to overtake it.

The two come together to comfort one another, and when the time comes for Callie to leave the hospital, Caden tries to remain in contact with her. Callie, on the other hand, does not want this contact to continue in order to move on from
the hospital and the struggle with her illness, and while Caden is upset and disappointed, he understands her need to move on.

This relationship, albeit brief, still manages to have an impact on the reader while instilling its own important messages, and aiding the main message of the story. Callie is an example of someone who has pushed past the depths of their mental illness and is free and able to run across the waves as Calliope does in Caden’s thoughts. The disbanding of this short-lived relationship also shows readers that not all relationships, especially those conducted during difficult times, work out or have to work out and that is okay. It also promotes avenues of support outside of immediate family.

Clearly stigma and stereotypes should be addressed in YA novels that discuss mental illness, as Shusterman has done. But more than simply addressing these issues, authors must challenge readers to think ethically for themselves. This shifts ethical responsibilities to both the reader and writer, allowing both to analyse the context and presentation of these stigmas and stereotypes, as Booth may suggest, deciding for themselves what may be a “correct” or “incorrect” representation. In doing this, Cadden’s double-voiced discourse theory, discussed in the Introduction, is an excellent model as it challenges readers to think critically about what they are reading and the messages they are receiving.

“A Toddler’s Knotted Shoelace”: The Complexities of Double-Voiced Narrative

The dual structure of Challenger Deep—alternating between ‘reality’ and hallucination—creates “a place where time isn’t a straight, predictable line, but is more like a toddler’s knotted shoelace” (Shusterman 137). While this directly
refers to the effect of medication on consciousness, the quote is also representative of the overlapping, at times non-linear time line of the text.

In part due to this dual structure, Shusterman has created a novel that is double-voiced, as it allows for other avenues of thought and arguments outside of the narrator’s. While the voice is still solely Caden in first person and second person, Shusterman does not restrict his viewpoints to one set argument, allowing for a discussion and challenging of certain issues such as the stigmatisation of mental illness.

First-person narration is important as it creates a “close relationship between the reader and the writer” (Wyile 185). For example, a close relationship is created through Caden expressing his feelings and emotions directly to the audience: “I’m that coin on its way down, screaming in the neck of the funnel, with nothing but my own kinetic energy and centrifugal force keeping me from dropping into darkness” (Shusterman 10). We are able to get a close look at Caden’s internal turmoil through his first person voice, as we see how precarious he feels as if he is about to drop into the darkness. This close relationship is extremely pertinent in the development of the ironic relationship between reader and writer, as Andrea Schwenke Wyile notes, “Irony has been identified by many critics and theorists as an indispensible component of first-person narration” (186). Because the voice is first person (and often single-voiced discourse) the reader is expected to take the narrative at face value believing what they tell us and as a sense of trust is then established the ‘facts’ that are being told, one would hope are truthful and accurate representations, specifically in this case of mental illness. For example, Shusterman depicts voices Caden hears in his mind, but also shows Caden’s ability to contend with them, rather than simply be at their mercy:
“The thought voices tell me to do things. ‘Go rip out the neighbor’s sprinkler heads. Kill the snakes.’ But I won’t listen to them. I won’t destroy someone else’s property. I know they’re not really snakes” (Shusterman 105).

While the majority of the book is written in first person detailing Caden’s experiences on a personal level, at some points, the narrative voice switches to second person. Second person narration is a significant and unusual choice as it is rarely used in fiction, and less so in YA fiction.

The first time second person is used is in the opening chapter Fee, Fi, Fo, Fum: “There are two things you know. One: You were there. Two: You couldn’t have been there” (Shusterman 1). It is important to understand why Caden drops out of first person in order to use second person. The above quote and opening line of the text is essential in defining this. As previously discussed, the novel is made up of one main duality between reality and thought as Caden battles between the two trying to find where he belongs. He is at once in reality and at other times in thought and sometimes the two become interchangeable:

“We’re going on a trip,” your father tells you. You know he’s been crying.

“What kind of trip? Is it a cruise?” “If you like,” he says. “But we’ve got to go; the ship sails soon.’ (Shusterman 130)

As Caden is taken to the hospital reality and thought begin to merge, and he sets foot on the pirate ship that will take him to Challenger Deep. Here, Shusterman uses second person narration in order to symbolise this merging or interchangeability because as Caden describes “‘there’s no difference anymore between thought and reality’” (Shusterman 132).

In her article “The Role of Second PersonNarration in Representing Mental States in Sylvia Plath’s Smith Journal” Zsófia Demjén aims to demonstrate how
“second person narration can project a sense of emotional depth and inner conflict as well as of emotional balance” (1). While her study looks specifically at a work of non-fiction, the findings still apply to fictional texts, especially *Challenger Deep* which is rooted in personal experience. Demjén concludes that the switch to second person narration indicates “emotional upheaval, depression…and emotional balance through psychological distancing” (17). This relates to Caden’s switch to second person. When Caden enters the hospital, he is in a state of emotional upheaval. His two worlds are merging as he descends further into his illness and it is here he switches into second person.

You think you’re okay with this, because you still watch it all from a distance, until it’s time for your parents to head for the door, and you realize there is no distance at all. (Shusterman 133)

Distance is also important, as it not only shows the emotional upheaval Caden is experiencing, but can also distance the reader. First person narration remedies this by bridging this need for closeness.

Double-voiced discourse, as acknowledged in the Introduction, is a type of text that “represents voices as equal and provides alternative interpretations that offer, in their aggregate, no single and final answer for the reader” (Cadden 147). *Challenger Deep* is a novel that exhibits this. The reader is never made to believe there is purely a singular correct choice; this statement is also true for healing from schizophrenia as *Challenger Deep* demonstrates. For example, succumbing to schizophrenia is never wholly presented as being bad, and healing is never presented as being truly the only option. While Caden does decide to heal at the end of the story, he does not imply that he will be this way forever: “And maybe one day I’ll dive so deep that the Abyssal serpent will catch me, and I’ll never
find my way back. No sense in denying that such things happen” (Shusterman 308).

Shusterman has left an avenue for the reader to decide for themselves what Caden is experiencing (in terms of diagnoses), perhaps allowing readers to place their own experiences in place of Caden’s. They are not simply being led, but are choosing for themselves, which is an important part of double-voiced literature. As Shusterman acknowledges in his “Author’s Note”, he hopes the book will help “others to empathize, and to understand what it’s like to sail the dark, unpredictable waters of mental illness” (Shusterman “Author’s Note”).

“Journeying to points exotic”: Symbolism and Tropes
Symbolism and tropes are a vital element within Caden’s hallucinations, not only guiding Caden’s journey through schizophrenia, but also raising issues surrounding the performance of traditional masculinity.

Stigma in regards to mental illness is often linked to gender. As discussed by Thomas W. Bean and Helen Harper, the enforcement and “performance” of traditional heterosexual masculinity can have dire consequences not only in the novel studied, but in real life too. This statement relates to Challenger Deep as the story subverts gendered ideas by presenting a story of a male protagonist battling mental illness, a topic that has generally been a silenced issue for males, because they are traditionally “socialized to be more independent and non-emotional” (Phelan and Basow 2895).

Antero Garcia notes how “Books catered for a male audience fall into readily identifiable tropes” (83). This quote is extremely pertinent to Challenger Deep as one of the main tropes that plays a necessary role in the story, is that of the “boy’s
own adventure” as seen in nineteenth century novels such as *Treasure Island*, and in recent novels such as the Percy Jackson series. Joseph Bristow highlights that the boy’s own adventure tale depicts
fearless endeavor in a world populated by savage races, dangerous pirates, and related manifestations of the ‘other’ to be encountered on voyages towards dark and unexplored continents. (1)

Joseph Bristow’s quote provides a framework for the ingredients needed to form a boy’s own adventure story.

The first ingredient is that it needs to include a young and courageous protagonist. In *Challenger Deep* this is clearly Caden.

The second ingredient is that there needs to be a journey that involves the ‘other’. For *Challenger Deep* this other is mental illness skilfully portrayed in Caden’s hallucinations as being a fraught and turbulent sea filled with sea monsters and other dangers.

And the third and final ingredient is that there is typically a return home. For Caden this return home is not so much to a physical place, but instead a return to his reality escaping his hallucinations.

Joseph A. Kestner describes *Treasure Island* as, “the quintessential adventure narrative, including voyaging out; residence in a strange territory, here an island; murderous plotters; lost treasure; daring escapades” (29). It feels as if Shusterman is consciously using this familiar trope (Garcia 83) in order to create an area of comfort, as *Challenger Deep* discusses a subject (mental illness) that is uncomfortable and new ground for a large portion of young male readers. Guiding them through this theme with a familiar story of pirates, and treasure hunts, monsters and turbulent seas is an ideal way to put readers at ease.
But this trope is not simply a tool to guide the reader in to the weightier
discussion of mental illness in a male protagonist; Shusterman also works to
subvert this trope in which the journeyer is expected to return home at the end of
the adventure. Percy Jackson always returns from his quests back to Camp Half
Blood, and Jim Hawkins in *Treasure Island* in the end also returns home, and
back to a sense of normality, albeit in a state less than ideal: “When the return is
depicted, the men may be ruined physically… or psychologically, as in *Treasure
Island*” (Kestner 15).

In *Challenger Deep*, Caden can never really return home or to this sense of
‘normal’, as his illness does not allow it. Much like the men being changed when
they return in *Treasure Island*, Caden has been forever changed from his descent
into illness. Even though he may have returned to the shore after his first journey
to the depths, he is in a constant space of journeying perpetually as seen in the
final paragraph of the book, where he notes that the Captain

will always be there waiting, I realize. He will never go away. And in time, I
may find myself his first mate whether I want to or not, journeying to points
exotic so that I might make another dive, and another. And maybe one day I’ll
dive so deep that the Abyssal Serpent will catch me, and I’ll never find my way
back. No sense in denying that such things happen. (Shusterman 308)

The Abyssal Serpent catching Caden represents the complete consuming of Caden
by his illness, a point that is still very much possible despite overcoming his
journey in this book. Just because someone has beaten their illness, does not mean
the threat of relapse is not possible. There will be ups and downs on his life
journey, and Shusterman is certainly not trying to gloss over this for a happily-
ever-after.
Not only does Shusterman subvert the adventure trope through the acknowledgement that Caden’s journey will never end, he also uses it to show the reality of just how inviting relapse can be:

I turn to see a yacht…Gleaming gold, with pitch-black windows. There’s a Jacuzzi, and lounge chairs, and a crew that seems to be made exclusively of beautiful girls in string bikinis. And standing at the gangway is a familiar figure…

“It will be my pleasure to have you aboard,” the captain says… His good eye stares at me with familiar intensity that almost feels comfortable. Almost feels like home… “All aboard!” he says.

I linger on the gangway…

And then I tell him, “I don’t think so.”

He doesn’t try to convince me. He just smiles and nods. Then he says in a low voice… “You’ll be going back down there eventually. You know that, don’t you?”…


Here, the trope is no longer the humble boy’s own pirate ship adventure seen throughout the novel, the allure of the descent has changed showing how his illness will stay with him as he grows and ages. In the above passage, it is no longer an innocent journey on a pirate ship, instead the allure has changed to girls in bikinis, Jacuzzis and a giant gold yacht, hinting at the image of sex and fortune in order to lead him back to the depths to go “scuba-diving” in the Caribbean (Shusterman 307). All these images can be associated with the life of celebrities, sexuality, fame, and fortune, ideas that start to have a larger affect during the teenage years.
In a sense Caden’s descent into his illness could also be viewed as a rite of passage. Much like Jim Hawkins whose adventure in *Treasure Island* is a rite of passage into “masculine identity” (Kestner 34), Caden is also going on a rite of passage finding his own identity intermingled with masculinity.

As stated by Kestner, the purpose of *Treasure Island* “is the pursuit of masculine identity, the genuine if nightmarish treasure;” the treasure that Jim Hawkins finds is really his own masculine identity (34), and for Caden this is also similar:

I turn the doubloon over in my fingers. Then I reach for its edge with my other hand, grab it with my thumbnail, and peel back a gold foil cover, to reveal a dark brown interior. “It’s chocolate…” (Shusterman 290)

The treasure he discovers at the bottom of the deepest part of the trench is really just chocolate coins and ring pops. It’s fake, but as Caden is soon to realise this is not the real “treasure” of the journey.

I look to my right hand that holds the coin, and my left hand that holds the promise of sky. I know I have been a victim of many things beyond my control—but in this moment, in this place, here is something I have the power to choose…I drop the doubloon, close my fingers around the puzzle piece, and thrust my fist upward, offering completion to the distant sky. And suddenly I’m rising. (Shusterman 297)

Caden discovers how to pull himself back from the trench, up and out of the ocean symbolising his return from the depths of his illness. After so long battling with things out of his control, he now has the power to choose and he has chosen to move towards the sky instead of staying at the bottom of the trench with the fake treasure. The real treasure is Caden now having the capability to choose the
sky, having power over his illness, and completing his puzzle. Power is an important point in *Challenger Deep*, but is also reminiscent again of *Treasure Island*: “Most of *Treasure Island* is not about treasure-hunting but about power” (Kestner 29). Caden’s rise back to the surface represents the end of his rite of passage into and overcoming this first descent.

Shusterman has used tropes and symbolism related to masculinity in order to subvert gendered stereotypes such as the silence of male mental illness stories. This subversion allows for increased understanding not only of male experiences of mental health, but also works to ethically remove harmful stereotypes about schizophrenia by creating improved representation, while still addressing these stigmas.

*Challenger Deep* fulfils many of the ethical responsibilities outlined by Booth. Shusterman has created a novel that is both engaging and challenging. He does not talk down to his YA audience, but instead expects them to be able to cope with dual narratives, double-voiced discourse, and disturbing details about mental illness. Likewise, he does not suggest that those suffering from schizophrenia should be hidden from the world, but advocates that the wider public should learn about the realities of the condition, not to judge or stigmatise but to empathise.

*Challenger Deep* offers a realistic portrayal of schizophrenia, in particular the ongoing nature of the illness; there is hope for learning to live with the condition, but Caden (and the reader) is also conscious that the struggle is ever present. Shusterman’s achievement is highlighted when *Challenger Deep* is juxtaposed with other YA narratives dealing with mental illness and offering more facile solutions. It is to one such narrative, Sophie Kinsella’s *Finding Audrey*, that I now turn.
Chapter Two

Finding Audrey: The Problems of Love and Silence

Meet Audrey, a teenage girl in the midst of a serious battle with social anxiety disorder, so bad she can’t even leave her home or say hello to a stranger.

Enter Linus, her older brother’s handsome friend who immediately falls for Audrey, and vice-versa. Lo-and-behold her recovery is on the rise.

Is this simply coincidence or direct causation?

Let’s be clear, it is not the romance that I have a problem with, but the core message of the romance genre, that falling in love is the final solution to problems. In this case, that it will “fix” Audrey’s mental illness.

Sophie Kinsella’s novel Finding Audrey does have a number of strengths, such as the realistic representation of social anxiety disorder, and the inclusion of a challenging narrative voice/structure as benefiting the representation and understanding of mental illness. However, while I acknowledge these, my discussion also challenges the ethics of presenting the answer to Audrey’s mental illness as lying with a boy. I likewise interrogate the silence and avoidance surrounding her past bullying experiences, which undermine Kinsella’s overt message of healing.

Social Anxiety Disorder: Symptoms and Representations

Kinsella’s depiction of Audrey’s mental illness is largely accurate and insightful.

Social anxiety disorder generally begins in adolescence (Schneier 1029), is “the fourth most common psychological disorder” (Weeks, Howell, and Phillipe R.)
Goldin 750), and is more typically found within women than men (Schneier 1029).

Classified by Iulian Iancu and Damian Barenbiom, social anxiety disorder or SAD is “characterized by fear and avoidance in social situations where one experiences the danger of scrutiny of others” (135). For most, social anxiety is severely life impairing, affecting the subject’s “quality of life” (Iancu and Barenbiom 135).

Kinsella accurately portrays SAD in three main ways: Audrey’s inability to leave her safe spaces; Audrey’s inability to let strangers into her safe spaces; and the triggering of traumatic thoughts and memories.

Audrey’s inability to leave her safe spaces, defines the places she is able to go in order to experience an inkling of respite from her anxiety.

Audrey’s “safe little bubble” includes her home, her therapist Dr. Sarah’s room, and the car rides to and from these zones (37). She is unable to leave these spaces, not because she is afraid to go outside, but rather “it’s the people” (37). It should be noted that her family and Dr. Sarah do not fall into the category of people she is afraid of. Audrey sees these other people as a “threat” (37). It is this “fear and avoidance” of the “scrutiny of others” (135) that Iancu and Barenbiom described, which is forcing her to stay in her safe spaces. Even the thought of leaving her bubble causes Audrey immense psychological stress and fear:

“I’d like you to start making visits out of the house.”

“What?” My chin jerks up in horror… There are black dots in front of my eyes. Dr. Sarah’s room was always a safe space, but now I feel as though she’s thrusting me into a pit of fire. (Kinsella 85)
At Dr. Sarah’s suggestion to leave her home, Audrey is immediately thrust into fear and panic. The use of such emotive language (horror, thrusting me into a pit of fire) tied with the physical symptoms of jerking movements and black dots invading her vision, communicates the immediateness and intensity of the fear to the reader. Kinsella contrasts the sudden change felt within Audrey as Dr. Sarah now becomes an agitator of her anxiety (even though it is in order to help) by showing how the therapist’s room switches from a “safe space” into a “pit of fire,” threatening and volatile flames ready to jump out and catch Audrey unawares at any moment. But as seen here, even her safe spaces are not always impenetrable.

Audrey tries to counteract this by creating areas within her safe spaces that she believes she can completely control, such as the den—“But no-one comes in this room. This is my space” (Kinsella 21)—and her bedroom, which she escapes to when her den is compromised. These controllable safe spaces give her places to go when her anxiety spikes and she panics, as exhibited by Audrey in the next life-impairing problem: the inability to let new people into her safe spaces.

When she first meets Linus, her fear of strangers coming into her safe space becomes obvious. A simple act that would be bearable for someone without SAD throws Audrey into an anxiety attack making her unable to interact on a basic level. Audrey has placed specific boundaries, (“No-one is allowed to come in here,” (21)) around her comfort zones that when breached cause an uncontrollable amount of “panic” (21). This triggers her fight or flight response, as her mind tells her she needs “to escape” (21). In reaction to this, Audrey clenches her fists “in fear” readying herself to fight or run away tearing “through the kitchen like a hunted fox” (22) from the falsified danger.
It is during these times when Audrey’s anxiety is provoked that the final life-impairing symptom, the triggering of specific memories and thoughts, affect her the most.

As Audrey is following Dr. Sarah’s suggested task to leave her safe space and venture into a Starbucks, her anxiety takes an unexpected turn, causing her to “meltdown” (159). Audrey tries to fight the incoming panic attack by pretending the attack is not there, taking “a sip of Frappuccino, trying to relax, but all I really want to do is grab a napkin and shred it into little bits” (157). Thrust into panic, her mind fills with “darker thoughts,” like “I should just hide away. I shouldn’t even exist. What’s the point of me anyway?” (157) These thoughts cut her confidence down while she is vulnerable, throwing her mind into “a whirling mess of distress signals” and she runs away from the coffee shop back to her safe space at home (158). Audrey’s thoughts clearly negatively affect her in such a way as to cause an extreme amount of distress forcing her fight or flight response, negating all the success she had in being able to leave her safe space.

All three of these symptoms hinder Audrey’s ability to do necessary everyday things such as leave her house, interact with strangers, or keep a stable mindset when she is anxious. And while these are certainly the most life-impairing symptoms, there are definitely other aspects of her condition, which are just as important to have represented in the text and which Kinsella draws attention to.

The first is Audrey’s inability to make eye contact or “gaze-avoidance” a “behavioural marker” termed by Anna Park, Nicole Sharp and William Ickes (750) of social anxiety disorder, also described as a “self-protective” behaviour (87) in order to reduce “potential threat” (750).
Eye contact is a necessary function that “influences how attractive, attentive, socially competent, credible, and socially dominant one will be perceived by others” (Weeks, Howell, and Goldin 750). If eye contact does influence all the traits stated by Weeks, Howell, and Goldin it is not difficult to see how one with SAD would find eye contact threatening:

Eye contact is a big deal… Just the thought makes me feel sick, right down to my core. I know in my head that eyes are not frightening… So why should they bother me?... For a start, they’re powerful… You look someone straight in the eye and your whole soul can be sucked out in a nanosecond. (Kinsella 27)

In the above quote Audrey is acknowledging her need to protect herself from the powerful all-seeing eye, to avoid being sucked into its infiniteness. Even simply thinking about making eye contact with another makes her “feel sick” (27), and she clearly acknowledges and is aware of the irrational nature of this fear, as she knows in her head eyes “are not frightening” (27), but is unable to stop it.

In order to cope with this fear, Audrey constantly wears dark sunglasses to hide her eyes, even in her home (Kinsella 12). Kinsella has successfully represented Audrey’s difficulty with eye contact and her coping techniques for the majority of the text as the sunglasses are a central aspect to her character: “He saw me in my dark glasses…and he was all like, “Why the shades? Are you Angelina Jolie?” (12).

At the end of the story, however, after Audrey experiences her climactic breakdown, Kinsella undercuts her own perceptive representation of Audrey’s coping techniques, by having her heroine almost miraculously losing her need for the sunglasses: “I lost my sunglasses that night and I didn’t even notice… My eyes were bare. After all those months” (Kinsella 263). As Audrey’s sunglasses
simply fall off without her noticing or caring, there is a lack of understanding around how she came to the point where she does not need them any more. Only a few hours earlier she was experiencing a severe breakdown. Simply stating that she does not “want them back” (263) gives no hint to the emotional change she has undertaken.

Kinsella’s overall portrayal of the symptoms that hinder Audrey’s life to such an extreme point does, on the whole, exemplify how SAD impairs not only her life, but that of her family.

The most notable impairment is on the mother who has had to stop working to look after Audrey (Kinsella 264). This seems to have caused the mother to experience high levels of her own anxiety/paranoia in regards to her family’s health.

This paranoia is often depicted as extreme making the reader wonder if the mother is also in need of counselling: “She’s standing at her bedroom window…teetering, leaning over the edge, a wild look in her eye. And she’s holding my brother Frank’s computer” (1). She then throws the expensive computer out the window with no care for the price, or the scene she is causing in the neighbourhood.

Of course, this is heightened for comedic effect, but despite this the message is still clear: the mother is afraid that she has done something “wrong” (Kinsella 5) and let her family down causing Audrey’s illness and Frank’s gaming habit. This of course, has no basis and comes from a place of extreme paranoia, but this effect ripples back to Audrey.

As Audrey is consciously aware of this negative effect on her family it hinders her recovery by placing a significant amount of guilt on her:
It would be easy for me to get better and spring happily through the door, and leave Mum and Dad and Frank and Felix behind. But it shouldn’t be like that. We were all affected by what happened. We should all spring out of the door together. (Kinsella 266)

So, while focusing on her own recovery, she must make sure her family recovers from the effect of her mental illness, as well. This leads us to the representation of recovery and treatment by Kinsella.

Kinsella portrays a variety of treatments and methods within her work. Firstly, the use of medication discussed in the novel, albeit briefly, is an important area to consider.

Dr. Sarah prescribes medication to Audrey such as “Clonazepam” (Kinsella 22) to ease the immediate effects of her anxiety in extreme times of distress, such as when her “breath is coming like a piston engine” and she is in uncontrollable distress (22).

At times, Kinsella hints at the stigma that surrounds medication in the treatment of mental illness: “Mum never says the words of medication out loud” (22). This is important, but she only ever makes a light note of it, never entering into a discussion about why this stigma can have negative effects on those with mental illness. In contrast to Challenger Deep, Finding Audrey thus fails this idea of Booth’s contextual ethical responsibility.

Counselling is also portrayed as an effective treatment. Kinsella aims to portray a healthy, and measured recovery with Dr. Sarah’s treatment. Instead of expecting an upward climb with no set-backs, Dr. Sarah teaches her patients the reality that there will be ups and downs on this road, but in the end “‘progress will be in the right direction’” (134).
Fig.1. *Finding Audrey* Graph pg. 134

The above graph accurately shows the rises and falls expected while recovering (Kinsella 134). This acknowledgement by a trained professional is important in alleviating anxieties that may be provoked by missteps or problems that arise when in the recovery process, which is quite often the case. Audrey exhibits this herself: “I’ve been in bed for, like, the last three days.” “No-one said getting better would be a straightforward journey. Remember our graph?” (Kinsella 134) Dr. Sarah directly refers to the graph in order to alleviate some of Audrey’s fears about her recovery.

In terms of immediate treatment for symptoms, Dr. Sarah employs breathing exercises (Kinsella 21), and “positive visualization” (109) in order for Audrey to alleviate her symptoms.

Overall these techniques are somewhat effective. They neither always work nor always fail, allowing for a measured and honest look at their effectiveness.

In the first instance that breathing techniques are employed, they fail: “*Breathe in for four counts, out for seven…The threat isn’t real.* I try to press the words into my mind but they’re drowned out by the panic. It’s engulfing” (Kinsella 21-22). While her panic may be too much for her here it does not mean she is always subject to failure.

Even though the techniques Dr. Sarah provides are common and have been proven to work, Audrey is also able to find her own that work.
Most notable is her use of sunglasses to cope with eye contact, but others include writing notes and “shoe contact” (Kinsella 102), which she uses in order to break her initial anxiety with Linus instead of speaking and making eye contact.

Audrey finding her own coping techniques is important as it shows that not all recovery techniques have to come from trained professionals, sometimes you will find your own. While it is not recommended that SAD sufferers create their own coping techniques, if they do and are used under the supervision of a trained professional, they can be effective in alleviating symptoms.

In order to further Audrey’s recovery, and keep the plot moving forward, Dr. Sarah sets a series of tasks for her. This is apparent when Dr. Sarah asks Audrey to leave her comfort spaces for the first time in months, encouraging her to make a trip to the local Starbucks, or the unorthodox method of making a documentary.

Audrey is instructed to create a “documentary film” (Kinsella 27) as a way to overcome her fears and paranoia of people outside of those in her safe spaces (28). It is clear why Dr. Sarah recommends the use of a camera to Audrey. The safety of looking through a lens is a way to combat her fear of eye contact, rather than hiding behind her sunglasses (“Could you make eye contact with someone through a camera, do you think?” (28)), and the camera also aims to alleviate her anxiety by making a safe space (interview) for her to talk to others.

While this is what the task aims to do, it is not executed in this way. The only times the documentary scenes are recorded are when they are in direct relation to her family, or Linus, inside her safe space. This could have been put to better use outside of her safe spaces, such as interviewing people in her community, in order to show growth. While there are some areas for improvement in Kinsella’s
depiction of mental illness, on the whole she portrays Audrey’s symptoms and treatment with accuracy and understanding. An ethical problem arises when Dr Sarah is progressively replaced by Linus as a new and improved form of ‘healing’.

The Linus Cure: Rescuing the Maiden in the Tower

Linus, the love interest, creates the largest ethical problem within the text. As Audrey becomes more attached to him her ability to combat her illness becomes easier. As noted in the introduction to this chapter, this is a troubling message to send to readers, as it is not a realistic portrayal of mental illness. In this section I will discuss the reasons for this.

Karen Coats claims that

While books about girls have always located their characters in relationship-intensive plotlines, gone are the days where getting the guy ends the story with a happily or a tragically ever after. Girls today are generally encouraged to be more savvy in negotiating objectifying discourses, even standing against mainstream feminism in their quest to chart their own destinies. (Coats 318)

Coats’s statement may be true in a larger sense of the area of YA literature, but I argue that romance plays a dominant role in more niche sections (such as mental illness narratives), dissuading and distracting readers from the main message of the story, and replicating outmoded gender tropes of girls as weak and in need of rescue.

Kinsella is best known as a writer of adult chick-lit, and it is unsurprising that the dominant tropes of this genre make their way into her YA debut. Chick-lit is a popular area of fiction, which often takes a humorous look at life for “modern
women struggling and succeeding with work, relationships, motherhood, infertility, finances, and yes, the right shoes to wear with the right dress” (Davis-Kahl 18).

As Cole states, “Romantic comedy has become one of the most well-liked forms of young adult humor” (188). So it is unsurprising that Kinsella would bring romantic comedy and the well-known structure of the chick lit narrative over to her newly established YA audience.

As discussed earlier, Audrey is unable to leave her home due to her crippling social anxiety, leaving her with little room to meet new people. This is until her brother’s friend, Linus, is invited over. She quickly develops a crush on him, and within a few meetings they establish a romance. Coincidentally, Audrey finds her health improving incredibly quickly. This romance then begins to overtake the mental illness in becoming central to the plot.

While Coats contends that stories where the girl gets the guy are over (318), in Finding Audrey, a novel published in 2015, the audience receives just that. Fairy-tale tropes inherent in Kinsella’s text seem to be semi-responsible for this “happily or tragically ever after” (Coats 318).

The influence of fairy tales on children’s/young adult literature is not a new theory, as Elisabeth Rose Gruner reminds us; one of the very first articles in feminist literary criticism, “Feminism and Fairy Tales” by Karen Rowe, “followed Simone de Beauvoir’s claim that fairy tales structure the consciousness of girls and women, and in a negative way” (3). Gruner continues: “it is clear that fairy tales continue to provide structural and thematic elements for a wide variety of literature for children, especially girls” (3).
Sometimes, as Gruner argues, the use of fairy tales can have empowering messages for readers, such as in *Speak* by Laurie Halse Anderson. Gruner specifically acknowledges Anderson’s novel as subverting fairy tales to send an empowering message to its readership. *Speak* does not specifically follow one fairy-tale trope throughout the entirety of the novel like *Finding Audrey*, but instead continuously makes references to fairy-tales, and relies more on “Melinda’s language rather than structural elements in the narrative” (Gruner 12).

*Speak* follows the story of Melinda after she stops speaking in the aftermath of her traumatic experience of being raped at a party. When Melinda is finally able to speak she – the “fairy-tale heroine” (Gruner 12) is able to become “an agent rather than a victim” (12). Melinda uses these references to classic fairy-tales as a means to subvert and take control of her own agency and empowerment, denying the closure of the happily-ever-after trope (Gruner 14).

The YA texts Gruner discusses work to resist the happily-ever-after by ending with a sense of uncertainty and refusing closure, and especially “their romantic closures” (17). However, this happily-ever-after is not rejected in *Finding Audrey*, instead it is welcomed with open arms. In the end of the novel there are no uncertainties left: Audrey has taken control of her illness and is on an upward path of love and healing. Tellingly, this happily-ever-after is achieved primarily through her relationship with Linus and it is in the motif of ‘prince’ as rescuer that the novel is most embedded in fairy tale tropes.

The fairy tale pattern that *Finding Audrey* most closely follows is that of ‘Rapunzel’. Margaret Atwood describes this trope as the “Rapunzel Syndrome” (209). She argues that this “pattern” has become common not only in fairy tales,
but also in “‘realistic’ novels about ‘normal’ women” (Atwood 209). This syndrome contains four main parts:

- The main character, aka the Rapunzel
- “The wicked witch who has imprisoned her, usually her mother or her husband, sometimes her father or grandfather” (209)
- The tower that imprisons her – “the attitudes of society” (209)
- “And the Rescuer, a handsome prince of little substantiality who provides momentary escape… in the Rapunzel Syndrome the rescuer is not much help.” (209)

This is an excellent guide to the trope found in *Finding Audrey*. Although Kinsella does not overtly refer to Rapunzel as an intertext, and I am not arguing that she is deliberately using the fairy tale as a structural device, the fairy tale trope of the maiden in the tower is a useful tool for understanding the shape of the narrative and its deficiencies as a story which claims to be about female empowerment and healing.

Clearly, our Rapunzel is Audrey and her main rescuer is Linus. But the wicked witch and the tower that imprisons her are less clear. I argue that her mental illness is both her wicked witch and the tower. It is not the “attitudes of society” (Atwood 209) that has her imprisoned, but her beliefs that others are judging her, so she is imprisoned by “the danger of scrutiny of others” (Iancu and Barenbiom 135). Because of this she is her own wicked witch and tower, and her own home is the physical manifestation of the tower that traps her.

From the outset, Linus is positioned as the rescuer. As soon as Audrey establishes a romantic relationship with him early in the novel she makes leaps and bounds in her recovery. The first time she leaves the house and pushes past
her anxiety in months is when Linus makes her meet him at a coffee shop. Here, the allure of Linus has freed her from the tower of her illness.

The clearest variants from the original trope are that Audrey has to return to her tower on a regular basis, as is the nature of an anxiety disorder, and that the rescuer is Audrey’s rescuer in the full sense of the word.

The cycle of Linus freeing Audrey from her tower continues throughout the novel until the climactic moment when, after stopping her medication without telling her doctor, Audrey experiences a breakdown. This breakdown, marked by a fight with Linus, sends her spiralling out of control, as he does not reply to any of her text messages, resulting in her going missing. When Linus is no longer there her imprisonment becomes substantially worse, but when all is revealed to be okay, she is fine again and her health continues improving. Once again, she is freed from her tower because of her romantic status.

Kinsella tries to mask this with the weak connection of Audrey going off her medication. But this is merely a passing statement rather than a discussion, so it is difficult to establish this as the reason for her breakdown:

Dr. Sarah gave me this whole great lecture about the dangers of coming off meds without supervision… and I must promise to never do it again. (263-264)

The flippant way Audrey dismisses Dr. Sarah’s warnings lessens the potential hazards of stopping medication unsupervised, reinforcing the acute correlation between the rise and fall of her health with her relationship.

The message this sends to readers is that recovery or decline depends on your romantic status, instead of suggesting to its target audience that learning to cope is a personal battle and that those around you can only guide you rather than be the one who ‘rescues’ you. For Audrey’s agency in her recovery to be truly affective,
I argue, no resolution with Linus would need to be made as her return to him just reinforces this reliance.

Linus’s role as rescuer, and its problematisation in the story, opens a new discussion when he takes over the role of healer/rescuer from the trained professional, Dr. Sarah.

Audrey’s relationship with Dr. Sarah is established early in the novel, along with the fact that she has been visiting her regularly for quite some time. Dr. Sarah is also portrayed as neither too distant due to her position nor compromising this position by being too close to her patient. In fact, they have taken measures to make sure of this:

Her surname is McVeigh but we call her Dr. Sarah because they brainstormed about it in a big meeting and decide first names were approachable but Dr. gave authority and reassurance. (Kinsella 24)

And it is clear that Audrey trusts and can open up to Dr. Sarah:

Sometimes I think, *Shall I just lie and say everything’s rosy?* But the weird thing is, I don’t. I can’t do that to Dr. Sarah. We’re in this together. (Kinsella 25)

It is all the more damaging when this trust is shifted to Linus so quickly, a character who is much less stable in her life than a trained professional. This instability is seen when Audrey breaks down out of the fear that Linus is angry with her: “I’ve wrecked everything with Linus. He’s never texting. It’s over. He was right, I was selfish… I’m such a stupid, idiot failure” (Kinsella 255). The loss of Linus causes instantaneous destructivity as she starts attacking herself with negative thoughts (255). Due to the romantic entanglement resulting in self-
destructive behaviour it is more immediately disastrous for Audrey to lose Linus than it would be to stop seeing Dr. Sarah.

Of course, the allure of a romantic interest is more inviting than visiting a trained professional, but given the instability of romance compared to the stability of a trained professional whose one main goal is to help those in Audrey’s position, it has to be asked whether this switching of roles is an ethical representation to a young audience.

The above reliance on stereotypical tropes is troubling, as unlike *Challenger Deep* they are not challenging understandings of gender or mental illness, but instead reinforcing false ideas, such as the need for women to be rescued. Transgressing these unhealthy depictions of gender is especially important because as Garcia states:

Female identity in YA texts can be constructed subtly or overtly. Notions of beauty, attraction, and expected behavior of girls in books define for readers what is considered *normal*. The intentions behind descriptions and actions may not intend to limit female identity, but the effects are still the same. (79)

Not only does this reinforce stereotypes, but it also distracts from the importance of the ethical representation of mental illness.

**Finding Audrey’s Voice**

*Finding Audrey’s* narrative voice is rather complicated, so in order to discuss this it needs to be broken down into a number of sub-sections. These sub-sections consist of: the comedic voice, which is a bold and beneficial choice by Kinsella to counteract the often-depressing voice found in YA “problem novels”; the narrative voice, which tries to create a nuanced and layered narrative but
ultimately shows the limitations of Kinsella’s story; and finally, the silence in the text which raises many questions about the ethical nature of *Finding Audrey*.

**Comedy**

Kinsella’s comedic voice is fresh and original in terms of mental illness narratives in YA fiction. The comedic voice contrasts with the staple “problem novel” of the genre and its emphasis on realism, instead creating a narrative that shows you do not need to always be in a state of melancholy in order to show a “realistic” battle with an illness. In order to create a realistic representation, comedy in *Finding Audrey* is aided by complex shifting narrative points of view, experimenting with first and third person, which at times is slightly ambiguous.

Audrey’s self-deprecating humour allows the audience not only to relate to her character, but also to feel comfortable laughing at her and her families’ problems, despite the overall negative effect they have on her life. This humour is apparent from the opening scene of the novel:

OMG, Mum’s gone insane. Not normal Mum-insane. Serious insane. Normal Mum-insane: Mum says, “Let’s all do this great gluten-free diet I read about in the *Daily Mail*!” Mum buys three loaves of gluten-free bread. It’s so disgusting our mouths curl up. The family goes on strike and Mum hides her sandwich in the flower bed and next week we’re not gluten free anymore.

(Kinsella 1)

Not only does comedy establish the tone for the family dynamic, but also the overall tone for the novel. It is obvious that this is not a tale where the protagonist wallows in her own pain, but instead it is light-hearted and humorous.
Comedy paired with difficult topics such as mental illness, can work to alleviate the despair and stress these issues can cause. As Cole describes, “Humor plays an instrumental role in problem novels, for it prevents stories from being too hopeless and depressing” (193); while this is true, comedy is not immune from troubling this relationship, as Cole continues “Our attitudes toward humor are influenced by our identity—our personal tastes and experiences, our maturity level, and our level of detachment” (Cole 199). For example, while some with no experience of SAD might laugh along with Audrey at her self-deprecating humour about her inability to leave the house, someone who has dealt with the illness may find the use of humour insulting.

An important distinction readers must make is whether the novel is necessarily laughing at or with those who deal with the illness. In regards to Finding Audrey, the novel does an excellent job of establishing a realistic representation of SAD and understanding of what it is like for those with it. It would be fair to say the novel uses humour in a respectful way to laugh alongside those who have the illness, rather than at them. But, of course, some may see just the inclusion of comedy as taking away from the seriousness of such an issue.

Why might the inclusion of comedy lessen the seriousness of the discussion of mental illness? One reason may be because as Connie Willis acknowledges, comedy itself is not taken seriously (319).

Connie Willis offers three reasons as to why people might dismiss comedy.

The first is because it is “fun to read” (319). Society views anything that is seen as fun or light-hearted as not serious and therefore not to be taken seriously (319).
Secondly, because comedy itself refuses to take things seriously, which is its dominant message: “It laughs at the Establishment and society and religion. It refuses to recognize social boundaries or respect authority” (319). All the things we are told to take seriously, comedy happily defies.

And finally, the third, and deemed the most important by Willis:

the fun and funny and joyous things in life feel somehow not as “real” as the sad and the horrific…And I think the reason the bad feels somehow truer than the good is because disasters and disappointments and crimes and disease tap into…the lizard-brain part. They trigger our most basic fears, and we react instinctively. (319)

The “lizard-brain” Willis refers to is an interesting term, one which is often used to describe the limbic system, which controls our “impulses, memory, and…emotions” (Shrand and Devine 14). Audrey often makes reference to her lizard brain, and how central it is to her illness’ stagnation:

Every time you freeze in fright, that’s your lizard brain taking over…It doesn’t wait for evidence and it doesn’t think, it just has instincts. Your lizard brain is totally not rational or reasonable: all it wants to do is protect you. (Kinsella 76)

When someone enters Audrey’s safe space this sends her lizard brain into action: “Every muscle in my body is taut. My eyes are flicking around in fear… My lizard brain is in overdrive” (Kinsella 76). Her lizard brain tries to get her to act on instinct, even if that instinct is supplying a false need for fear. Instead of running from this, Audrey tries to combat it, but it takes a large physical and emotional effort to do so; as she states it “feels like riding a rodeo” (Kinsella 77), as it is not only fearful, but is physically taxing on her.
Lizard brain is a fantastic term to frame the fight or flight response in a way that some might find less intimidating as it not only is a tool to establish Audrey’s symptoms but is a comedic term, as well. It is at once comedic in the idea that our brains are just lizard-like, but also detaches the sufferer from what they might be experiencing. As seen here, the benefits of humour can be seen even in the slightest use of terminology.

Point of View

The representation of mental illness is also affected by the novel’s narrative point of view. Kinsella not only uses the YA staple of first person, but also third person through the stylistic use of a film transcript as a way to view Audrey and the novel through different eyes. While it is tempting to view these different voices as an attempt to provide a layered and nuanced insight into Audrey’s condition, when contrasted with Challenger Deep the limitations of Kinsella’s writing are once again exposed. This is clearly an area where double-voiced discourse could be used to help ease the contextual ethical responsibility for both reader and writer, but drawing on Booth’s work about how texts affect readers in terms of context could also provide adequate scope to improve ethical representations.

While first person narration certainly has its benefits, scholars have highlighted its limitations, especially in YA texts. As Emma Heyde notes, first person narration “has been accused of limiting the scope for extensive examination of different points of view” (65). For Heyde “the defence” against this is that first person creates “intimacy with characters” and a heightened involvement with the story that appeals to teens (65). Other scholars are more critical. First person, in Mike Cadden’s view, “makes it easy to present immature and unchallenged
views” (146) (but he also acknowledges other points of view are also capable of this).

Third person narratives on the other hand, have dramatically declined in the YA area, with novels focusing on what Heyde terms the “confronting” first person narration (65). Heyde acknowledges the traditional role of third person narrative in YA texts as assuming “the function not only of storyteller but also of teacher, censor and moral guide” (65). There is a sense of safety in third person in which “the reader assumes a privileged position above and beyond the characters” (Heyde 65). Cadden, however, insists that third person is not always clear cut: “third person address is not necessarily obliged to present the positions, perspectives, and politics of all, or even some, of the characters in the text” (146).

The third person point of view allows Audrey to still be the controller of what the audience witnesses, but also makes some significant differences to the way characters, and Audrey’s reliability as a narrator, are represented in the text.

The film transcript (third person) is a complex narrative technique, which often mixes first and third person narration. First person is used in the transcript voice over in order to address the camera, but is ultimately framed by third person narration in order to establish the scene. These complexities are best seen as Audrey conducts her confessional to the camera at the end of the novel:

The camera wobbles as someone stabilises it on a high surface. As this person backs away we see it is AUDREY, in her bedroom. She hesitates, then peers into the camera.

**AUDREY**
So, this is me. Audrey. You haven’t met me yet.

I’m probably not what you expected. (Kinsella 284)

Here, Audrey’s first person dialogue is framed by the third person in order to establish the scene and characters in it. Audrey is addressing the camera and audience in first person. Of course, whether this is switching to first person, or rather counted as dialogue is debatable. This final scene is important because Audrey has relinquished herself as the controller of the camera and narrator and instead become a character, just like everyone else in her family.

The main ability of this type of address is that it allows the reader to see Audrey’s families’ feelings and opinions when she is not present. This is most notable when Audrey goes missing:

As this person backs away we see it is Frank…He stares into the camera with worried eyes.

**FRANK**

...My sister Audrey is missing. It’s a nightmare.

We woke up this morning and there she wasn’t.

Mum and Dad are just . . . (He swallows.)

(Kinsella 257)

Here, the strain Audrey’s breakdown has on her family is plain to see. Frank is clearly distressed and his parents are so distraught he does not even have words for it. This is a new avenue of sight for the audience, as previously, Audrey’s first person narration provided limitations for viewing the effect of her illness on those around her. This is an important avenue for discussion because for the majority of mental illness sufferers the difficulty is not just limited to them but has a ripple
effect creating difficulties for loved ones, especially when they live with them or are so young. In *Finding Audrey* this effect is most apparent on the mother.

In the example below, the mother’s protectiveness for her daughter is now visible to the audience when she confronts Linus about his constant challenge setting for Audrey:

**MUM**

Was this, leaving home in the middle of the night, was this one of your “crazy challenges,” Linus?”

(Kinsella 260)

In the mother’s time of distress, her true concerns arise about Linus’s interactions with and intervention in her daughter’s life, as she would never divulge these fears explicitly to her daughter.

This third person film technique also allows Audrey to see her family’s reaction/emotions played back to her:

Frank showed me the footage of Mum laying into Linus in the sitting room and I stared in total disbelief. (Kinsella 269)

This is beneficial, as Audrey is able to see first-hand the love and support she has from those around her. Sometimes this is not as apparent as it should be until a crisis happens.

But this film technique also creates problems, the main issue being the unreliability of film. The problem with using a camera to record events is that recordings can be chopped, changed, and edited in order to control what the audience views, making it different from the traditional third person narrative.
The audience does not know what has been cut or left out from the story. This is extremely pertinent in the last scene of the book:

As she comes to turn off the camera, Audrey’s blue eyes loom large, filling the screen. She blinks a couple of times, then winks at the camera.

AUDREY

See you. (Kinsella 286)

It is the addition of the wink at the camera that sets the tone of uncertainty as the reader turns the final page. Why is Audrey winking at us with her bare eyes? Is it simply a playful send-off, or something more sinister? A wink is generally associated with a joke or tricking someone, which makes it an odd way to end a story, especially when combined with the film style narrative, which in itself is also unreliable.

Unreliability again comes to the forefront in the next section which discusses the silence of Audrey’s narration, stemming from a serious bullying event.

Silence and Bullying

The silence within Audrey’s narration, especially around the bullying event, is a pertinent point of discussion. Alongside troubling first person narration, it also raises other questions such as: why does Audrey not reveal this important event to her audience despite the large role it plays in her story? And why might Kinsella have chosen to withhold it from her audience?

As Audrey leaves the bullying event shrouded in secrecy the severity and answers to the above questions can never be gauged. All we know of the event is that Audrey was bullied intensely by a group of girls at her school, “There was a big scandal” and “Three girls were excluded” (Kinsella 36).
In fact, this secrecy could work to heighten the severity of the acts in the reader’s mind, and one has to wonder if Kinsella did this precisely for that purpose.

If Kinsella reveals the event she runs the risk of it having less impact than if it was left a mystery, but in another YA text, *Speak*, which similarly conceals events as a focal point, this is not the case.

In *Speak*, a YA novel by Laurie Halse Anderson, the main character, Melinda, is unable to speak due to a traumatic experience in her near past. Much like *Finding Audrey*, the event is hinted at throughout the novel, developing and heightening the reader’s expectations of what could have happened. Unlike *Finding Audrey*, however, *Speak* does eventually reveal what happened to Melinda:

> In my head, my voice is as clear as a bell: “NO I DON’T WANT TO!” But I can’t spit it out...shirt up, shorts down, and the ground smells wet and dark and NO!—I’m not really here, I’m definitely back at Rachel’s, crimping my hair…and he smells like beer and mean and he hurts me hurts me and gets up

(Anderson 135)

The reveal is extremely powerful and respectful, showing how distressing the act would have been for Melinda without being overtly graphic or abusing the scene for shock factor. Instead, this reveal focuses on Melinda’s thought pattern, creating an anxiety-inducing scene where Melinda is desperately trying to shift her mind to anywhere else than the current scene.

This shows that the reveal of a traumatic event does not always have to be less impactful than the anticipation it developed, if it is written in a skilful way, nor
does it have to explicitly detail the event. In fact, it could also heighten the reader’s empathy for the main character.

In *Speak*, Melinda’s ability to finally open up about her experience, as seen in the final line of the novel, “‘Let me tell you about it’” (Anderson 198), establishes Melinda’s healing and catharsis. Her ability to handle her traumatic experience in a mature and rational way is an important message to send to readers, especially those who may have dealt with similar issues. Not only does she mentally deal with her trauma, she is put in a position where she physically must confront and fight off her attacker when he corners her: “I reach in and wrap my fingers around a triangle of glass. I hold it to Andy Evan’s neck…. ‘I said no’” (Anderson 195). While Melinda is in a more immediately serious position than Audrey where she must physically defend herself, Melinda’s ability to defend herself shows growth in her character.

Readers of Audrey’s story will never know if she has healed enough to be able to defend herself against her bullies (past and future) or even if she could emotionally cope with seeing these girls again. Her failure to cope is seen when she meets one of the bullies, Izzy, in a café for what she believes will be an apology for Izzy’s previous actions.

Since the moment I stepped through the door, this hasn’t been what I thought it would be…‘I’m hollow and vulnerable and kind of lesser. I’m not winning any battle sitting here, silently clutching the table, unable to speak, just thinking my own rapid, restless thoughts. (Kinsella 250)

In the quote it is clear that Audrey is in a position with no power as she states she is in a lesser position, causing her anxiety to grow (250).
While it should be noted she does maintain some form of control and is able to leave the situation, this interaction with Izzy then causes her fight with Linus, which in turn triggers her climactic breakdown in the end of the novel. Everyone (parents, Dr. Sarah, Linus) is shielding her from any interaction with these bullies. Izzy was also not the main perpetrator, so it can only be imagined how incapable of controlling her anxiety Audrey would be if she were to come across Tasha the bully who makes her “flesh crawl” (Kinsella 229). This establishes a lack of catharsis.

Audrey’s parents even acknowledge the idea of catharsis when discussing the potential meeting with her:

“Sweetheart, I know you think it’ll be a cathartic experience and you’ll say your piece and everyone will come away the wiser…But in real life, that doesn’t happen. I’ve confronted enough assholes in my time. They never realize they’re assholes.” (Kinsella 233)

Audrey’s father is focusing on Izzy realising she is in the wrong and apologising as being the cathartic experience for Audrey, but this could be viewed as an unethical representation of catharsis and healing, especially for a novel that is centred on overcoming personal problems.

For it to be a truly cathartic experience, I would argue Audrey needs to learn how to interact and continue on without being thrust into panic when coming across a bully in her everyday life, as it is not realistic to assume she will never come across these girls or other bullies again. Audrey’s mother acknowledges this to Dr. Sarah:
“Those girls might be anywhere,” says Mum, protectively grabbing my hand.

“What if she bumps into one of them? Two of them are still at school in the area, you know.” (Kinsella 85)

These girls still live and go to school “in the area” (85) and no matter how protective the mother is, there is no possible way she could avoid a chance encounter.

This brings us to the discussion of Dr. Sarah and her continuation and insistence of this silence. Dr. Sarah’s professional advice to Audrey is to not revisit the past, not to engage with the girls who hurt her, and to simply move on from the events:

Dr. Sarah isn’t wild about hearing about Izzy or Tasha or any of them. She’s all, like, ‘Audrey, you aren’t validated by other people,’ and…‘This Tasha sounds very tedious, let’s move off the topic.’…But…all of them are still in my mind all the time. (Kinsella 233-234)

Despite the fact that the bullies and the past are still controlling a large portion of Audrey’s life as seen in her admission that they are in her “mind all the time” (234), Dr. Sarah silences this before Audrey can actively work with her to help move on from this clearly traumatic moment. Maybe, Dr. Sarah is simply doing this to protect Audrey, but it does feel over-protective for someone who is supposed to help Audrey work through these complications, which makes us wonder if this advice and silencing of the event is actually a credible action by Dr. Sarah. Surely a doctor would prefer their patients to work through their illness rather than push it to the side.

Perhaps Kinsella is refusing to engage in the discussion of bullying, instead only raising questions around it because she wishes the focus of the novel to stay
firmly on mental illness. But, of course, Kinsella’s resistance to acknowledge bullying and its effect on mental illness, establishes her failure in acknowledging that mental illness can be socially triggered as well as chemically/biologically determined.

Kinsella’s resistance to acknowledging bullying also establishes Audrey’s place as an unreliable narrator. Even though the bullying event is hinted at heavily, there is never a grand reveal or flashback. Audrey only gives us the bare essentials, never detailing what actually happened, as she exhibits in one scene where she tells the audience, “We don’t have to reveal everything to each other” (Kinsella 39). Audrey also tells the reader why she chooses to withhold this information:

I can’t go into it all again…I’ve sat in enough rooms with teachers, doctors, regurgitating the same story, using the same words, till it starts to feel like something that happened to someone else. (36)

Perhaps Audrey is trying to distance herself from the event by not speaking of it, but also trying to maintain the immediacy of it. As she goes over it again and again, it feels like it’s “happened to someone else”, losing the personal impact.

When she confronts one of the bullies, Izzy, the events are still only vaguely discussed: “I’m the one they did all those things to. Yes, those things. The ones they did. And said. And wrote. Your daughter in her ponytail. That’s right” (252). While it is clear that Audrey was the victim in this scenario, the reader still only has a vague idea of what has happened to her, because the reader is limited in what tools they have been given by Kinsella to establish this. Why might Kinsella have chosen to conceal this important piece of the narrative? There are multiple reasons this may be the case, the first is that Audrey is deliberately concealing
facts, making her an unreliable narrator, but this is unlikely, as there is no
textually necessary reason for Audrey to be unreliable.

The second reason could be Audrey is using concealment as a way to block out
her past pain. This method seems to coincide with Dr. Sarah’s teachings to move
on from the event rather than deal with the emotional trauma, so is a plausible
reason. As a narrative technique, concealment could be used to heighten the
intensity of what happened in the reader’s mind, as discussed earlier. Finally,
Kinsella may use concealment in order to allow the novel to focus on its central
message: healing. Of course, as discussed earlier, there are a number of plot-holes
in Kinsella’s depiction of healing, the main being the denial to revisit and discuss
the bullying event and how this could negatively affect Audrey in the future, so
while this could be a plausible reason, it does open the door for ethical questions.

Kinsella’s treatment of serious topics such as girl-on-girl bullying or the
reliance on the male romantic interest as the cure to mental illness are ethical
issues that are in desperate need of discussion. Much-like Audrey’s gaze
avoidance, Kinsella is wearing her own pair of dark sunglasses, avoiding complex
and important issues that are necessary for the representation of mental illness.
Conclusion

Booth’s argument in *The Company We Keep: An Ethics of Fiction* is that ethical criticism should be at the forefront of our engagement with literature, and that what we read affects the self as we read (Booth 14). I expand this to contend that reading has a lasting effect on the self and on our understandings of important contextual topics, such as mental illness. Why do I call for this, especially in regards to mental illness?

In part, the answer lies with my own personal circumstances. For the past decade, I have had my own experiences with social anxiety disorder, similar to those the title character experiences in *Finding Audrey*, yet completely different (and without the added bonus of love saving the day). This decade of experience has given me first-hand knowledge of the stress and stigma that comes with living with an anxiety disorder. In this respect, I am an insider. I do not have personal experience with schizophrenia or similar illnesses, so in the case of *Challenger Deep* I am still an outsider, although my personal experience and understanding of mental illness ensures that I can empathise with Caden and offer insights that those without my experience may be unable to obtain.

My personal journey is also one of academic study, and my training at University has developed my critical faculties. Thus, while my experiences with SAD certainly influence the way I view *Finding Audrey* emotionally, I am still able to critically analyse it, as I do with *Challenger Deep*. In order to analyse Shusterman’s novel I have also tapped in to these critical faculties, conducting research on schizophrenia to provide an informed opinion. I can never be a neutral
reader of these texts, but I can be an objective, scholarly reader attuned to the way narrative, character and voice are constructed and theme is conveyed.

Both Kinsella and Shusterman present mental illness with empathy, respect, and a desire to break down certain stereotypes and stigmas surrounding SAD and schizophrenia. However, my focus on ethical representations of mental illness has also led me to challenge some of the ways in which mental illness is presented, particularly by Kinsella.

The first ethical issue centres on why I am so ready to accept the representation of romance in *Challenger Deep*, but not what is depicted in *Finding Audrey*. This issue is also significant for the way in which it reveals embedded concepts of gender in YA fiction.

As noted previously, I do not believe that representation, or the inclusion of romance in YA novels is inherently negative, or should be removed entirely. In fact, that would be an unethical thing to never represent, as it would be a lie to say that young adults with mental health issues do not experience romance. What it does come down to is the contextual ethical representation of these romances included alongside the discussion of such a serious topic as mental illness.

These examples are not stand-alone and are tied up in preconceptions about the protagonist’s respective genders, especially Audrey’s. In the context of healing from mental illness, Caden’s relationship, I argue, is treated more ethically than Audrey’s. It is particularly troubling that love is depicted as the cure for the female protagonist, while the male protagonist relies on a combination of professional help, familial support, friendship, and his own inner determination. This perpetuates reductive stereotypes of young women as damsels in distress.
who are in need of saving because they lack the inner resources to do this for themselves.

The second ethical issue that I have profiled revolves around voice. Mike Cadden advocates double-voiced discourse as a tool for creating “equal…power relations” between the main characters in order for the young adult reader to be able “to see the opposing ideologies at play” (146). I have argued that Challenger Deep should be considered a double-voiced novel, while Kinsella’s Finding Audrey does not fit this categorisation. This raises important questions about the potential future of YA novels. Is double-voiced discourse the only viable option or are there other approaches that could improve ethical representation? As discussed, double-voiced discourse is not necessary in order to establish ethical representation within novels with themes of mental illness. While first-person may be linear, and come across as pushing a single line of thought, it does allow readers to see the emotional strain protagonists go through, and personally connect to these stories. Indeed, Emma Heyde argues that first-person narration “exercises the intellectual and emotional facilities of its readers as never before” making them “work harder when they read” (67-68).

Ethical representation essentially comes down to the author’s choice of how they wish to frame and discuss these issues. Thus, in Finding Audrey the ethical issue is not so much about Kinsella’s choice of voice but the deliberate and unsettling silence that surrounds her discussion of bullying and her over-reliance on damaging tropes of female submissiveness and passivity. Likewise, in Challenger Deep double-voiced discourse is but one of the techniques Shusterman employs—along with his personal insight into the effects of schizophrenia (both positive and negative) and his complex narrative structure—
to provide a layered and nuanced insight into living with mental illness. Here, Booth’s discussion of ethics becomes pertinent. He argues that the crucial thing is that authors analyse their own work critically, looking at its context, who will be consuming the information they provide, whether that information is inaccurate or harmful in any way, how it may affect the reader, and whether it could be useful.

Of course, some could argue that asking the writer to critically analyse their own work is unethical, because it is asking authors to change their own creative process, and potentially their stories, just for the audience. My proposal here would be to follow Booth’s contention that responsibility does not simply lie with the authors. Readers should think critically about the information they are being given and question what they are reading for themselves and whether it is ethical or not (Booth 9). This may be more difficult for a YA audience, because they may not be equipped with the means to do so. Perhaps then this shows the need for ethical criticism to be at the forefront of our engagement with literature, as Booth promotes, so that readers of any age are able to think critically about the information given to them.

The creative process of this thesis is one that has been in production for many years, going as far back to when I was first experiencing my mental health symptoms at age twelve, and desperately searching within books for a story that I could relate to. It was central to my hopes that I would find a story that would help ease some of the confusion and fear that a lot of mental illness sufferers experience when first diagnosed. Over the years, I found a number of mental illness narratives, but there were too many love cures and not enough personal growth. This fuelled my desire to write my own story influenced in part by my own experiences, one that I would argue is ethically viable in its own position.
Much like Shusterman’s personal advantage of having insight into schizophrenia from multiple people, my benefit of having personal insight, and the hard-won ability to voice the reality of mental illness from the inside is the ethical advantage of my story.

The creative component of this thesis is single-voiced, but my intention is to demonstrate that authors do not necessarily need to employ double-voiced discourse to be ethically viable. Indeed, the use of first-person single-voice can help readers to relate to others who are dealing with mental illness. Cadden’s original intent for double-voiced discourse was that it is necessary to ease the ironic relationship between reader and writer. My story is shaped by first-hand personal experience of a young adult dealing with mental illness, and thus does not erect as many barriers between reader and author, removing the direct need for double-voiced discourse.

In terms of other voices in the text separate from the protagonist, I have employed the group therapy scene as a way for the main protagonist’s viewpoints and understandings of mental illness to be grounded in experiences outside of her own. This understanding is central to her healing process. So, even though I did not adopt double-voiced discourse as a structural narrative device, I did build into my story an integral facet which reveals the ethical benefits of being exposed to other perspectives and stories.

My writing also operates in dialogue with YA texts, in particular the lack of positive adult role models, which are evident in novels such as Laurie Halse Anderson’s *Speak* and Ellen Hopkins’ *Impulse*. One of the positive aspects of both *Challenger Deep* and *Finding Audrey* are the portrayals of parents and health professionals, who do have limitations, but also provide help and support for
young adults contenting with mental illness. My own writing likewise seeks to resist the impulse of so much YA fiction: that of making the adult the enemy. The heroine’s relationship with her parents is fraught, but her mother, in particular, is capable of empathy. I have deliberately sought to portray health professionals in a nuanced way; accurately representing their desire to help, while acknowledging that for many young adults coping with mental illness any kind of intervention can be seen as intrusive and undermining of independence.

*Under All This Silence*, the creative component that follows, aims to provide a frank and truthful insight into social anxiety disorder. The heroine’s voice is at times strong and at times fragile, reflecting the inner turmoil this condition creates. The novella offers some hope to readers, but acknowledges that healing can be slow, partial, and, at times, elusive. Above all, I try to enact the ethical principles discussed in the exegesis, lifting the silence that plagues representations of mental illness to give both my heroine, and the condition she is contending with, a voice that is empathetic and too little heard in the pages of YA fiction.
Under All This Silence

Loren Thomas
**Week One**

“Get out of the road!”

Blaring horns and voices follow the dead silence of our car. Literal dead silence. This thing ain’t moving.

Mum twists the key in the ignition, mumbling over and over, *Oh God, please don’t do this right now*, while the engine makes a pitiful moan. After the fifth failed turn, she slams her hands against the steering wheel and grips it. Her knuckles turn the same white as our bathroom sink. I keep my eyes down, look at the skin around my nails, and pick at the loose edges. I hope this is all a nightmare.

Another horn blares and I worry Mum’s going to jump through the roof. She stares directly ahead, eyes wide.

“What do we do—what do we do—what do we do,” she mumbles under her breath. Her eyes are like a hunted animal’s. “Get out and push, Danielle.” Her voice is a trembling instrument.

“Get out and push, please.” Her hands twist the leather wheel like she’s revving a bike. The car doesn’t get the memo. “Come on, Danielle.”

“Mum, I can’t.” What a wasted pitiful plea to avoid being thrown into that hurricane outside.

“Please, Danielle, just please do it. For once in your life, just get over your own problems to help me, please.” The desperation on her face is a system override.
I give a quick nod, open the door and step out into a minefield of *Move your fucking car! Dumb bitch! What the fuck are you doing?* flung through the light summer breeze.

I run behind the dinged-up boot and get in position to push.

“Hurry up!”

“I’m fucking late ‘cause of you!”

In the car behind me, the man signals me to move faster with a friendly middle finger. I turn back and push as hard as I can, trying to forget the pile up behind me. Mum angles the car as close to the side of the road as she can get it, which isn’t particularly far because there’s a massive guard rail between the road and the side of the hill.

“Move it!”

The dust from the boot settles into the lifelines on my hands. I shift them into a better position. Sweat mixes with dust making a disgusting layer of grime where my hands hit silver paint.

“For fuck’s sake!”

Inhaling petrol fumes I cough up my energy reserves. Some asshole wolf-whistles as he passes our car going the opposite way.

I’d prefer someone swerve and crash into us. Wouldn’t that be a treat?

“Move out of the God damn way!”

“Danielle, please push the car!”

“Hurry the fuck up, you dumb bitch!”

I lean my head against the boot breathing in the congesting dust and petrol.

“Please!”

I just need to stop for two seconds.
“Come on, we need to get out of the way, Danielle! For God’s sake, hurry up and push.”

Just two seconds where I’m not being screamed at.

“Oi! Move it!”

I can’t take my eyes off the scuffed toes of my sneakers. The heat pushes me towards them. Sinking. Would be grand right now. To just sink. Deeper into the gravel. Bulldozed until I’m like bubble-gum in the tarmac.

How many people are late because of me? What if they were on their way to a funeral or a wedding and I’ve destroyed everything?

I could push this car out of the way and fix the problem so easily, but my arms are jellified. My bones and muscles have done a disappearing act and I’m ready to be chewed up by someone’s tires.

The clap of running feet behind me. Hands twice the size of mine shove me out of the way into the guardrail, grab the boot and push. I’m flung out of my own mind and back into a scene of panic. The glare from the sun bounces off the cars stuck behind ours, driving my eyes from them. I clamber over the silver barrier, pulling my hands back from the hot metal, and sit against the bank of the hill behind me digging my fingers into the dirt that comes rolling down after my descent.

We’re stuck at a one-lane intersection in peak traffic. 3.30pm. Parents are trying to pick up their kids, stressed. They just want to get home after their long day. They don’t want to be stuck in the middle of the road while some girl causes the whole city to stop for her precious little meltdown.

John Doe pushes the car through the intersection and takes the first left. Someone with a head on their shoulders that actually works. I follow, meandering
over the shifting dirt of the hill trying not to fall over the guardrail. The backlog of traffic flows through giving its last heave of abuse, bitch, idiot and other degrading words, accompanied by a freshly chewed apple core that lands with a squelchy thunk against my leg.

*I’m so happy to be alive right now.*

I reach the grass shoulder where he pushed the hunk of junk, and sit behind the car. It shields me from the road just in case there are any stragglers in the abuse parade. The guy’s wandered back to his car by now and Mum’s in the front seat calling a tow company, I guess. She’s mad at me. I bet if she could, she’d just leave me here to burn on the side of the road.

I would.

Pretty useless daughter.

Mum gets out, slamming the door as she walks around the bonnet to where I am.

“Really wasn’t the time to just shut down, Danielle. It was fucking dangerous. Get your act together.” Her voice is terse and shaking from stress.

“I’m sorry,” I whisper. She can’t hear me over the traffic.

She doesn’t say anything more, just paces back and forth keeping an eye out for the tow truck. Her anger slaps me in the face with each turn of her heel.

“I’m sorry,” I try a little louder. No response. She kicks a stone at the car. It makes a plonk and leaves a nice little scratch in the paint. She huffs out a breath then goes back and sits in the front seat.

There’s a thin layer of gravel thrown into the grass I’m on. The edges gnaw at my skin. Tools rising to meet thinning flesh. I pick a stone up and rub the point up
and down my arm, just deep enough for it to be a welcome distraction. My breathing slows. It only bleeds a little.

The tow truck arrives after about an hour of the sun embedding itself under my skin. It pulls over, spitting up layers of dust. The driver leaves the truck running so he has to yell at us over the noise as he hoists the car onto the back.

“Get in the truck, Danielle. He’s taking us to the mechanic’s.” She sighs and lays her hand on my arm stopping me before I get in the truck. “I’m sorry for earlier, by the way.” She gestures to the car on the back of the truck. “It’s been a tough day for both of us.”

I nod and give her a half smile of acknowledgement. She smiles back and lets go of my arm.

I pull myself into the middle seat with Mum and the driver on either side. The stench of oil is so pervasive I want to puke. On the dash, an old soft toy that was once a lion stares back. One of his eyes gone. Little bits of fluff stick through the hole.

“So, were you on the way to pick up your kids from school or what?” I don’t think he quite understands that the rage wafting off Mum isn’t an invitation to start conversation.

“No. We just came from an appointment.” An appointment for me. My heart scratches itself against my rib cage. If we weren’t going to see my psychiatrist we’d never have been in this position, but she doesn’t say anything about that. She leans her head against the window and closes her eyes. I watch as she takes deep breaths, in and out, in and out. The soft toy’s eye is on the floor below her feet. Its stare only guided by the direction the truck throws it in.
“Oh, so you don’t work?” His voice is like a speaker against my ear. The change in gear jolts us forward. Mum somehow stays firmly in her seat, whereas I’m flung inches away from the driver. He smells like the oil on the seats. I right myself, hugging my body even closer than I thought possible.

“I’m looking for a job at the moment, actually,” Mum replies, still with her head against the window. She opens her eyes and stares straight ahead, twisting her mouth into a grimace. It’s safe to say I get my occasional whispers of snark from her.

“Huh. Nice for some.”

I don’t think he’s putting the pieces together.

“Well, it’s not nice when you’re struggling to pay the bills, that’s for sure.” She twists her head to look at him with a piercing glare that has to make its way through me to get to him. The force of her anger is almost physical. He either doesn’t care or doesn’t notice.

“Could be worse, though. At least you have all that extra time on your hands, right?” He chuckles to himself like he’s just said something profound.

Mum gives in and just nods. I think of all the ‘spare time’ she has writing out cover letters and applications, going to interviews weekly only to be turned away.

I guess she probably doesn’t want to start an argument when she’s already feeling like she’s been trampled.

I move my hand over, and immediately regret it. A slick of oil washes over my fingertips sticking like tar. How many washes will it take to get it off? I wipe it on a ‘clean’ piece of seat. Now my hand’s been feathered with dust.

Through the windscreen, the trees blur past transforming themselves into one solid forest. If I could blur into them I’d be a happy disappearing girl.
The driver drops us at the mechanics with the car. Luckily we still have our free one-time-only tow from the insurance company so it doesn’t cost anything.

The mechanic’s is a drab grey concrete building in the middle of tradies and building supplies stores. The windows are littered with advertisements for cheap oil changes, WoF’s, and Regos. Mum goes in and talks to the man at the reception and I wait outside watching the stress embed itself further into her forehead as they discuss the cost of fixing the car. There’s a lot of gesturing, regretful looks and shrugs from the man. I guess bargaining is out of the question.

I sit down against the grey wall, the rough grooves scratching my back, watching the workers leave. A few of them smoke cigarettes. They laugh and joke with one another. When they walk past me, heading back to their cars, they don’t even look at me. I’m just a part of the concrete wall.

Mum walks out of the mechanic’s. The man from the reception follows, locking the door after him. She clutches her wallet to her chest and frowns as he gives an apologetic goodbye, lights up a cigarette, and walks to his car.

“We’re taking a bus home.” She doesn’t wait for me to reply before speed-walking down the road.

“I’m sorry, Mum,” I say breathlessly, jogging to catch up with her.

In a hurried tone she replies. “You can talk about it with Dr. Smith tomorrow.”

I feel like the ragged soft toy on the dash as I scuff my shoes on the tarmac jogging after her.

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“How are we going to afford this?” Dad’s head is in one hand, his fork piercing stir-fried veggies in the other. The main, and only, course tonight. Half of them are still cold despite being fried to soggy bits. The teriyaki sauce barely disguises it. At least there’s plenty of rice, though.

“I don’t know, how about we win Lotto?” Mum doesn’t even bother looking at him to get his reaction.

“Really don’t need your sarcasm right now. Work was tough today.” He sweeps his hand through his waxy hair. Specks of dandruff stick to each strand hanging on for dear life, lest they fall into the food trough below, the down-trodden bags under his eyes look like a series of rock climbing walls.

“And I don’t need questions that you already know the answer to,” Mum snaps. “We can’t afford this! Simple. We’ll have to sell something.” Her glare is a slap to his face. Eyes a murky brown. The grey of her hair starting to seep through the dark brown tones at an ever-increasing rate. He stops looking at her.

Job-hunting’s tough.

My eyes lock onto the hollowed grains of the dining table. A Value-Mart specialty. Only the finest of materials for the finest of customers.

I don’t dare move in case I become enemy no.1.

“What do we have to sell? There’s nothing.”

“I’m aware of that. But we’ll have to scrounge up something.”

I stir the soggy vegetables around the edge of my plate missing any sauce. I wish I could scrounge up better food. At least this is easy to swallow. Not too much chewing involved. When my anxiety gets bad swallowing any type of food is out of the question. Unless it’s plain, and simple like French fries, a monotone
flavour and texture that’s easily washed down with water. If it’s not, well let’s just say you might want to bring a rain jacket in case of splashes.

“We can’t even afford to buy real vegetables anymore.” Dad mopes. He picks up a bean and lets it flop back onto his plate with a squelch.

“I think we’re all aware of that, Mum retorts. She shovels a fork full into her mouth. “Could sell some of my old jewellery. I never wear it anymore.” Her fork drops onto her clean plate. The clanging reverberates around the table.

I wonder how long it’ll be until we’re licking the plate clean like when I was a kid. Maybe if I try it now they’ll stop arguing out of shock.

I pick my plate up.

Dad looks at Mum with a sheepish gaze. “We could ask your sister for some help.”

I put the plate back down. No need to make this worse.

Dad’s sent her to the deepest gate of hell.

She puts her elbows on the table and her head in her hands. “I am not asking HER for help. Ever. Even if we’re starving, I will never accept any money from that woman.”

Sounds like my cue to leave.

“Come on, don’t be so harsh.” He stirs the lone bean around and around.

“She’s not that bad. Plus, we don’t have many options.” Dad always tries to soften the tension between Mum and Aunt Anita, but it’s pretty hard to wipe fifty years of bickering.

“No, I’ll sell the jewellry.”

“But—”

“For God’s sake, don’t you understand?”
Here we go.

“We’d be under her thumb forever. She’d never let it go. I’m sure she’d let the whole family know, so everyone praises lovely Anita taking care of poor Celia in her time of need. I don’t want that. From anyone. Especially that woman.”

Hiding her hatred for her sister isn’t one of Mum’s strong suits. Except from our relatives, of course. We must play Happy Families at all cost.

Taking my plate to the sink, the low hurried whispers start. The talk I’m not supposed to hear. ‘Adult talk’ they’d call it when I was a kid, but I’m all grown up now so they can’t drive me away with two simple words.

Tap to full blast, the pipe sputters out budget... poor... stress... benefits with its scream of water. I scrub round and round my plate watching them flail down the sink. I’m so consumed, I’m waiting for my body to turn to liquid and slip down the pipes. Then I’ll be drowning too.

Yellowed nylon curtains stop the whispers that twist and flow through the summer air before they get to the neighbours with ears against their walls. Do they know our secrets? Keep them to themselves as loaded weapons for later use? Do they wonder when the foundations of this house are gonna CRACK?

The knife jingles as it lands between my feet, the handle falling on my big toe. A sweet ache for dessert. The pain offers a few seconds of relief from the spinning around me. If only I could do it every time I spun out of control. I pick up the knife and stack it on my rinsed plate.

Dirty dishes and hurried whispers smashing against stainless steel follow me down the hallway past crooked family pictures to bed. Eyes from younger Danuelles gaze at me with misguided smiles, watching their future wallow in its failure. I wish they would’ve said something before it got this bad.
First day of mental illness boot camp for teens and there’s a carnivorous pool of them in one of these rooms. Pacing back and forth, I’m sure, whispering to each other theories of what’s wrong with me, gnashing their teeth across each detail, laughing like prisoners who’ve heard fresh meat’s coming, tearing each other’s hair out over who gets the first swing. They want to rip me to pieces.

Not hyperbolic at all.

I’m on my feet pacing back and forth through the reception, which no one ever seems to be manning, so I don’t care if I look like a freak. Back and forth to the exit. Each time I reach the door I imagine walking out and never coming back. Forever the ravenous crowd will wonder what happened to the new kid. What became of this mysterious creature we never met?

And I’ve forgotten which room I’m supposed to be in. Great. This is a great start.

A woman comes out of one of the rooms and heads for the door. I jump and walk to the seats as if I just came in. No, ma’am I was not pacing like I’m about to receive the death sentence, not at all. The air conditioning unit rattles its laugh at me. Even inanimate objects think I’m a joke.

The stick figure man and woman point down the hall to the toilets. I could just lock myself in there instead of going to the group session. I see it now, all the psychiatrists banging on the door trying to counsel me through the slim gap underneath. Trying to get me to unlock it like a good child who’s got themselves stuck in a restroom. My frightened form crawls on top of the toilet. I’m not here if
you can’t see my feet. Crushing my ears in, rocking back and forth, the plastic toilet cover creaking under my fears. Bad idea, clearly it would bring too much attention to me, then they’d have to tell my parents about my freak-out...

The squeak of the front door makes me jump. A young girl, her red hair sweeping behind walks through into the staff room. That’s it, that’s the room!

I think…

My brain tells me to go in ‘cause that’s where I need to be and I know it, I’m sure of it.

But then it sidles up to me.

Too close, too confident. It whispers: what if you walk into the wrong room and they tear you up like paper under your nervous fingers? Cutting you down smaller and smaller until you’re just a speck on the ground.

What if… What if… What if…

Shut up, shut up, shut up.

“Danielle?” Dr. Smith is in front of me, his hand with two broken fingers taped together, signals the staff room. “Would you like to come in?” I stare into his obviously dyed hair, flecks of grey framing it. A clear cover up of his advancing mid-forties. Maybe he broke his fingers attempting some extreme sports overestimating his body’s capabilities.

My doubts shift a few seats over, giving me some breathing room, but they’re still too close to let my guard down.

Why am I like this?

As I follow him into the room, he points to a seat between two others. I’m grateful, unsure of how long I would’ve stood by the door otherwise.
The room smells like musty tea has been sitting for a decade and everyone just forgot about it.

“Would anyone like a hot drink?” He rubs his hands together and looks around the room. Poor circulation? It’s summer right now and definitely not cold in here. Water would’ve been a more appropriate offer. The eighties air conditioning units rattle away, but I don’t think they’re even pushing out air. I’m glad the seats are made from cheap fabric and not leather or there’d be many unfortunate sweat stains today. The loose threads scratch at my thighs as I sit, and I shuffle like cockroaches are converging on my legs.

Some say yes to the drink offer, others ask for water, but I decline, unsure of how this works yet. I’ll watch and maybe next time I’ll be calm enough to have a drink.

I’m insane.

Good thing I’m here with other people who are potentially as crazy as I am, right?

Each scrape of a chair leg on the lino makes my skin crawl. One kid across the table from me has her arms crossed rocking in her chair. Smooth brown hair sways with each swing, eyes closed, and a grimace set in the lines of her forehead. She lifts herself up, pushing back so her toes barely touch the ground and then lets herself plummet hitting the ground with a smacking scrape. She’s the most entertaining thing here and I doubt she even knows how much she’s pissing me off. Or maybe she’s just being an asshole.

Dr. Smith plants everyone’s drinks in front of them and sits at the head of the table. Judge and jury. I wonder whose sentence we’re giving today?
“We have a new member of the group today. Everyone, this is Danielle.” Oh right, mine.

A couple of smiles are thrown my way.

“It’s your first day here, Danielle, so don’t feel pressured to talk. You don’t have to if you’re not up to it. Think of today as a learning experience.”

Good. Perfect.

“But if you do want to say something, please feel free to do so.”

I won’t, but thank you.

Lino scraper looks at me. “God, you’d think you’d been asked to speak to the Queen of England with that look on your face.” She smirks at me. “We aren’t going to hurt you or anything. It’s only talking.”

Maybe if I act like a corpse she’ll stop.

“Don’t mind Kay, Danielle. She has a unique sense of humour.”

Humour, right, of course.

They go around the room, each kid different from the next.

Sam is riddled with acne rolling down his cheeks and neck pointing to the sharp collarbones rising through his T-shirt. Eating disorder, the doctor says. Grace, the girl who came in before me, has red hair thin like muslin. Purple rings shadow her eyes and her mouth droops. Insomnia. She pulls a tissue from her pocket, and her hand trembles.

Kay (lino-scraper) has some serious anger issues I wouldn’t want to come in contact with. Self-harm as well, by the looks of the scars rippling her forearms. I pick at my scabbing cut from the rendezvous with the road-side gravel yesterday. I thought that was a glaring signal, but it’s an accident in comparison to her laddered arms.
Note: take anger out on self in less obvious manner.

Dr. Smith asks how everyone’s week was. A general consensus of yeah, alright floats about, which is clearly not enough detail for the doctor. He takes his glasses off and cleans the lenses with the bottom of his button-up shirt. His shirt is so sweaty I imagine the blue stripes rubbing off onto them clouding the glass. He lifts them and stares at them from a distance, gauging the cleanliness, and clears his throat. The dye didn’t leave his shirt.

“Kay, you brought up your inability to relate to classmates this week, didn’t you?”

She gives a “Mhmm” in reply.

“Why is that? Do you want to flesh it out a bit for the group?”

“Nope.”

He gives her a long stare like he’s done this all before and knows how it ends. She sighs through her nose. “They don’t want to be around me.”

“Do you know why?”

“’Cause they’re scared.”

Her frankness is refreshing.

“Why do you think they’re scared of you?”

She throws her arms up and makes a face in mock exaggeration. “I really have no clue Dr.” She slaps her fists on her thighs. “Could it possibly be my tendency to get angry when I’m around fuckwits?”

He nods as she leans back in her chair scowling.

Her outburst leaves the group silent for what feels like minutes but is only seconds.
“Well maybe if you weren’t such a bitch all the time people might want to be around you for more than five minutes.” Sam breaks the silence with a sentence that I definitely would not have picked to be the best thing to say right now.

“Bitchiness drives people away, you know.”

“Maybe if you didn’t pop your pimples in public people would choose to sit next to you, Sam. Pus drives people away you know.”

“See? Again with the bitchiness! Do you even want friends?”

“No. Why would I? People are shit.”

“Why are you complaining then?”

“’Cause he told me to! We’re in a place where we complain, Sam!”

Kay crosses her arms and stares him down. They must have been coming here for a long time if they’re that comfortable together.

“Well, looks like you both have things you need to work on, don’t you?” Dr. Smith says.

What? You’re not supposed to let them talk like that to one another. You’re supposed to tell them to stop being mean, get them to shake hands, and keep the rest of their negative comments locked away in their young repressible minds. I really doubt this is one of those therapies where you say the first thing that comes to mind.

As much as I don’t want to admit it, we do have similarities. Lino scraper and I, I mean. I’m not exploding with anger and as much sarcasm, but everyone in my class does seem to avoid me like I’ve contracted some incurable virus. So many days went by where I’d find a quiet spot during lunches that everyone thought were too short, but I felt were way too long. Summer holidays and the end of my enforced schooling years put a stop to that, though. No more meandering through
backhanded comments, just the great trek through the unforeseeable future to contend with now. I’m not sure which is worse.

Sweat infests my palms. I pick at the last of the scab on my arm and flick the dried layer onto the floor. I don’t want to think about the future, when I can’t even manage talking to people. The broken air conditioner laughs at my soaked body. All of this is too much.

The faces around me prattle on, caving me in. I don’t want to know who they are. I don’t care. How is this supposed to make me better? Seems like the best way to wallow in self-loathing, to be honest. Constantly remind ourselves of why we’re failures.

The walls are a healthy tea-stained cream, bland to stop our emotions getting too expressive. I’m dissolving at the bottom of this china cup.

The clock ticks over and over. The tick tick tick brings me closer to the end and I breathe in time. I’ve survived this second. I can survive the next billion of them in this group-hell.

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Round two of interrogation for the day and about the tenth time with Dr. Smith this year. A new office again, ‘cause the government is too cheap to fund the overworked and understaffed public health system, as I heard one of the counsellors whisper to another last week. I guess that explains why we have group in the mouldy staff room disrupting employee’s abilities to have their lunch at a normal time. I’ve been coming to this place for a few months now, and have only ever had a session in the same room a couple of times.
“How were you during the group today?” Dr. Smith shuts the door and clears his throat.

“Fine.”

“Are you sure? You looked quite uncomfortable.” His shoulders fold under his frame as he sits.

“Completely fine.”

He interlocks his fingers and leans towards me.

“It can be hard listening to other’s experiences, especially when you haven’t encountered it before. The others can also be a bit intimidating at times. Kay has quite a lot of … confidence.”

That’s for sure.

I nod again hoping he will stop with his dissection. There are only so many layers before he finds vital organs, and my skin is thinner than cotton.

He doesn’t linger on the topic, though. “Your mother called me this morning. Told me about the car breaking down.”

Of course she did.

“She wants us to discuss it.”

Of course she does.

“How did you deal with that? It’s a stressful situation for anyone, but I can only imagine it must be worse for someone in your position.”

My fingers start drumming my thigh, while I look around the cramped room for something to focus on. This is the most boring room I’ve ever been in. Not even a beanbag or pot plant to brighten the mood.
“I guess, yeah.” Sighing a bit so I don’t look too fussed. I like to think bad acting is one of my strengths just like terrible jokes. I’m probably wrong about both.

He looks at me to continue, I break away keeping my insistent rhythm going. I should say something, ‘cause now I probably seem too relaxed about the topic. “I just stopped. I couldn’t do anything.”

“Why was that?”

I shrug, tapping away like a metronome. There’s a layer of speckled black spots in the left corner of the room. Might be mould, but then again it could be a healthy layer of fly crap. There’s no air conditioner in here or any windows so the sweat is starting to stack, building a fortress. His under-arm sweat stains have spread to the front of his shirt. I don’t think he even cares. Someone really should break out the cash for a better cooling system.

My analysis of the room must make it look like I’m thinking, because he doesn’t pressure me to answer. I push my hair back, sending my tapping down to my feet.

“I’m not sure. I just kind of shut down, I guess.”

Dr. Smith raps his pen against his notepad mimicking my rhythm. I stop tapping and look at him.

His eyebrows lean towards one another as he leans towards me. The wooden legs of his chair creak as he shifts his weight.

“I understand it’s difficult for you to talk about your anxiety, I really do, but you’ve been coming to me for a few months now and we’ve gotten nowhere.”

Guilt entangles itself around my throat. Teeth clench to keep my nervous reaction from coming through.
“In order for me to be able to help you get better, just like for any of the other young adults in the group session, you need to talk to me. You need to explain to me what it is like for you more than just a few words here and there, because as we’ve said before, everyone’s experiences are different and yours are no exception. So please try your hardest to describe them to me so I can help you.”

I pick at the skin around my thumbs. Shouldn’t they just know how to fix me? That’s what they’re paid to do.

“Just try to talk to me. It’ll make this easier for both of us.” The crows-feet around his eyes seem so earnest they peck more lines into his skin.

Deep breath.

“I wanted someone to swerve into me. Fall under someone’s tires or something. So I gave up and stopped, and Mum was mad, and everyone in the traffic hated me, and yelled at me, and I just wanted to stop.” My hands shake by the time I’m done, and that was only three sentences. Cold air creeps its way up my back encasing me, despite the heat. Panic. I’m just a shivering, panicking mess wallowing in my own self-pity.

I blink some form of focus into my eyes waiting for him to finish writing down what I said.

“So, you want to die?” Sweat rolls down the side of his face and under the neck of his shirt.

I try to check my own face isn’t leaking, but I can’t tell through my sweat-swallowed palms.

“No. No. I don’t know. In those moments I do. Not every other moment of my day, just when I get like that.” I run my fingers through the hair falling over my
shoulders. Yanking knots out to keep myself busy. A knot for a breath. I’m going
to have to shower when I get home.

Nod, nod, nod from the doctor.

Tap, tap, tap on my leg from me.

“Did your anxiety stop once the problem was over?”

I shake my head. “No.” Tap tap.

“What about the people in the cars? Did you worry about what they thought of
you at all?”

Their eyes seared judgment onto my skin and I’ve been dragging those
mutilated layers around since. Each word they screamed rolls through my head
like marbles downhill. They bulge out of windows, hammer meaty skulls against
a thin glass sheet that separates us while I dream. There’s no doubt judgment will
gnaw at my heels for another week.

But I don’t tell him that.

“Yes. Constantly,” is all I manage through my jilted breaths. My panic attack
languishes in the middle of the room.

“Why do you constantly think about them?” He raps his pen against his
notepad again.

“Because I’ve ruined their day. Made them late for whatever. Probably got
them into trouble with their bosses or something.”

“But you didn’t ruin their day. You didn’t cause the car to break down. So why
is it your fault?”

“I don’t know, because I was there in that space and time. So it’s my fault.”
The skin under my nails is ripe and ready for harvesting.

“Would you say it’s your mother’s fault as well?”
“No …” I will my fingers away from my precious hair and let them twist and tear my loose skin.

“Why not?”

“Because it’s different.”

“How?”

“I don’t know, it just is.” Breaths slow with each new rip. I bring my heart rate down to somewhere reasonable.

“It isn’t different at all. It was just an unfortunate uncontrollable incident where you were in the wrong place at the wrong time.”

He’s right, of course, but those incessant doubts at the back of my skull won’t leave.

“Simply knowing that doesn’t ease your anxiety about the situation though, does it?” He flicks his eyes to my hands, but doesn’t say anything about my shedding skin.

I clear my throat. “Nope. Still feel just as responsible as before except now I also feel like an idiot.”

“You shouldn’t. You’re not able to control your anxiety.”

Replace ‘anxiety’ with ‘powers’ and I sound infinitely cooler.

“So then tell me how I’m meant to ‘control’ it.” The doubts laugh with me.

“I wish I could give you a set checklist in order to deal with it, but unfortunately that’s not how anxiety works.”

My fingers interlock.

“You’ve made good progress today. I hope to see you talking in group next week.”
It must be the day for uncomfortable conversations I can’t escape from or something.

“We’re selling the house.”

I chew on my piece of ‘steak’ for another minute, listening to knives scrape plates. It takes three swallows for the mashed flesh to go down.

We have found the cheapest of cheap meats.

“What, why?”

“We can’t afford the mortgage anymore. Too expensive in our current state.”

He cuts, chews, and swallows without looking at me. Mum gets a lingering side-look from him.

Can’t afford our tiny little box consisting of two bedrooms, one bathroom, kitchen and a living room, which we pretend is open-plan but really there’s just no room for more walls. Oh, how the middle-class has fallen.

I slice more meat, shifting it under mashed potatoes and beans. Hidey-hole for my unwanted toys. I don’t think I could eat it even if I was starving. Does scrap meat have nutritional value other than calories?

“I could stop going to my counselling.”

Mum and Dad reply simultaneously with a flat “No.”

“But if we can’t afford it…”

Dad cuts me off. “Dropping your appointments wouldn’t be enough. They’re not the problem. Besides, they don’t cost us much on the public system.”

Questioning him further is probably a bad move, so I shovel some potato into my mouth. The lump of leather hits the back of my throat and I gag. I forgot I hid
it there. My heart jumps into fourth gear immediately closing entry through my oesophagus. Mashed potatoes ease their way past, but the meat jams the pipe. I take a sip of water hoping that will ease it. It doesn’t. Now it’s just watery mulch. I keep chewing, even though it’s a smooth paste, ‘cause if I just hold it it’s bound to come back out. I breathe through my nose, lean back, count down, 3… 2… 1… and swallow. It hurts as it tries to push through the blockage. I clench my lips stopping the dribble of overflow from escaping onto my plate in front of me.

Mum and Dad’s heads concentrate on their own meals too much. I guess they saw and heard everything then. At least they’re quiet about it. Is it from politeness or are they just over my problems?
The ever-changing roulette of tiny appointment rooms never ceases to entertain me. Each one comes with its own unique flair. Some have little bits of mould poking through the roof, and others have toys for the unfortunate kids who have to come here. Some have washed out inspirational posters telling you to “kick the habit” and that “real men don’t give in to the drink”. This one, though, has a distinct hole in the wall, sloppily concealed by a dying pot-plant. Was it a fist or someone’s head?

“How is life at home, Danielle? You don’t talk about it much, Dr. Smith asks.

“Not much to talk about.”

“Come on, there’s always something, right?”

“I guess they occasionally argue,” I say reluctantly. “But that’s normal for any couple who’ve been together for twenty years.” I click my knuckles and he recoils.

“Well it depends just how ‘occasional’ these fights are and what the subject is. If it’s about what we’re, I mean you’re, having for dinner that night then, sure, it’s normal to an extent. But if it’s more serious issues that can’t be resolved in a few minutes, then maybe it’s worth discussing, don’t you think?”

My instinct is to sew my mouth shut and cover it with cement. I shouldn’t be talking about other people’s issues, and I know he’s prying for more.

Then I remember the admonishment I got last week about not speaking. Well if he’s going to make me speak about stuff I don’t want to, then I should at least get something out of it.

“What happened to your wall?”
“Huh?”

I nod in the direction of the hole. He swings his body round to look.

“Was it a patient? Did they lose it and shove their head through the wall?

Looks too large to be someone’s fist. Also, I think a poster would’ve done a better
cover-up job than a plant, to be honest with you.”

“Oh, I didn’t … That’s not what we’re talking about right now, Danielle. We
were talking about your parents.”

I’m antsy about the wall. I just want to know what happened. Fill in the gaps to
the story. You can’t leave it unfinished like that. Surely I’m not the only person
who’s questioned the giant gaping hole. You can see wires in there! That’s got to
be a safety hazard.

“Will you tell me what happened to the wall if I talk about my parents?”

He nods slowly, his eyes lighting up. “I will tell you all that I know about the
wall if you answer my questions, it’s a deal.” He’s holding back a grin.

I start in the easiest place. “My parents are selling our house.”

“I’m sorry to hear that. How long have you lived there?”

“My entire life.”

“So it must be important to you, then?”

I shrug. “I guess.”

“A lot of the time these things can become important to us without us even
realising it. It might be difficult to leave, or you may feel a lot of anxiety making
such a large change.”

“It hasn’t sold yet. Might not even sell. It’s a tiny piece of crap. No one’s going
to want it.”
He nods. “There’s still a very real possibility that it might, though. Do you know why they’re selling?” He writes like he’ll never get the chance again.

“They can’t afford it anymore. I offered to stop coming to my counselling, but they said it wouldn’t make a difference.”

“I’m glad. I think you’ve been making good progress here. It would be a shame to stop so suddenly.”

“I still feel guilty, though.” I mumble, “Spending all this money they don’t have on me.”

“They’re trying to do what’s best for you and for them. Please don’t take all of this on yourself.”

I nod.

“Has this caused any tension at home?”

I think about the whispered, under-the-breath fights each night. The jewellery box slipped into Mum’s purse as we left, the yelling I hear when they think I’m asleep, the bags of budget-frozen vegetables, and the threat of Aunt Anita’s charity cheque.

I mull the word “no” in my head. It would be such a relief to lie. Pretend it’s not real.

“Yes.” I breathe out the word with a croak. It tries to stick to the back of my teeth. Stay inside where it’s safe.

I wait for the barrage of invasive questions, but instead he just looks at me nodding. He bites his pen once, and says, “Thank you for your honesty.”

He doesn’t continue. I sit and wait. He’ll pry some more, no doubt.
“Now to honour my part of the deal. The wall has been like that since before I came to work here. I don’t know why they didn’t fix it. Don’t even know who did that.”

I sigh. He’s a psychiatrist, why did I trust this man?

How can he just not know? There’s a giant hole in one of the walls for Christ’s sake!

“But, I’ll ask around and see if I can find out what happened. There must be some good gossip out there, true or not. Even I like a good bit of gossip every now and then.”

A smile slips across my face.

As I’m leaving he asks, “Are you excited for tomorrow’s group?”

“Yeah.” I lie. I can’t exactly say no, it’s like you’ve sent me to the front line.

“Good. Well then, I hope you’re ready to contribute.”

I nod. My insides cramp at the thought of my impending doom.

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Sam, looks like he’s either going to fall over or go to sleep.

He’s telling us how it all began, his battle with the scale, and I’m fading out into my own selfish flashbacks.

“It started off with exercising a lot. I felt great and happy and I looked good.”

I can’t imagine exercising when I’m not forced to. P.E. is hell enough for a lifetime.

“My parents were happy I was getting out and doing something other than going to school or reading. They were proud. Whenever they'd call family they’d
actually have something to say about me for once. Usually it was just them rattling off my sister’s achievements, while they awkwardly stumbled around the subject of me.”

I should be nodding along and expressing concern, but the selfish part of me is pulling me into the past, making sure I’m stuffed full of guilt and my own self-deprecation.

“For a bit, they were nice to me, the name calling stopped finally after years and years. But eventually they found new names to ridicule me.”

Just listen to this guy speak. It’s the least you could do. If you were talking he’d listen to you. Maybe.

“So I cut out more food because I thought I just wasn’t right yet. If I lost more weight it would stop for good. I cut down on my calories. I would eat 600 a day. Nothing more than that.”

Sam pinches at the non-existent fat around his stomach. Rolling the fatless flesh in and out of his hands like dough. It’s quite hypnotising.

“I just couldn’t do it anymore. I couldn’t let myself eat.”

Memories that find you at your weakest are the worst.

*I don’t want to go out tonight.*

*Get in the car.*

*Don’t ruin tonight for us.*

*I can’t.*

*What do you mean you can’t?*

*You’re being taken to a nice restaurant and you’re turning it down because you don’t want to.*

*Do you know how selfish that is?*
Get in the car.

I’m dragged into this fancy restaurant with older sensible diners, gorging themselves on $30 dishes. So I order the fries. I figure potato mush will be easier to break down than a prime cut of the finest steak you’ll find in the city.

“That’s not enough. That’s not healthy at all. Order something else.”

I choose the next least offensive option. “Salad.”

“We bring you to this lovely restaurant that some will never be able to experience in their lives, and you order the salad. At least be a bit adventurous, Danielle.”

Two strikes. I hope the dim-lighting shades my anxiety.

“I’m not hungry. I don’t want to end up wasting it.”

“I’m sure if you order something now, you’ll find you’re hungrier by the time it gets here.”

The waiter looks around at a couple waiting to be seated.

The tiles under my feet chill through my shoes. The brick walls look like a good scratching post. Don’t the bricks usually go on the outside? Fancy restaurants sure are an art piece.

“Do you need another minute to decide?” He keeps his eyes on the couple, waving at them that he’ll just be a moment.

“No. It’s fine. Um, I’ll just have the pasta.” He doesn’t even acknowledge me as he leaves.

Mum and Dad go back to observing the decor, while I cower in fear of the meal that will be going to waste in mere minutes. They’ll get mad at me, and I’ll tell them all I wanted was the chips, but they’ll continue to be angry, and I’ll spend the rest of the week being punished for it.
The next twenty minutes are consumed by begging my body to just eat the pasta when it arrives and distracting myself with the art scattered across the walls.

Above my head a woman whose face is melting off performs her own c-section, the pain on her face morphing into a smile as the skin slips down her chin. On the wall opposite, a child picks flowers from corpses littered across a green field. He smiles not noticing the maggots swimming in the flesh below him.

My body doesn’t welcome the graphic paintings nor does it agree with the food that’s just been plonked in front of me.

The strands of cheese-covered fettuccine worm their way into my mouth.

I feel the mush grow until I’m pushing it to the sides of my cheeks, trying to swallow it half a mouthful at a time. I’ve made the mistake of putting too much in without swallowing the rest. It sits there, like a game of chubby-bunny. How do I swallow?

The crack of roasted potatoes sliced down the middle, gravy drenched meat gurgling down throats, desserts coated in five layers of sugar, needlessly expensive liquors to wash it down.

It’s all sickening.

My chair scrapes against the tiles, heads turn in my direction as I speed-walk around the diners with my hand over my mouth hoping it doesn’t spill out. I push open the bathroom door, dodging a woman who just stepped out of a stall, and gag my $30 pasta into the toilet bowl. Took Dad two hours to earn that.

I blow my nose, wipe my mouth, and go back to the table. My parents look like I’ve just screamed at the top of my lungs. Mortified would be the correct word for it. Hurried whispers and glares from the other customers swim around me.
I can’t focus on eating ‘cause I know they’re all staring at me, judging everything that I do, waiting for me to fuck it up again. Round two of the fight is already lost. The mushrooms manage to go down, but the rest of the meal is a waste.

“Do you have anything you’d like to contribute, Danielle?”

All eyes are on me in the therapy session, waiting.

“I, uh, sometimes can’t eat if I’m anxious.”

It’s a pitiful 5-cents in a charity box after Sam’s battle with food.

“Anything more?”

I shake my head, embarrassed that I would think my own problems would come anywhere close to some of the other people in here.

Dr. Smith nods like all is fine, but I’m pretty good at noticing disappointment.
Week Three

The hulking sign on the front lawn reads “OPEN HOME” (translation: come invade our privacy for free because we’re too poor to live here anymore). The real estate company prefers it if we aren’t present for the invasion so today’s a “family day”. Maybe the sullen faces of the homeowners deter viewers from buying.

So far this fun, imaginative, educational day has involved sitting in the supermarket parking lot waiting for the hours to tick by until we can go home. Mum looks at her watch twice per minute while Dad reads the paper. I’m happy locked in the car. Safety in silence, they say. No one can hurt you out there if you say and do nothing.

Most don’t agree with my preferences, though.

“Can we at least do something more enjoyable than sitting in a parking lot today?” Mum sweeps her greying hair over her shoulder. It whips the headrest. She flicks the lock on the door back and forth back and forth.

Dad turns a page. “Where are we going to go? We have no money.” He adjusts his reading glasses.

“There are places you can go for free, you know. A park, the gardens, a walk, anywhere…”

“We’ve done it all before. It won’t be any different.”

“The agent said a few people are seriously interested and want to have a good look at the place after the open home. We could be sitting here for hours. Shouldn’t we at least go for a walk? It’s got to be more exciting than just sitting here.”
“I don’t want to waste the gas.” Dad’s abrupt, making sure to squander any hope.

“Walking doesn’t waste gas,” Mum snaps. “But you’re wasting my time…” She looks out the passenger window.

“What time? You don’t do anything other than look for jobs! I at least work. I’m tired. I don’t want to do anything, except read the paper, all right?”

She makes a sound that’s somewhere between a growl and a screech, grabs her purse, gets out of the car, and slams the door. Dad jumps, but collects himself with a swift crack of the paper. The breeze that comes in from the door washes my arms of the heat and I shiver. She disappears into the crowds of Saturday morning shoppers. People hunting and gathering under the safety of pop music and checkout clerks. Snaring pre-packaged meat and vegetables with their credit cards, no clue where they came from or who’s handled them.

Mum just stormed off and I’m wondering what type of disease is on my capsicum. Zoning out is so much easier.

I lie down and curl up in the back seat, settling in for the long haul. The seat fabric scratches my face and I pick at its loose threads hoping to unravel these complexities. Heat swelters again as we’re devoid of any outside air. My favourite. The cold makes me vulnerable like someone could stab me and I wouldn’t even feel it ‘cause I’m so numb.

Dad continues to flip pages like shots in the air.

“Your mother completely over-reacted.” Cannon fire.

They never talk to me about this stuff. I’m supposed to be a bystander in their petty arguments.
“It’s difficult for her too, you know. She’s trying really hard to find a job. Maybe she also wants some time to relax.”

The paper crackling is the only reply.

I’m lulled to sleep by squealing kids and car ignitions until Mum finally returns a few hours later. Her eyes and nose water-colour red.

“Where did you go?” Dad doesn’t look at her when he speaks, and Mum doesn’t reply.

We don’t even turn the radio on for the drive home.

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The scariest thing about the Open Home is the house doesn’t look any different from when we left. The floor is supposed to be covered in footprints, cupboards rifled through, and my bedroom overturned. Did anyone even come in? The real estate agent has assured us there was PLENTY of interest, but her sideward glances and fidgeting fingers suggest otherwise. For one, the lack of evidence anyone was here. Not even a speck of dust on the kitchen counter. My guess is she lied about the later viewings just to keep our business.

“So, how was your day out together? Did you go somewhere nice?” Her voice is what I imagine Sprite would sound like if it were human. With a face as tight as braided bread, the bun on her head is the only thing tighter.

Mum, eyes still pink replies, “Wonderful! Very relaxing!”

I cringe at her smile, wondering if the agent sees through it to the tension between Mum and Dad.

Dad smiles and asks the agent about potential buyers.
“No offers yet,” she tells him. Picking up her briefcase she slips a ‘BUYING and SELLING: All You Need to Know’ guide under the fruit bowl. “But they’re on their way, I assure you.” She aligns the edge of the booklet perfectly with the countertop, and then sticks a piece of dust to her finger, wiping it off onto a handkerchief she pulls from her pocket. A barely noticeable grimace flicks over her face.

This lady’s gonna crack at some point, lose her mind in a fiery blaze at the nearest recipient. Head exploding over the sheep skin rugs and marble bench tops, which decorate her home.

I wonder if she’s banking on selling our place just to pay her rent.

****

“Breathe in.”

one two three

“Breathe out.”

one two three

“Again, in.”

one two three

“And out.”

one two three

“Simple breathing technique that might help you when you’re in a particularly stressful situation.” I roll my eyes. “Yes, I know it might feel silly, but give it a go. It’s good to focus on things when you’re in an anxious state.” Dr. Denison, Dr. Smith’s sudden replacement for the day because he’s sick, takes a sip of her
tea. “Can be calming. Speaking of, have you tried peppermint tea?” She frowns at the playdough in my hands.

“No.”

Breathing techniques and drinking tea are bullshit.

The dough erupts between my fingers.

“You should give it a go sometime.”

As if we can afford special tea.

“How was your week? Also, the playdough is for the children. Do you mind putting it back?” She gives me a smile, which is meant to be relaxing, but really just makes me feel like an idiot.

“Same as usual.” Why can’t I play with kid’s toys? It’s only dough with some food colouring to stop them shoving it down their gobs.

A slight sigh. “Have you spent any time with friends recently?”

I put the dough back in the ice cream container.

“I don’t really have friends anymore …” The lid clicks in place.

“Is there no one that you feel you can just call and hang out with?”

Not unless I want to continue being the butt of their jokes.

To them I was the weird, quiet, anti-social girl who thought she was better than everyone else.

_Last day of school. Ever. It’s all over._

_Filled with promises to stay friends, and spend the summer burning cancer into their skin without a care in the world._

_I waltz around them, hanging at the edges of conversation, neither invited nor noticed within the herds heading out the gates for the last time. Head down, letting them know I’m aware I’m not a part of their groups. There’s no special
person for me to declare my undying friendship to. No one whose hand I can clasp in the overwhelming joy of freedom.

This isn’t freedom to me.

I’ve been let loose into the decrepit world without a map to get me through. All I have is weekly psychiatrist appointments, which don’t really scream fun and entertaining.

I give a half-hearted goodbye to the packs, unsure if anyone even noticed, and make my way home.

I haven’t seen or heard from any of them in two months. The New Year came and went without a single well wish. Did I send any to them? No, of course not. If they wanted it they’d have called me first.

My fingers itch to reach into that container and pull out the doughy clump. Wring it through my hands. Throw it against the wall with a heavy thump again and again until it’s tender. Repetitive.

All I want and need. Structure of any sort.

Maybe I should get a job packing things, putting labels on food, something so mundane even I couldn’t screw it up. Live my life structured, nothing new and exciting to bury me with its terror.

Besides, lots of people do it every day until they’re in a varnished wooden box rotting.

“Danielle?”

“Huh? What?”

“I asked if there was anyone at all you could try to reconnect with. Any old friends you could ring?”

“No. No one.” I spit it out.
She picks it up and jots it down.

Maybe she’ll get the picture that I’m a friendless freak and stop pestering me about it. It’s not like I’m even going to be talking to her again. We could just sit here for an hour and look at the bugs crawling across the ceiling. It’d probably be more educational than listening to me talk.

“That must be hard.”

“No. It’s not. I hated the girls I went to school with.”

“Really?”

‘Hated’ is a strong word. ‘Too anxious to communicate’ was probably more accurate.

“Yes.” I’m already committed to this route, though.

“All of them? You hated all of the girls at your school?” She pushes her hair behind her ears. Her earrings glint off the summer light. The diamonds so large I bet they’re fake.

“The ones in my classes. Yes.”

“Somehow I have trouble believing that.”

She’s laughing at me. I want that dough more than anything. My nails exfoliate my arm, ripening it to its peak.

“I did.”

“Why did you hate them then?”

I flounder. “Because … they, I don’t know. Were mean to me.”

“You’re not very good at lying, Danielle.” She looks at the red sneaking under my T-shirt sleeve. I stop and grip it with my palm.

I’m not as good of an actor as I thought. Great. One less thing I’m good at.
“Fine. I didn’t hate them. I just couldn’t speak to any of them. I would, as per usual, freak out about it. Then, of course, they all thought I was a bit odd never speaking to them, so they avoided me more and more. Until I had nobody. And here I am, lonely and friendless.”

“So you don’t feel at all comfortable trying to reconnect with any of them?”

“No.”

“Hmm. Stubborn.” She chews on the end of her pen. Unhygienic. Basically just eating germs. “I don’t think I’m supposed to advocate this, but you could try getting to know people in the group better. They’re a pretty nice group of kids, don’t you think?”

Sounds like a disaster.

“Yeah … maybe.”

“What harm can it do right?”

“Hopefully not much.”

I can only imagine.

****

I’m not the new kid anymore.

Straight-backed, legs crossed, fingers interlinked like she’s in a job interview. Make-up perfect, smile slightly forced, hair as smooth as dry spaghetti, skinny jeans, and a plain T-shirt. Perfect new employee.

Hannah introduces herself. She’s so confident I want to rip it out of her and sew it into my follicles.
Anxiety, she tells us, which I don’t believe because she’s the most confident person I’ve ever met. Maybe she’s a deceitful ploy by Dr. Smith to make us, no, me, feel bad about myself.

Stop it, you’re paranoid.

At least Dr. Smith’s back now. I couldn’t stand Dr. Denison. I’m sure she’s a lovely person, but she wasn’t for me.

How many layers are going to be peeled today? Will I have the courage to speak or be intimidated by the collected newcomer? Tune in next week to find out on the animated adventures of Danielle’s anxiety.

The doctor’s smile is too bright when he sits down. Up to no good again, I bet. Still hasn’t told me what happened to that goddamn wall.

“Danielle.” His voice is high fructose corn syrup. “Would you like to start today?”

I shake my head. “It’s only fair. Everyone else has to do it.” I stare death. Does he want to ruin me even more?

“Did anything happen this week that set your anxiety off?”

How vague can I be?

“We had our Open Home.”

He waits for me to continue. Smiling that smile adults have when they know they can make you do whatever, because you’re just a lowly teenager. Power plays.

“We went and sat in a parking lot for three hours.” My nails dig into my elbows.

“Did anything happen while you were waiting?”
He’s not going to let me be vague, of course. “Mum stormed off. Dad read the paper.” Why do I bother?

“Why did your mum storm off?” At least he’s dropped the sadistic smile.

“She wanted to go and do something, but Dad just wanted to read the paper.”

“How did you cope with that?”

“I just waited for Mum to come back and then we went home.”

“So you weren’t anxious?”

“I was, but there wasn’t anything I could do, so I just laid down in the back seat and waited.”

“In other words, you resigned yourself to your anxiety. Next time, I want you to try those breathing techniques we practiced.”

I nod. Liar. It’s embarrassing to do in my own home with my parents around, let alone in public.

“Does anyone have any similar experiences with fighting in their home?”

I cut in. “They weren’t fighting. It was just a disagreement.”

“Sure it was.” Kay laughs at me.

Hannah, in an effort to show how perfect she is, says, “I actually have a very similar experience.” And turns and smiles at me. A spy, I’m certain.

“Right up until my parents split they were arguing constantly. It sucks. They weren’t exactly quiet about it either. You could hear them all the way down the other end of the street. I know, because I would go for walks to get away from them. The neighbour’s pity-stares were the worst.”

Heat flares through my veins. “My parents aren’t getting divorced. It’s not that serious.” I don’t realise how petulant I sound until after I say it. “Sorry.”

Kay whispers, “Wow, rude.”
Hannah nods. “It’s fine. I was a lot younger when it happened so it doesn’t bother me much anymore.” She doesn’t look upset.

What is wrong with me today?

The doctor’s eyes bulge past the frame of his glasses, stretching and swallowing the room until it’s just me and him.

My heart is doing laps, treading on bones, bruising my organs.

Kay breaks my hypnosis. “Generally if my parents fight, they’re fighting about me and my fighting and then I start fighting with them ‘cause they’re fighting about me, and it always ends in one big argument so they’ve learned to just stop talking about it, really and that way we all win.” She pulls an innocent smile, bouncing in her seat. The scars on her forearms have faded to a light purple. Her sarcasm isn’t laced with anger, and her laugh isn’t consumed by hate.

Healing comes in many forms. My own wrists are a bouquet of bruises. Purple blooms with some yellow for decoration.

‘I walked into the wall’ is what I tell people. A lot simpler than ‘I smashed into the door-frame on purpose.’

Sick comes in many forms.

Sam slices my thoughts. “Same. Well, it was when they were together. They’d argue a lot about me. Partly why they split, I reckon. They’d never say it to my face, though. They still fight even now. Can’t even put them in the same room together without a screaming match. They’re the ones who’re supposed to be adults.” He chuckles, and starts scratching at his acne scars, until there’s one large blob of red on his left cheek. “I wonder if they’d still be together if I didn’t get sick.”
Greensleeves crawls through the cracks in our windows and under the doorframes. Sometimes Mum and Dad will be in the midst of an argument dragging one another through the mud, when Greensleeves will appear. Its eerie 8bit notes knocking on our door. The randomness of it will make them stop, sometimes there’s even a hint of a smile on their faces. If I’m really lucky, Mum will laugh and the anger will be forgotten until tomorrow. I’ll sleep that night and dream of wandering outside together in the summer night for one of those ice creams.

Double scoops on waffle cones. Toffee for Dad; chocolate crush for me and Mum.

I asked once, both agreed it was a waste of money but gave me a $2 coin to get one for myself. At least they agreed on something.

But now, they don’t bother hiding it. I’m nothing more than wallpaper. They don’t laugh at the 8bit notes. Not even a pause to open the door.

****

“Do you have a problem with Hannah?”

So forthright.

“No.”

Tick.

Of all the rooms, we had to be in the one with the clock and the dying fern and the forthright psychiatrist and the faded inspirational posters.

“Are you sure? You seemed a bit on edge today.”

Tick.

“I was fine.”
I shove my finger into the bruises on my arms. Dull aches turn the volume down.

Tick.

“I don’t have a problem with her.”

Tick.

Drugs and Alcohol are not the answer.

We’re always here to help: Suicide Hotline.

They should really have posters that say Don’t lie to your counsellor, you’re only hurting yourself. I’d be the perfect model for it. The psychiatrist stands in the background, head in his hands, wondering what he did to deserve this horrible patient, while I lie on the floor being crushed by my own issues pretending they’re not there.

Maybe that would guilt me enough to talk.

Tick.

“There’s always change happening in our lives.” Where did this come from? Did I zone out?

“Sometimes,” Dr. Smith’s voice takes on a slow drawl, “it’s hard to deal with these changes, especially when they are happening to things or people that have been solid constants in our lives.” I push harder against the bruises. How many octaves down can we go?

Tick.

My thoughts crumble like biscuit batter.

“So we’ll tell ourselves that nothing has changed, even though there are many signs pointing to the contrary.”

Tick.
The clock expands absorbing half the room.
I’m waiting for it to consume me too.
I don’t know what he wants me to say anymore.
“For just so we can try to protect ourselves from it.”
Tick.
I wipe my sweaty palms on my jeans wondering if he can hear my heart thumping against my chest. The cogs in my head jamming.
Tick.
Smoke pours out of my ears. The bruises swell.
Tick.
“My parents aren’t getting divorced.” The tension releases.
Tick.
He doesn’t even nod this time.
Week Four

Mum and Dad don’t kiss each other goodbye anymore. They haven’t in months.

Constants.

Changing.

Small talk is gone.

Arguments keep the fire alive.

The crack of my bedroom door is my treasure box. Hiss and spit like cats outside my window. Care for decorum went out with last week’s garbage.

Vibrations highlight and drop bits of information funneled through thin walls and thinner doors. Deciding what’s necessary or censored.

YOU’RE not helping HER get better. YOU don’t support HER enough. Do YOU even try talking to HER anymore? How many times have YOU spoken to HER about what SHE’s going through? YOU don’t even try.

Over and over different sentences with the same meaning thrown around like confetti. My whole week is consumed by their petty little fits. I’m not like Sam or Hannah or any other kid in my group. I will not be like them.

My parents cannot get divorced. No matter how much they argue and tear each other to bits.

****

“I take two in the morning and three at night.”

Grace actually speaks above a whisper when prompted. It’s like a torrent.

She also takes more pills in one day than I’ve had in the past year.
“Anti-depressants, anti-anxiety, and sleeping pills. All of them are supposed to help me sleep, yet I haven’t in two days.”

Kay blinks with her mouth open as she leans mid-swing back in her seat.

“I spend a lot of time with my cats at night ‘cause they’re always up, I play a lot of games online, watch TV, all sorts. I don’t have ‘depression’, by the way. It’s my insomnia that makes me depressed.”

We’re nodding away, shocked she even talks.

“After high school I want to go to university and be a doctor so I can help others who are in similar positions to what I am now.”

“That’s so kind of you, Grace. I wish I’d known what I wanted to do career wise at your age.” Hannah seems to have forgotten Grace is only three years younger than us.

“Thanks, and I also want to be a photographer.”

“You can’t do both,” Kay says dropping down, her chair legs smacking the floor so loud I’m afraid they’ll snap.

“Photography is my hobby, not what I want to have a career in, Kay.” She is well spoken, “Getting my insomnia under control is the priority right now, though. There’s not much point in planning my future if I can’t even fall asleep at night.”

This is getting dismal for me, pretty quick.

Fifteen and she’s got a better head on her shoulders than I do. She knows where she’s going, and what she’s gotta do. Maybe I should ask Dr. Smith for some meds? They seem to be treating Grace all right. She’s got plans and shit. Which is a hell of a lot more than I have.
But then again, meds are like the final proof that I’m messed up. Do I want that?

Do I need that?

A large part of me didn’t believe anything existed for me past high school. Truly, I thought in my head it looked like a chasm; at the end of school it just dropped off into nothing. Plans and the future, I wish it didn’t exist.
A sharp tinge of coffee strikes as the cashier places a cup in front of me. I nod my thanks keeping my eyes locked on the ceramic cup. There’s a chip in the handle. Structural problems. Could smash and burn me. Pitiful stares would follow my boiled form out the door and up the street.

Stop.

Another Open Home, and I’d rather be in the middle of a busy café imagining being boiled alive by coffee than spend it with Mum and Dad embroiled in their arguments.

Shallow cuts from other customers plague the surface of the table. I’m guessing the owners didn’t care enough to stop them. Sad promises of \( x+y = \) forever that have probably already been broken are littered for all to judge.

The jingle of the door pulls my eyes front and centre. Hannah’s just as surprised to see me. An awkward wave and she makes her way to the counter to order. I expect her to sit somewhere far away to avoid the ‘sick’ that connects us. She doesn’t. Pulling out a chair her black hair comes into my vision as she says hello with a cheery smile.

“Hi.”

She widens her eyes. “How are you?”

“Good.” I rub my finger over the passionate etchings of love.

She nods. “So odd to see someone outside of group. Wasn’t expecting it at all.”

“Neither.” Hoping it would stay that way.

The Dr. does want me to make friends, though. Would’ve preferred someone like Grace so we could sit together in silence, but sometimes you can’t be picky.
“So… are you waiting for someone? Should I find somewhere else to sit?”

“No. You’re fine. I’m not waiting.”

She continues to nod with an uncomfortable rhythm.

My brain fumbles for something to say. I run my fingers over the engravings as the cashier places Hannah’s drink in front of her.

“It’s so stupid, isn’t it?”

I look at her confused.

“People engraving their names onto things like this.” Her finger traces a felt-tip heart. “The possibility of them actually lasting is so small. I could never come back to a place where I did that. Public sign of your own failure, right?” She gives a small laugh.

I do the same, but mine is more a gruff choking sound. Poor voice box isn’t used to talking.

Friendship. You can do this.

Scouring of the milk frother. Chatter of the cashier to the barista. Trashy TV and wine.

“Um. How about you? What are you doing here? I mean.”

Removing the pink and white marshmallows off top, she takes a sip of her hot chocolate. “I’m meeting up with some friends, we’re going to see a film.”

Film: fancier word than my vocabulary would muster.

“Sounds like fun,” I reply.

Of course she’d be going to see friends. Unlike myself, who’s just sitting in a bakery for no reason except to wait for an Open Home to finish and avoid her toxic parents.

“Are you doing anything this afternoon?”
“Uhhh no not really, I don’t think?” Definitely not.

“You’re welcome to come with us if you like? They’re all really nice and wouldn’t mind, I’m sure.”

Oh God, there’s so much pity in her offer. My embarrassment burns welts into my skin.

Comfort zones, though. Gotta push them. Dr. Smith would be so proud. Mumma and Pappa, too. Pride for everyone. Maybe I can become friends with her friends and we can all be best friends. You never know. Miracles do happen.

“Okay. Sure.”

“Great! It’ll be fun, I swear.” I’m waiting for the hidden camera to smack me in the face and the crowds to come pointing fingers and laughing like monkeys.

We finish our drinks and I follow her out.

The street bustles. It’s midday and everyone’s on lunch break. I alternate between walking side by side with Hannah and falling behind to let people past. I’m always the one who falls behind. Cars honk forcing each other into gaps that don’t exist. Office buildings tower above, plans and changes flow through each one to the next. Join the dots. Retail therapy calls trying to grab our empty wallets with promises of confidence in thin fabric.

Hannah tries to make small talk while I chastise myself for being unable to converse past the point of “yes”, “no”, “good”, “how about you?” The constant jostling isn’t helping. You think crumpling to the pavement would help about now? Shut down like the plug’s been pulled. She just walks on her merry way, forgetting about me like I was never here. Oh, one can dream, right?

We walk like this for ten minutes, Hannah dancing around the crowds, while I try to work two left feet, until we reach the theater.
I was expecting one or two friends, not an entire cavalry of girls. As we approach, a few give one another confused looks but most smile politely. I must look a sight. Red and jumbled from the torturous walk here. There are five girls in total. All too pretty and confident to be my friends with their perfectly primped hair-dos straight out of a beauty magazine. I bet I could thread their hair with twine and they’d still look amazing. What am I even doing here? She only asked me out of pity.

The theatre is dim and noisy with children running around like lunatics and trailers blasting through the speakers. Do I really want to do this? I could pretend to be sick and go to the bathroom. Walk home. I’m sure they wouldn’t miss me. But then Hannah is asking which movie I want to see and if I want any snacks and the others are trying to include me, and it’s hard enough to get away from them as it is. It should be okay when we’re in the theatre. No one will talk to me and if they do they’re dicks because people shouldn’t talk during movies.

Some kid’s chucking popcorn at me in the line for tickets. His parents don’t even notice. I want to scream in his tiny little face. I put my hand on the velvet rope dividing the lines. The soft, but spiky fluff attacks my palms. I run my hand up and down bringing myself away from who I am. Keeping my eyes on the brown-heeled shoes in front of me. Following their slow shuffle forward. One two one two one two, until I’ve reached the end of the divider and I’m at the front. What movie are we watching? Something about romance? Divorce? I don’t know. Hannah must realise I’m floundering ‘cause she orders my ticket and gets me a seat next to her. I swipe my card and I’m thrust into the theatre.
I don’t even pay attention to what’s happening in the movie. I’m just trying to breathe and relax like the doctor said, in and out in and out, which is not working at all, but that’s fine I’ll just pretend it is.

I haven’t hung out with real human beings my own age in months! How in the hell did I think I could do this? It’s not even one person I’m sitting next to. Five of them and I haven’t spoken a single word to anybody. Not even Hannah, which is fine ‘cause she seems pretty wrapped up in the plot of this fantastic movie with its absolutely A+ script and 10/10 acting… I didn’t think anyone even liked romance movies. Aren’t they terrible jokes to everyone?

Apparently not, ‘cause she’s sitting next to me choking back tears like a blubbing idiot and so are all her picture-perfect friends.

My nails have etched their own declaration of love into my thigh. The deep cavernous ridges hidden in the dark.

Maybe if I could pay attention I might be like them, crying my eyes out in the middle of a dark theatre. Do I want that?

Do I want this?

****

“How was the café?”

“Fine.” I can’t even be bothered telling her I went to a bakery not a café.

“You were out quite a while. Did something happen?” Mum’s sorting through the photo albums for some reason. Baby faces peek through waving their chubby hands.

“I saw one of the other kids from group and hung out with her and her friends.”
Her eyes widen but she doesn’t exclaim about the impossible.

“And how was that?” She tries for nonchalance instead.

“Fine.” Two piles of pictures lie on the carpet. “I’m going to my room.”

She attempts to speak to me, but I brush past her, not even stopping when I knock over one of the boxes. Family framed pictures bounce off the carpet and under my feet. Maybe my attempts at not caring didn’t work, but I’m past the point of caring if she knows how messed up I really am.

I escape to my bedroom without further prying and sink to the floor. I let the crushing embarrassment coil itself around me.

Fingertips cradle my skull feeling the dents. A layer of skin and bone all that stands between us. I scratch. It stings and pulses. A minute of relief from memories that make murals on my walls. I bet they’re all laughing at me. How could they not?

A swing of my arm and the thunk reverberates through my skull. Calm to break the rush. But it pulls tighter. I bang my forehead against the carpet tick tick tick.

Again: tick tick tick.

Hours could pass.

Tick.

Hums and whistles sweep with the breeze under the door.

The radio’s on.

Tick.

Mum cuts between singing and humming, ‘cause she doesn’t remember the words. The rhythms fall between my skull and fist, stopping me from knocking the memories away. They leech through, and savour their conquest.
How many others out there feel this too? The leeches sucking the words out, replacing them with your own fists and fights ‘cause you’re so fucked you don’t even deserve explaining. The choking electrification of all your nerve endings. The passing time eating your lifespan that you wished was just slurped up in one gulp.

Where are you? Am I alone?
“How was everyone’s week?”

Please don’t bring up hanging out, please don’t bring up hanging out.

“Danielle and I went and saw a film together.”

Damn it.

Together is a bit of a stretch, but nice of her not to say it was a pity ask.

I’m waiting for the muscles in the doctor’s cheeks to snap.

“That’s fantastic! And how did it go?”

Was that a laugh from Kay?

“It went great, didn’t it, Danielle?”

Well I can’t say it was the most uncomfortable experience of my life and watch her sweet perfect china teacup heart smash into a million pieces, can I?

“It was… good. Different.”

His smile might have to be surgically removed.

“We went with a bunch of my friends from school and they all really got along well with Danielle.”

I didn’t speak to any of them, so I don’t understand how that was possible.

“That’s wonderful, Danielle! I am so proud of the amazing strides you have been taking recently. What a fantastic start to the session. Really wonderful.”

****

After group, Hannah latches onto me like a loose twenty-dollar bill. “I really enjoyed last week. We definitely should do it again sometime.”
“Yeah… definitely.”

We walk through reception dodging the lunch-time rush of workers getting their quick counselling fix.

“Awesome, do you want to go grab a coffee with me then?”

I hold the front door open and let Hannah through.

“Right … now?”

“Yeah, why not?”

The door slams behind me.

“My mum’s kind of waiting for me in the car …” I point to the parking lot across the road. The car is a bright silver beacon. If I can just make it there, I’ll be home safe.

“Your mum can come too if she likes.”

“Oh no, you wouldn’t want that. Really.” I squish a lone cigarette butt under the sole of my sneaker.

“Come on. What’s the worst that could happen?”

Should I make her a list?

On the way to the car, I compile all the reasons Mum might not let me go out. Slim hope, but the only hope I have.

I open the passenger door.

“Hey, Hannah wants to grab a coffee with me—”

“That sounds like a lovely idea!”

God damn it, Mum. Ready to cast me out into the wild before I even finish my sentence.

“Don’t let me get in the way of you two bonding.”

Mum’s smile needs to be surgically removed too.
“Where should I pick you up from?”

“Don’t worry, I can drive her home. It’s no problem.” Hannah drives apparently.

I think I’m being babysat.

“Are you sure, Mum? I feel bad wasting your petrol like this.”

“Oh it’s fine, I’ll just do the groceries on the way home to make up for it.” She leans across the passenger seat, grabs the handle of the open door and starts pulling it shut.

“Wonderful! It’ll be nice to have some time for myself.”

Mum pulls the door shut, my hand still on the silver handle, ending the conversation.

****

“I’m sorry if it was uncomfortable for you last week.” We’ve stopped at the closest café we could find. It’s small with only a few tables to sit at. The pot plants sitting in every spare space, really make the whole room claustrophobic.

We grab a seat by the window, so there’s at least the illusion of space. “I should’ve realised a massive group of people might have been hard to deal with.”

We look out the window and watch a mother struggle with her son at the one table outside. Hannah sips at her chai latte.

“That’s okay.” I run my finger around the lip of my water glass like an instrument. It doesn’t ring like crystal.

“My friends really did like you, though. They thought you were nice.”
I laugh. “I don’t even know if I said two words to them.” I realise how bitchy that sounds too late. “I didn’t mean it like that …”

She looks out the window. The kid and his mum are sharing chips. He’s mushing as many into his cheeks as he can. They poke out like walrus teeth. She grabs his wrist, shakes it, and tells him to swallow before he chokes.

“I know. It’s okay. I just thought I should apologise.”

The kid scowls back at her and spits a gob of potato into the bowl.

“But don’t get me wrong I really would like to hang out more. If you wanted to.”

The mum gets up, yelling at him and gesturing towards the mushy gob. The wind whips her hair around her face like a hurricane and she tries to calm it juggling her purse and takeaway coffee in both hands.

“Sure, yeah of course.” I’m so entranced by the scene outside, that I answer before thinking.

The waitress goes out and tries to settle the problem. As the mum pulls the kid up off the chair he accidentally sweeps her coffee out of her hands. It falls and splatters little dots of coffee across her coat before exploding as the lid falls off at her feet. She jumps back, and shakes the liquid unsuccessfully off her boots. She looks like a cheap Jackson Pollock rip off. The mum apologises about her horrible child dragging him by the forearm down the street as the waitress picks up the plate of mush. The coffee cup rolls down the slight hill chasing after the mother.

“That’s great.” She laughs at the fading scene. I’m not sure if she’s referring to me or the kid.
To my surprise, she doesn’t make an excuse and take me home. We sit for another hour somehow finding conversation through my stilted replies. Even more surprising is, I enjoy talking to her. I don’t blank out and use my coping strategies, and she actually listens.

She’s kinda nice, really.

****

This week just keeps getting worse. On top of the most social interaction I’ve had in years, and looking like a fool in front of Dr. Smith I now have to put up with my aunt’s surprise visit for the weekend.

“Sheard you have to go to a psychiatrist now.”

She stares at me with her cold rich eyes. A Cheshire cat grin etched onto her face.

My parents laugh uncomfortably, not willing to tell a family member to shut the hell up.

“So what’ve you got?”

“Huh?”

“What’s wrong with you?”

We’re sitting around the TV eating chips and dip. The 6PM news and steaming vegetables drone in the background.

“Mentally?”

“Obviously.”

I go to the kitchen to check on the vegetables. Fresh today. Only the best for Anita.
“I have anxiety issues.” Steam coats my skin as I lift the lid to prod the carrots with a fork.

“ANXIETY?”

The lid clatters between the elements, barely missing the expensive fish frying in front of it.

“So you mean you get nervous?” I put the lid back on the pot.

“Yeah, but it’s diff—”

“Honey, you do realise everyone gets nervous? It’s normal. You just have to push through it. Mind over matter. That’s what I told your cousin when he was feeling the puberty nerves, and look at James now, the captain of the school soccer team. C grade, yes, but it’s still an outstanding achievement. One to be proud of.”

The loose skin under her chin wobbles as she speaks, years of rich food plumping it out. Bet she hasn’t had a frozen veggie stir-fry in years.

Sounds like you’re more proud than your son, I want to say. Instead I mutter, “It’s not that simple …”

“Of course it is. God, kids these days are so sheltered. No wonder they’re getting all these made-up problems. They just need a good dose of harden-the-hell-up.”

Mum and Dad fold their hands in their laps looking between one another, smiles interlaced with glares.

“This is your sister!” read Dad’s eyes.

“You told her she could stay!” read Mum’s.

My aunt stuffs a handful of chips in her mouth. “You should come stay with me and the boys for a while.” Chew chew chew between her surgically
straightened teeth. “I reckon it’d be good for you.” Swallow, “Do some work on the farm.” A ‘lifestyle block’ is not a farm. “The boys can show you a thing or two about hard work.”

Mum interjects, “Uh, I think you’ll find Danielle is an exceptional hard worker, Anita. Her grades were top of the class.”

“Celia, please. If she needs to see this fancy-shmancy psychologist—”

“Psychiatrist, Anita, and it’s all through the public health system.”

“They’re all the same thing. But as I was saying, she doesn’t really need to go to these head-doctors. All she needs is a bit of hard work. Get some muscles on her. Bit of vitamin D and sweat could even cure cancer I reckon.”

You’re so very wrong.

“As I said before, Anita, Danielle’s grades are impeccable.”

I turn the veggies down to low and walk back to the couch.

“Pshhh. Grades don’t mean bugger all. You gotta get them working when they’re young. Some dirt under their fingers will show them the meaning of hard work. Only then can they lie down and be a sad-sack.”

Aunt Anita grabs my hand and examines my nails. “Look at this! I bet the girl has never worked a day in her life. Look at them, Celia! Not a callus to be seen. What kind of a girl are you raising? Really, what a disgrace.” Her plastic nails leave tiny indents when she lets go.

Mum’s face is strawberry lollies.

“Would anyone like a drink?” Dad tries to shut my aunt up.

“A gin would be nice.”

“Ah, I’m sorry Anita, but we don’t have any alcohol in the house at the moment. I swear the prices have gone up.”
“Ah yes, I forgot about your current financial circumstances.” She turns, eyes targeting Mum’s. “When will you get a job, Celia? It’s clear where the girl gets it.”

The lolly pink deepens to dynamite red. I should say something.

“She’s trying …”

Aunt Anita blinks and turns to me. “What was that? You speak like a chinchilla.”

My face is redder than Mum’s. Why did I turn the conversation back to me?

“I said she’s trying, Aunt Anita.” I lift my head to look her directly in the eye.

She returns the look with a smug smile.

“Well, ‘trying’ simply isn’t good enough, is it? You only do or don’t.”

I want to scream in this women’s prune-wrinkled face. She doesn’t know anything about us. She’s just a stuck up old hag.

“Mum’s trying,” I repeat.

“Maybe you both need a good stay on the farm.”

“No one needs to come stay on your ‘lifestyle block’, Aunt Anita.”

Dad shakes his head at me, begging me to shut my trap.

“We’re fine where we are, Aunt Anita. We’re trying.”

My pulse strikes fires inside my heart.

“I think, Celia,” she averts her gaze from me back to mum, whose eyes are a glossy wet, “you need to teach your daughter some manners.”

Mum, without speaking, gets up to serve dinner.

****
I wake with a sore back and bags weighing my eyes down after spending a glorious night on the couch listening to my Aunt’s blissful snores from my bedroom.

Aunt Anita waltzes in just as a gag comes up as I try to swallow my toast. How apt.

“A growing girl shouldn’t be eating white bread. You need whole grains.”

“Can’t afford it,” I mumble.

“Tsk. Speak clearly.”

I give her a look, and turn back to the jug and make my coffee.

“Would you like one, Aunt Anita?”

She leans over my shoulder and sniffs.

“Ugh, not that cheap stuff. If you’re going to drink coffee, at least make sure it’s a good brand.”

I sigh, putting the coffee back in the cupboard.

“It’s nine in the morning, shouldn’t your parents be up.”

“It’s the weekend.” I stir in a teaspoon of sugar. The white granules swirl then sink.

“So?”

“They’re sleeping in.” They don’t usually, but I’m certain I know why their schedule has changed today of all days.

“Terrible hosts. Your Grandmother would be turning in her grave.”

“Wasn’t Grandma cremated?” I drop my teaspoon in the sink.

“It’s an expression, Danielle. I thought you were top of your class, or do they not teach you these basic things at your public school.”

“Guess not, Aunt Anita.” I turn and give her my most pleasant smile.
Mum and Dad rise an hour later.

Aunt Anita is on their case straight away. “So what are we doing today?”

“We could go for a walk through the gardens.”

“The gardens? I didn’t come all this way to go to some silly old gardens. Why don’t we go out to lunch?”

“We can’t really afford that right now, Anita…”

“I know, I know. That’s why I’m paying.”

“No, Anita. We can’t let you do that.”

“I’ve driven all this way and I want to go out for lunch. We’re going out for lunch and I’m paying.”

“Really, we can’t—”

“Oh just shut up and take my charity, Celia.”

As always, Mum says nothing.

****

Of course Aunt Anita takes us to a restaurant so fancy it has an unpronounceable French name. Even the menu is in French, which is fantastic ‘cause that means I have an excuse to just point to what I want rather than say it out loud. Even if ‘Fries’ is spelt in English.

“FRIES? I take you to the fanciest restaurant in the city and you order fries?”

Aunt Anita’s voluminous voice drowns out the rest of the restaurant.

Not again. Why can’t I just have some goddamn fries?

The couple at the table next to us glare at Aunt Anita. No one else is talking above a whisper so I’m not surprised.
When the waiter arrives to take our order I point to the fries, but am rudely interrupted by Aunt Anita.

“You’re not one of those vegans or anything are you?” I shake my head.

“Good. Then she’ll take the pasta. The French make the best pasta in the world.”

“I believe you’re thinking of the Italians.” The waiter is quick to jump in.

“No, I’m not. I’ve eaten pasta in both France and Italy, so I should know. Italy just gets given the title of best pasta, but France is the true pasta master.” She giggles at her own joke.

Maybe those fries I wanted were the best fries in the world? Now we’ll never know.

“Of course.” He gives her the brightest fake laugh I’ve ever seen and continues to take our order. Mum and Dad try to order the cheapest meal they can find.

“Do you have Foie Gras?”

“No, it’s illegal to import or produce in this country.”

“What kind of a French restaurant doesn’t serve the most delicious meat in the world?”

“One abiding by the laws of the country that they live in.”

She gives a harrumph and orders a steak.

I’m dreading another fight with fancy pasta, when Aunt Anita pipes up once again. “So what shall we do after lunch? Shopping? A film?”

“The gardens are particularly nice at the moment, Anita. The roses are doing their last bloom at the moment. Quite late, too.”

“Again with the gardens. I don’t want to see a bunch of smelly flowers, Celia. I want to do something fun. I’ll pay. Don’t worry about the money.”

“Really we can’t let you do that.”
“Nonsense. You’re my sister. If I can’t give you charity who will?”

“Please stop calling it charity, Anita.”

“That’s what it is, though.”

Mum sighs and looks at her plate of bread. “Maybe we should just go home and have an afternoon in instead.”

Anita stares straight at Mum. Dad shuffles in his seat chewing on bread. I’m splitting mine to pieces looking for anything out of the ordinary in the restaurant to take my mind off the argument that’s brewing.

“What was that, Celia? You think we should just go home?”

Oh dear God, why is everything so plain and boring in here. Boring music, plain boring cream walls. Not even a crack to be seen.

“Well, you don’t want to do anything we can afford, and we don’t want to take your handouts, Anita, so it really seems like the only option.”

Aunt Anita taps her fingers on the table. Her mouth twisted like a whirlpool. I can feel the eyes of the neighbouring tables lapping up the drama.

Aunt Anita breathes out, “Why do you always do this, Celia? Every time I visit you make a scene and ruin it. I’m just trying to do something nice for you and then you turn around and fling it back in my face like a wet fish.”

“I’m sorry you feel that way, Anita. I just don’t feel comfortable taking your money.”

Mum’s always been a pushover when it comes to her sister. I hate it. I miss the sarcastic sassy quips and the smirks and the back-handed compliments. I don’t like watching her be trampled by this horrible woman.
“All I wanted was to have a nice break with my family and this is what I get. An ungrateful sister, a brother-in-law who can’t even take care of his family, and a mentally unstable child.”

It’s like even the music paused.

I push the tips of my fingers onto the prongs of my fork. The jarring sensation takes me out of the current scene.

“I’m not mentally unstable, Aunt Anita.” My hands shake, sweat, and boil themselves in their own fluid. I push my fingers further into the prongs hoping she shuts her mouth soon.

“Yet you can’t do simple things without losing your mind, apparently. I feel like that’s the definition of mentally unstable.”

“I don’t ‘lose my mind’. Maybe you should go and see a counsellor, Aunt Anita. It might help with your … stuck up bullshit.” I’ve never been good at talking back.

“Excuse me?” She turns to Mum with her hundredth look of disgust since she got here. “Celia, is this how you’ll let your daughter, my niece, speak to me?”

I wait for her to stand up for me. Put her sister in her place, but all she says is, “Be more respectful, Danielle.”

My heart drops out of its cage, sinks to the floor, beats once, and stops.

“Let’s not fight, guys. It’s not often we get see each other.” Dad tries to keep the peace. “Just try and enjoy the time we have together, okay.”

“Not likely at this rate,” Aunt Anita mumbles.

We pretend we didn’t hear a thing and continue our lunch in silence except for Dad’s small talk to my aunt.
Week Seven

Should’ve known good things don’t last.

I’m still reeling from the hell-weekend with my aunt, (who thankfully left early on Sunday), when the bomb is dropped in group.

“This is Hannah’s last session with us today.”

But she only just got here.

“She’s done so well and is being discharged.”

She’s the same as when she first came in. Was there really anything wrong with her? Did I scare her off? She didn’t want to be friends with a crazy person. She’s too normal, with her perfectly peppy friends. I can’t believe I thought I could be like them.

“How are you feeling about your progress, Hannah?”

“Much more confident now. It’s been so great meeting everyone and hearing your stories. You’ve all been really helpful getting me through the last little bit.”

Maybe she’s a leech who feeds off other people’s hardships. Makes her feel better about her own perfect life seeing others in a cesspool of shit.

“You’re going to university this year, aren’t you?”

“Mhmm. I’m starting in a month. It’s scary, but I’m more confident now.”

I haven’t even applied to any universities. I completely forgot that was a thing. What am I even doing with my life? I swear I’ll just rot in my parent’s house forever.

“You’re going to university as well this year, aren’t you Sam?”

“Polytech, actually. Going to study electrical engineering.”

Sam too? Am I the only one who hasn’t got their life sorted?
“This is a very exciting yet frightening time for all of you I bet. Danielle? You haven’t told us your plans for this year. I believe you’ve finished high school as well now.”

“Umm.”

I really am the only person without a plan.

“I’m just taking a break to focus on my health.”

A quiet understanding of my failure. Pity smiles all around.

“That’s good, Danielle. Your health is the most important thing. And who knows, by the second half of the year you might be ready to start university or find a job.”

I nod and smile. My eyes glazed marbles. I hold back my tears to keep my fears locked away for good.

Everyone’s moving on except me.

And I don’t know what to do.

The chasm is wider than ever before, and I am so very ready to dive head-first into it.

After the session I shut down. I race out to Mum’s car, get in, and leave. I don’t want anything to do with any of them.

My nails are knives I dig into my skin to numb the shame. If I could just keep it at bay that little bit longer everything will be fine again. I push harder. I can’t believe I thought we could be friends.

The city flies past. Plans and executions make the world go round. The people twist and turn. And I’m stagnant, stopping progress.

I dig deeper.

What am I doing with my life?
There’s a bubble of wet underneath my nail inching its way up the shell.

Soothing. Deserved.

****

Home isn’t any easier.

I lock myself in my room.

Not leaving for lunch or dinner.

I tell the knocks on the door to “Go away.”

“I just want to be alone.”

My body calls to sharp objects.

Knives, razors, scissors, anything.

Bruises don’t keep my breathing in order.

Walls constrict.

Air thins.

Scissors on my desk.

Pink with love hearts.

They care.

I want them.

Ache for them.

My hand hovers.

Easy.

One swipe and you can relax.

And I’m thrown into the whirlpool.

Spinning.
Drowning.
Unable to be heard over the roar of noise consuming me.
I’m lost.
Everyone I love screams at each other with their own problems, so invested they don’t even see me.
I’m just a speck in the expanse of ocean.
Dark sea the only thing to cradle.
Thousands of meters down.
I’d spin.
Eternity in its embrace.
I couldn’t even break the skin.
The rabble starts up in the lounge. I wait, lying down on my bedroom floor staring out the window at the sky. When I was a kid I’d stick my ear up against the carpeted floor ‘cause sometimes it’d sound like the ocean in a shell. Not exact, but close enough. I’d wonder if there was a little sea under the carpet.

Now it sounds like there’s a whirlpool out there with Mum and Dad at the centre.

I stare out into the sky as I do most nights before falling asleep, wishing I was as distant as Jupiter.

Thirty minutes, and then an hour passes consumed by the rabble at the other end of the house.

I don’t care to listen to this anymore. I’ve spent so long looking out my bedroom window at the night sky, I now have a desire to be under it.

Sitting up I rifle through my drawers pulling out a random pair of jeans and a hoodie. Even though it’s summer, it’s fucking cold outside.

I waltz to the lounge, heart stiller than ice, and pass them without even a glance.

“I’m going out.”

They stop mid-sentence choking on their own insults. They blink like poorly animated cartoons.

“Don’t be out too late,” Dad says apprehensively.

I open the door, without a reply, and walk outside slamming it behind me. Subtle. The walk to the letterbox doesn’t even faze me. It’s silent except for my feet slapping across the concrete. I look at the windows of the homes across the
street. How many stories and details and dreams will I never know? What’s their sickness? We all have one. Some are just a bit more honest than others. Some let theirs hang off them like this season’s latest fashion, others clip it inside their coats, their own special details only a few unlucky souls get to witness.

Closed curtains keep their gazes barred in. I’m safe for the night. I turn towards the inner city, fold my arms across my chest and take one step at a time further and further away from home. Streetlights caress my darkened form as the cold breeze comforts me. Alone and happy.

Cars piled full of drunken teens and university students adventuring to parties with friends drive past. Their own kind of sick happiness I pine to be a part of. A normal kind of sick. You’re allowed to get drunk every weekend, crying in the middle of the road, vomit spewing from your lips as you look for a new friend to help pass the night, but as soon as you mention mental illness everyone shuts down. Secrets.

I walk for I don’t know how long before I come across an undeveloped plot of land, a rarity in the city. The streetlights barely touch its edges. A perfect hiding spot. I stop, lay down and look up at the sky that I had only seen through a pane of glass for so long. I can’t even hear my heart. No banging on my chest, just the in and out of my breathing. The occasional car drives past and I tense for a second, but I’m not visible under the canopy of grass and stars. They can’t see me but I can see them.

I don’t care about the cold as I lay there and watch the stars blink and fall into nothing, or the blades of the grass as it itches the area of open skin between the hem of my jeans and sneakers. Focusing on the details around me. I’m just happy to be here and to be okay.
When I get home about an hour later, the house is silent. They’ve gone to bed, not even caring I hadn’t come home. Maybe they just trusted me or something, I don’t know. My bones sag falling asleep as they start to feel the weight of the sudden excursion out of the house. I trudge up the stairs one foot after another not even bothering to take off my shoes and fall into bed fully clothed.

****

A threatening drone comes from behind the appointment room doors. Where’s a magician to put a blanket over me and make me disappear? The bathroom is the next best thing for sweet solitude. Sitting on the toilet seat listening to the rush of the air vent, smelling the chemical cleanliness, I try to relax and just breathe, but the overwhelming sense of embarrassment and fear keeps threatening to chokehold me.

So I bash it out with my fists.

One two one two.

They’re just stones in an exhaust pipe. If I can get them out this annoying rattle will go away and everything will be smooth and my parents won’t have to pay money to get me fixed ‘cause they’ll know there wasn’t ever really a problem it was just a stone in an odd place.

Five minutes until my appointment. A grim scowl in the mirror. How her eyes just seem to fling more rocks at me hoping to make more problems.
I don’t like this, I tell her.
I don’t like you, she tells me.
She just scowls and stares and I shy away out of the bathroom back to my seat in the waiting room. A sweet throb in my temple starts, placating me for now.
Dr. Smith calls me in. The room is light blue with two seats and a small coffee table. In the corner piles of children’s toys and books are stacked precariously.
“How’s your week been?”
“Good.” I tried to open my wrist this weekend. But I didn’t break the skin, so it’s okay. No need to call the hospital.
“How are your parents?”
“Good.” Only ten fights this week.
He nods and writes in his notebook.
“If you were to rate your anxiety levels this week where would they be on the scale of 1-10? Ten for extremely high and one for very little to no anxiety.”
“Five.” A nice middle ground. Too high and he might call the psych ward. Too little and, well, he just won’t believe me.
“So reasonably high then.”
I bet he can see through my lies with his professional brain.
More scribbles.
“Was there anything this week that may have set off your anxiety?”
I screw up my mouth, and act like I’m thinking about it. “No. Not really. Nothing that stands out.” Liar.
What about the realisation that you have no plans in life?
How about the fact that you let your one chance at friendship get away?
Or how your parents argue so much they don’t even care if you’re in the room anymore?


My brain beats against my skull in rhythm with my heart.

“Danielle, I should tell you that it is quite possible you are going to be dealing with these issues with anxiety for the rest of your life. For most people this is the case.”

This is super reassuring.

“And having a small amount of anxiety in your life is completely normal and healthy. If we didn’t have anxiety we would do a lot of things that could put us in potentially dangerous places. Your anxiety though, is running on overdrive and because of this it is stopping you from doing things that are normal and should not be causing you this much fear. That doesn’t mean you will always be in a place where your mental illness feels unmanageable. A lot of people go through their lives living with anxiety. They’ve just learned techniques that are able to control it. Of course we very much hope that you’ll come out of this completely free from anxiety that is damaging your life. But I don’t want to give you false hope.”

So much reassurance my brain might just burst.

I nod. A silent rush comes down my right nostril and drips onto my t-shirt. Dr. Smith jumps up. “I’ll go grab you some tissues.”

I hold my hand under my nose catching the blood before it hits the carpet. Is my face as red as the blood? Maybe if I stain the carpet another girl will see it and wonder what happened? Surely they’d think of something more exciting than a blood nose, maybe a stabbing.
He comes back with a roll of toilet paper, rips off a portion, hands it to me, and then puts the roll beside me.

“Would you like me to call your parents?”

I shake my head putting the paper against my nostril. “No, my mum should be waiting in the car outside. It’s fine.”

“Do you often get blood noses?”

“It’s the first one I’ve had since I was a kid.”

“That’s very strange.”

“Just random, I guess.” Liar. You know you did this.

He reaches for his notebook and scribbles once more.

“Do you want to continue the session or would you prefer to just go home?”

I tell him I want to go home.

****

“What the fuck happened?” Mum squeals as I step in the passenger seat. A reddening clot of paper shoved in my nostril. The roll of toilet paper in my hand has little flecks of blood on the top layer. The Dr. said I could keep it.

“It’s just a blood nose.”

“How the hell did you get a blood nose in counselling?”

“I don’t know. It just randomly came on. It’s fine, Mum.”

She gives me a concerned look but drops the subject.

****
The tension’s getting real tight now.
Mum and Dad pulling on each other’s reins.
The bit stretching their mouths cracking their teeth.
They spit and froth.
I almost want to cut them free myself.
Snip the little veins that tie them together.
But I’ve got acres of my own problems to hack through first.
An overgrown field of anxieties and fears and I’m running out of PG coping mechanisms.
Even the bruises are getting weaker. A little too plain.
My walls are a lot barer than they used to be.
A couple of days later I find Dad staring into the fruit bowl, his hands linked on the table. The Buying and Selling guide still rests there untouched. I say nothing as I walk to the kitchen. Probably thinking about the house, I think, as I reach for a glass. The clinking as I pull it from the cupboard makes him jump. He sighs through his teeth.

“I need to talk to you, Danielle.”

I turn on the tap drowning out how dejected he sounds.

“Okay.”

The chair groans as he stands. Walking to the window, he keeps his back to me.

I sip at my water waiting for Dad to continue.

“Your mother and I are getting a divorce.”

“What?” I put my glass down.

Another sigh. “I’m sorry if this is sudden for you.”

“You can’t do that. Where’s Mum?”

“Out. She went out so I could tell you in private.”

“You couldn’t even tell me together?”

“It’s hard for her.”

“What’s she going to do when she comes home? Just pretend like nothing’s different?”

Dad shakes his head. “It’s understandable that you’re angry–”

“Understandable? My whole life is changing because of this!”

“It’s not easy for us either! Stop acting like a child.”
“You just told me you’re getting a divorce. How’d you expect me to react? To just smile and say ‘okay, that’s fine, have fun being single!’”

I can feel heat clambering at my body, ready to break me down.

I storm off to my bedroom before he can reply and before my body freaks out. Acting like the child he says I am, I slam the door.

My breaths strangle my lungs over and over again. Quickening as their space disappears. A slap to my face to bring sense to myself. That’s supposed to work, right? Again and again to help me breathe, getting nowhere, but then I close my fist and the bluntness tears through. My ears sing to me, aching lullabies. My knuckles tattoo my skin to console me.

But it’s not enough.

Something better to take it away.

My scissors lie arms open on my desk. Still ready from my last battle.

I crawl on all fours towards their embrace. Reach. Grab. Pull.

Disastrous relief inanimate in my hands.

Open close open close open close.

Open.

My right hand grips the middle of the sharp edge.

It lies across my forearm.

Rests only a moment.

Before plunging in and across.

Enough force to clear my mind.

Enough.
My breathing slows. I lie down on the floor, my bones settle into the fibres of the carpet. Hours go by staring into the expanse of my childhood bedroom. Baby blue, with posters of pop stars from years ago who I wouldn’t dare be seen listening to now, family pictures in childish frames on my dresser drawers, ragged soft toys with food stains of uncertain origins, puzzles, board games and books to soothe my lonely self. I haven’t touched them in years.

My arm pulses red.

I wish this day would just end and take me with it.

****

The cut on my arm aches even though it’s been two days. It’s not even calming anymore. Just a constant reminder of everything that’s gone wrong. I rub it and it burns. The fabric of my long sleeve too abrasive against the flesh. The fibres stab and stick to the dried blood. I don’t want him to see it and freak out. I don’t want to be put in a hospital and be stagnant for longer. I just want to not feel like this anymore. Is it that hard?

“You all right there, Danielle?” Kay stares at my arm with a raised eyebrow.

“Fine.” I stop rubbing it. Of course she’d know.

Dr. Smith walks in and gives me a sad smile.

He knows.

How the hell does he know?

He reaches for a cup above the sink. “Who told you?” I can’t even stop myself. He’s shocked but knows what I’m talking about. “Your mother called today.” I stare at the cut hidden beneath my sleeve. “Just so we could discuss it.”
“Great. She can talk to you about it, but not me.”

He puts the cup back and sits down.

Kay, Sam, and Grace are staring at us like we’re aliens. Their eyes don’t matter anymore. I’ve coated myself in a hard shell so their judgment can’t get through.

“It’s hard for her. She probably doesn’t know how to approach it.”

“So? Why can’t she get over it? I’m her daughter, not some random on the street.”

“What’s going on?” Sam cuts in.

“Do you want to tell them, Danielle?”

They stare, waiting to eat up how they were right.

“My parents are getting divorced.”

I wait for the laughs and the jabs.

“I’m really sorry to hear that, Danielle.”

“Yeah man, that really sucks.”

“I’m sorry, Danielle.”

“It’s a really hard thing to go through, Danielle. We’re all here to support you. I hope you know that.”

They all nod.

My cut pulses.

They aren’t out to hurt me. They’re not gonna laugh or hurl insults. They care.

I feel awful. Heat overwhelms me and the room blurs.

“I can deal with the divorce. I kind of knew it was coming.” They all nod. “I just didn’t want to accept it. The one thing I can’t deal with is my own mother not being able to talk to me about something this serious.”

“She might need time to process it,” Sam says.
“What if she hasn’t processed it by the time they’ve sold the house? I can’t live with someone who can’t even speak to me.”

Sam doesn’t reply.

I’m in full-on rampage mode by this point. “Were they even planning on buying a new house? Or was this their plan the whole time. I doubt it was an impulse decision.”

“Yes, it’s probably why they made a move to sell the house, but don’t think they did this to spite you. They might have needed time to process things themselves before they discussed it with you,” Dr. Smith says.

“Shouldn’t they have discussed it with me the whole time? I’m part of this family, too.” The whine in my voice grows.

“Maybe they should have, but in the end we can’t change the way things transpired. All we can do is help you manage this as best we can.” He crosses his legs.

“Did they not think I could handle it?”

“You’re going through a lot right now. They probably didn’t want to add to it. No one would want to do something that would hurt you more in the long run,” Grace whispers.

“I s’pose, but why couldn’t they trust me enough to be able to work through it myself?”

“No one wants to hurt their kid, Danielle.” I keep pushing on my cut. “Especially not when they’re already in pain.” Dr. Smith repeats Grace’s sentiment.

“How would you know?”

“My son had depression for a number of years.”
“You have a kid?” I ease up.

“Why does that surprise you?”

“’Cause you’ve never said anything about it before,” Kay cuts in.

“We’re not supposed to talk about our personal lives with clients.”

“I never expected the child of a psychiatrist to ever—” Sam says. The Dr. looks away from us and studies his pen rolling it around in his hands.

“Well, it can happen to anybody, can’t it?”

I nod and stare at my feet, rolling the conversation around in my head like cookie dough.
“Danielle.” Dad knocks on the door.

“Yeah?”

I lie on my bed staring into the light bulb. Watching a moth flit back and forth burning itself on the bulb.

“Phone for you.” I roll over and sit up, swinging my legs over the bed. He walks through the door towards me, looking around my bedroom. He hasn’t been in here for months.

“Huh?” I take the phone out of his hand. No clue who the hell would be calling me.

“Hello?” Dad walks out closing the door behind him, but not without one last gaze around the room. He lingers on the family photograph on my dresser.

“Hi… Danielle? It’s Hannah.”

I pause for a second. Shock rakes its nails down my back.

“Hey.” I breathe it out.

“How are you?”

I swing my legs back over and lie down.

“All right. You?”

“I’m really good.”

“Look, I’m sorry I never called … a lot’s been happening recently.” So much.

“No, that’s okay. I probably should’ve called you sooner. I’ve been really busy organising things for uni.”
“Oh.” Come on, Danielle. Keep the conversation going. “How’s everything going with that, by the way?” I twist my bed sheets through my fingers, pulling at tiny fabric flowers.

“Good, yeah. Strange, but a good strange. It’s scary, but I know when I’m there it’ll be a lot easier.”

Twist, twist, twist.

I nod before I realise she can’t see me. “Yeah, that’s cool.”

Twist. There’s no more stretch in this fabric.

“Do you want to hang out soon? Everything’s starting to die down a bit now so I have more time on my hands.”

“Yeah, that’d be really great.” I release the tension from my bedspread and watch the fabric stick up in a little hill like fluffed egg whites. The shock relaxes and removes its nails from my skin. I look around at the popstar eyes and family pictures, the red soda stain on the carpet, and breathe.

I smile.

****

I’ve made it back to the appointment room with the massive gaping hole in it for the first time in months. Except there’s no hole. There’s no wires sticking out, just the pot plant concealing a freshly fixed wall. Maybe there was no story to it. Maybe someone’s chair tipped and fell through it. Not a head, not a fist. Just a chair. But I don’t care to know anymore. And apparently Dr. Smith didn’t find it important enough to tell me either.
“Let me just start by saying I’m really proud of the progress you made last week. Opening up to the group like that even though you’re going through such a difficult time, is really amazing. You’ve come so far.”

Yet all I feel is guilt scrambling through my veins.

“Thanks.” It’s so weak.

“How’ve you been this week?”

I don’t speak. My mouth hangs open ready to lie again.

But I don’t. I look him in the eye.

I don’t even care if he sends me to the psych ward.

“I haven’t been completely honest with you.”

He gathers himself, but doesn’t interrupt. I stare behind him at the wall with its obvious patches of paint. Fixed yet a little bit different from how it was before.

“It’s not just anxiety I’ve been having problems with recently.”

The past bruises, the cuts, the blood noses they all scream at me to stop. They taunt me with half-hearted threats, while whispering reassurance of our secret past camaraderie. No one else needs to know ‘cause you’re fine. You’re fine. You’re fine.

I’m not fine.

I pull the sleeve up over my forearm. My secrets fall out for the world to see.

Even though my body aches with fear of the unknown, the ties that had constricted it have been loosened.

****

My memories are hazy after that. I don’t think I cried?
If I did, it wasn’t much.

He didn’t act like it was a big deal. Didn’t tell me off for lying to him this whole time. Didn’t threaten to tell my parents and sell me out, as my worst fears harassed me with.

He just nodded, as he does, and let me talk, asking questions here and there.

I honestly don’t remember what I said. Did I say too much, or too little, or just the right amount for my anxiety to be complacent? If I did, it doesn’t matter.

He didn’t judge me.
Week Eleven

It’s moving day. Dad’s gone out to ‘catch up on some work’, but I think he just didn’t want to be here when Mum left. The house still hasn’t sold, but Dad and I are going to continue living in it. I’ll stay with Mum every other week.

We don’t speak as we load the car. Things that used to belong to both of them have deep slivers down the middle. I pretend not to notice the lines cutting through her make up. Even though I’m coming back at the end of the day, getting in the car feels like a final goodbye. It solidifies something that never felt real.

Mum has to pull over a few times to take deep breaths, and re-organise. I keep my eyes straight ahead, pretend as if we’re still driving and say nothing. I don’t console her. I don’t speak to her. Strangers stare through the windscreen at the woman bent over her steering wheel, engine still running, smoke pluming out the back. I sink down into my seat hiding from all their judgment. Mum on the other hand picks herself up, wipes the tears off her eyes, smiles at the strangers, and pulls out into traffic again.

I don’t know how she does it.

The only luck we’ve had in the past few weeks was that Mum found a job as a receptionist at a hotel. Not much, but it will pay the bills, she said.

When we arrive at her new place, I’m surprised. It’s a tiny apartment about the size of our living room and kitchen. I guess I’ll be sleeping on the blow-up bed.

Surprise number two comes in the form of a scowling Aunt Anita looking like a five star hotel next to the dingy block of flats.

“What is she doing here, Mum?”
Mum sighs. “She offered to help me move in. Wouldn’t take no for an answer.”

“I’m sure this will be lovely.”

“It will only be for a few hours. Luckily this place isn’t big enough for three people.” She smiles, pretending those tear streaks aren’t there.

We open the door and the first thing Anita says is, “This is where you’re living now?” She kicks at a cigarette butt, its browned paper spilling open under her heel.

“Yes, Anita. This is where people on slightly more than minimum wage live.”

“It’s disgusting…”

Mum doesn’t reply, but goes to the back of the car and unlocks the boot, jimmying the key to get it to open.

We pull out a box each as Aunt Anita makes her way around the car.

“Still driving this hunk of junk I see.” She mumbles under her breath.

“Once again, all I can afford, Anita.”

“I can help you with money—”

“Can we at least get my things in the apartment before you start with the money talk? It’s been a hard day.”

“I see that, your make-up looks dreadful.”

Mum just continues to sigh away her insults.

Does she ever say anything that isn’t back-handed?

Mum puts a box of kitchen supplies into Aunt Anita’s hands.

“So I’m carrying the heavy things with my bad back, am I?”

****
As soon as we’re through the front door, Anita starts up.

“I can help you with money, Celia.”

I don’t even have time for a tour.

“No it’s fine, I can afford everything.”

There’s not much to tour anyway.

“Really, I can’t have my own sister living in this … well, you know.”

The ‘lounge’ and ‘kitchen’ are about the size of my bedroom combined.

“No, I don’t know, Anita.”

There’s one bedroom that connects off the lounge, and a separate toilet and bathroom that does the same. And one little cupboard to really tie it all together.

“Well, it’s a tad … awful here.”

“I think it’s cozy, really.”

“Cozy is a nice cottage on a lake. This is … unfortunate. Claustrophobic.” She shakes her hands like she’s alarmed for Mum’s health.

I try to hide behind boxes, unloading kitchen utensils into the drawers that I have to pull twice to open, avoiding their insistent prattling.

Any desire for a sibling I once had evaporates.

“Danielle!”

Nope. How about we don’t do this, Aunt Anita.

“Tell your mother she needs to live somewhere that at least has an inch of sunlight.”

I pick at a stain on the bench, not looking at her eyes trying to wheedle out a response.

“Um. This is really none of my business.”
I turn to the sink, running the tap to get the dust off the cutlery, staring into sticky blinds yellowed from years of oil splatters and sun damage.

“Yes it is. Do you really want to sleep here at night? Won’t you worry about your safety?”

“No, not really.”

I shake the droplets of water over the sink and place the cutlery onto a dishtowel to dry.

“Oh. Well you should.”

I grab another handful of cutlery and run it under the tap. I hope my silence and full-blast of tap water gives her the hint that I don’t want to be a part of this conversation.

“My offer to come stay at the farm still stands, by the way, Danielle. I think it would be even more beneficial now, considering your current predicament.”

She just can’t help herself.

I drop the cutlery on the semi-dry ones.

“Current predicament?”

“Divorce can be devastating for anyone. I can only imagine what it’s like for someone with your state of mind.”

State of mind.

“I’m fine here.”

“I really don’t think you are.”

The dull slam of the coffee table hitting the carpet turns our heads back to Mum.

“What the hell would you know about my daughter’s ‘state of mind’? What the hell would you know about any of us? The only time we ever hear from you is
when you want to wave your money in front of our faces. Yes, we get it, you’re more successful than us. You can talk shit about me as much you want, but she doesn’t need your judgmental bullshit, Anita.”

Happy Families was just thrown in the fireplace.

“I’m only trying to help! I’m not judging you or anything. Look at you, you’re living in a hovel, working as a receptionist, and you couldn’t even keep your marriage together.”

“So fucking what? I’m happy in my hovel as a receptionist with my broken marriage, Anita. Not everything needs to be trips to Europe and holidays in lakeside cottages to be happy.”

“I just want to help you!”

“And I don’t want your help! Just leave me in peace! Please—”

Aunt Anita’s eyes shift around the room, unable to settle.

“Okay, Celia. I understand. I’m sorry I intruded. I just wanted to help.”

“Yeah, well, sometimes when people believe they’re helping someone, they’re really just hurting them more.”

Aunt Anita picks up her purse, nods and leaves. We sit quietly as we listen to the low hum of her always-reliable car crunching through the drive.

Mum sighs, rests her hands on the counter top, lowers her head, and stretches.

“I hadn’t planned on being so rough about it.”

“I guess you need to sometimes, though.”

She stands up straight and keeps unpacking boxes. I figure now’s a better time than any.

“Mum.”

“Mmm.”
“Why can’t you talk to me about the divorce?”

She’s silent except for one deep breath. She doesn’t release it for a good five seconds.

“It’s hard, Danielle.”

“It’s hard for me too.”

“Not at the moment, please don’t push this.”

“You just said yourself sometimes when people think they’re doing the right thing they’re really just hurting the other person. That’s what it’s like for me. So I want you to tell me why you couldn’t. That’s all I want.”

She chuckles to herself and shakes her head. Pulling out books from a box she stacks them on the floor.

“Why are you laughing at me? I’m serious!”

She turns to me, anger shading her features. “Yeah, then why don’t you talk to anyone about your problems, Danielle? You think that’s not hard for us? We’ve watched you fall into this pit and we have no clue how to get you out because you don’t talk to anyone. That’s been what it’s like for a long time, but we said nothing ‘cause we thought you’d come around eventually. But you fucking didn’t and it got worse.” She shakes her head and looks at the ground. “Maybe if I hadn’t lost my job and my marriage wasn’t falling to bits I could’ve dealt with it. But I kept it to myself for the sake of you! And you want to speak to me about keeping shit to myself?” She’s crying.

“You’re just supposed to know! I’m just a kid, I don’t know how to fix anything.”

“You’re not a kid anymore. Only you can fix yourself, others can only help you along the way.”
My body hums with guilt and rage.

I walk to the toilet and slam the door.

The smell of damp hits me fast. I gag and reach over the toilet bowl to open the small frosted window. The latch barely resists, holding on with one screw. I stick my head as close to the gap as possible, my fingers leaving prints on the dust infested window ledge. Below me, a baby blue toilet brush covered in mould, cobwebs and other matter, I don’t want to know what. Maybe we should’ve cleaned the toilet before everything else, but I didn’t know I’d be having a tantrum today. Able to breathe again, I pull the cover down, and sit on top of the cool plastic. On the back of the door a felt tip stick figure family laugh at me.

Mum knocks on the door.

“I’m sorry I yelled at you.” Her voice is clear. The stick-family don’t let go of their smiles, holding hands under the green sun in front of a pink house.

It’s still hard to breathe, despite the open window.

“It’s really hard for me right now.”

I look down, a silver point glints at me through a pile of dead bugs and hair.

The missing screw from the window latch. Their eyes point me to it.

I reach down, the toilet cover creaks as my weight shifts, and pick it up letting it roll around my palm.

“It’s been a hard couple of months, Danielle. I didn’t mean to get angry at you. I’m so sorry.”

It’s rusted in a few places, but not on the point.

A knock on the door.

It would be so easy to run it across my skin.

“Danielle? Are you listening?”
It would be so easy.

My palm closes. The edges of the screw pinch my lifelines. I stretch behind me and put it on the ledge.

It would be too easy.

Another knock. “Danielle?”

I stand, wiping my hands on my shorts.

I try to open the door but it bangs into Mum on the other side.


She shuffles on all fours out of the way.

I can see she wants to say something but I cut in.

“You’re right I’m not a kid anymore. I know.”

“I know.”

“Danie—”

“Can we just finish unpacking? I’m really sorry.”

“Yeah, no, that’s fine. Let’s do that.”

Through the folding of linen and stashing of cutlery we talk. Slow, and skirting around details, but it’s a start. There are times when she needs to take a minute to
let the reality plant itself into her skin, or hack out weeds that have been a long
time growing. The remnants of our old life around us watch the transition of new
beginnings burrow in. We don’t cry or argue. We just talk. Letting what needs to
unfold. And it’s nice to let the thoughts go into a place where they’re accepted.

Every new spoon I put in the drawer and each old piece of fabric I place in the
cupboard calms my anxiety with their unique designs more than any counselling
or breathing techniques or hurting myself or my parents ever did.

But that’s not to say they didn’t help.
I realise now if they’d left me alone, those that care about me, taken over by my own pain, I wouldn’t have come through in the end. I would’ve been stagnant even longer than I have been. Even though they had their own struggles to contend with they still tried their best to support me. And really, now I know, the only person who could ever fix me is myself. I just needed some help along the way. Like we all do at times.

It’s not long until the end of the day comes, and Mum takes me home.

The car takes a couple of tries to start. Coughing out exhaust fumes. Old and faithful. Even with its tendency to throw me into soul-destroying situations, I still love it. Plus, it wasn’t their fault. Scary things happen, sometimes in the worst possible times. I can’t blame anyone for that.

We drive past new neighbourhoods, buildings I never even knew existed. People with plans, decisions, uncertainties, weaving in and out of their lives, move on as if they walk a defined road. They slip past, peeking through my window as they go. And for the first time in months I don’t hide my gaze when they stare. Even though my heart jogs as I look out at the world expanding in front of me, it’s manageable. My mind doesn’t cave, my body doesn’t sweat, my stomach doesn’t turn, and my thoughts are calm.

I turn to Mum, her brow furrowed, and her mind elsewhere. And despite the drastic changes, she pushes through. I don’t know how, and I probably won’t ever know, but she does in her own way. We all have our own way. I’m not some toy on an assembly line as much as I wish I were. I’m my own handcrafted, hand-sculpted human being, different from the rest with my own ways to manage my problems.
It might take a little longer to be all right. I know I’ll never be the old self I was before this. And it might be a few more years to find myself pushing through with ease like the people around me. Maybe they’ll look at me then and think I’m ‘normal’?

And tomorrow my anxiety might be the worst it’s ever been, but I know I can push through.

And just knowing I can is the closest I’ve felt to okay in a long time.
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