



Høgskulen på Vestlandet

Engelsk 3, emne 4 - Masteroppgave

MGUEN550-O-2023-VÅR2-FLOWassign

Predefinert informasjon

Startdato:	02-05-2023 09:00 CEST	Termin:	2023 VÅR2
Sluttdato:	15-05-2023 14:00 CEST	Vurderingsform:	Norsk 6-trinns skala (A-F)
Eksamensform:	Masteroppgave		
Flowkode:	203 MGUEN550 1 O 2023 VÅR2		
Intern sensor:	(Anonymisert)		

Deltaker

Kandidatnr.:	225
---------------------	-----

Informasjon fra deltaker

Antall ord *:	25252
----------------------	-------

Egenerklæring *: Ja

Jeg bekrefter at jeg har Ja registrert oppgavetittelen på norsk og engelsk i StudentWeb og vet at denne vil stå på vitnemålet mitt *:

Jeg godkjenner autalen om publisering av masteroppgaven min *

Ja

Er masteroppgaven skrevet som del av et større forskningsprosjekt ved HVL? *

Nei

Er masteroppgaven skrevet ved bedrift/uirksomhet i næringsliv eller offentlig sektor? *

Nei



Høgskulen
på Vestlandet

MASTER'S THESIS

Enhancing Mental Health Awareness in Education:
Exploring the representation of depression and anxiety in
contemporary young adult literature and its EFL classroom
applications

Ole Lothe Foseid | Kandidatnr.: 225

Master's in Education and English Didactics

FLKI/HVL/MGUEN550

Supervisor: Martin Padget

15.05.2023

I confirm that the work is self-prepared and that references/source references to all sources used in the work are provided, cf. Regulation relating to academic studies and examinations at the Western Norway University of Applied Sciences (HVL), § 12-1.

Abstract

This thesis seeks to explore how contemporary Young Adult Literature (YAL) depicts mental health, and its applicability and significance for teaching in the English as a Foreign Language (EFL) classroom. Since teachers may feel unprepared and unequipped when dealing with mental health issues, this research aims to offer teachers a framework for including YAL that addresses depression, anxiety, and other concerns in EFL courses.

This thesis explores theories related to YAL and YAL as a literary category and the prevalence of depression, anxiety, and other social influences on adolescents. Subsequently, a literary analysis is conducted, focused on two contemporary YAL novels with mental health themes: Adib Khorram's *Darius the Great is Not Okay* (2018), which addresses depression, and Sophie Kinsella's *Finding Audrey* (2016), which addresses anxiety. Through close reading of these novels the research seeks to assess their representation of these mental health issues as well as their applicability/relatability to adolescent audiences.

Analysis was performed using a qualitative research design with literary analysis concepts as its theoretical base, as well as data and research on depression, anxiety, and social and societal influences. This approach enabled an in-depth investigation of each novel's representation of mental health issues, potential impact on students and effectiveness when used within EFL curriculums.

After conducting the analysis, this thesis evaluates and discusses potential didactic strategies for using YAL in EFL classrooms. The objective is to give educators an understanding of YAL as a means of addressing mental health issues within EFL settings while offering practical advice for its implementation. YAL may foster empathy while simultaneously stimulating discussions regarding mental health topics while increasing language acquisition through engaging and relevant content.

The findings of this research suggests that YAL may prove highly effective at teaching and promoting understanding of mental health issues. By exploring representations of mental health in YAL as well as potential ways they could be implemented into EFL classrooms, this thesis contributes to ongoing conversations surrounding mental health education and its significance in adolescent development. Furthermore, this thesis highlights the need for increased attention on mental health in EFL core curriculum while offering promising solutions through YAL for addressing this crucial matter.

Samandrag

Denne masteroppgåva søkjer å utforske korleis moderne ungdomslitteratur (YAL) framstiller psykisk helse, og potensiell anvendeleghet og relevans for undervisning i engelsk som framandspråk (EFL). Sidan lærarar kan føle seg lite forberedt og dårleg rusta når dei må handtere psykiske helseproblem, har denne forskinga som mål å tilby lærarar eit rammeverk for å inkludere YAL som tar opp depresjon, angst og andre mental helse bekymringar i klasserommet.

Oppgåva utforskar teoriar knytte til YAL, samt YAL som ein litterær kategori, og førekomsten av depresjon, angst og andre sosiale påverknader på ungdom. Deretter blir det utført ein litterær analyse, fokusert på to moderne YAL-romanar med tema om psykisk helse: Adib Khorram's *Darius the Great is Not Okay* (2018), som tar opp depresjon, og Sophie Kinsella's *Finding Audrey* (2016), som tar opp angst. Gjennom nærlesing av desse romanane søkjer forskinga å vurdere deira framstilling av desse psykiske helseproblema så vel som deira anvendeleghet / relevans for ungdomspublikummet.

Analysen blei utført med ein kvalitativ forskingsdesign med litterære analysekonsept som teoretisk grunnlag, i tillegg til data og forskning på depresjon, angst, og sosiale og samfunnsmessige påverknader. Denne tilnærminga gjorde det mogleg å utføre ei djuptgåande undersøking av kvar roman sin framstilling av psykiske helseproblem, potensiell påverknad på elevar og potensiell effektivitet når dei blir brukt i klasserommet.

Etter å ha utført analysen, vurderer og diskuterer denne oppgåva potensielle didaktiske strategiar for å bruke YAL i EFL-klasserom. Målet er å gi lærarar ei forståing av YAL som eit middel for å ta opp psykiske helseproblem innanfor EFL-omgjevnadar.

Resultata i denne forskinga tyder på at moderne YAL representerer psykiske helseproblem på ein god måte, og kan vise seg å være svært effektivt for å lære og fremje forståing av psykiske helseproblem. YAL kan fremje empati samtidig som det stimulerer diskusjonar om psykiske helse, mens det aukar språkopplæringa gjennom engasjerande og relevant innhald. Ved å utforske framstillingar av psykiske helseproblem i YAL, så vel som potensielle måtar dei kan bli implementert i EFL-klasserom, bidrar denne oppgåva til pågåande samtaler om psykisk helse og den betydninga den har i ungdomsutvikling. Vidare understrekar denne oppgåva behovet for auka merksemd på psykisk helse i skulen.

Warning:

This thesis contains discussion of suicide, which may be triggering for some readers. If you or someone you know is in crisis, please seek professional help.

Advarsel:

Denne oppgåva inneheld diskusjon om sjølv mord, som potensielt kan utløyse sterke reaksjonar hos nokon lesarar. Dersom du eller nokon du kjenner er i krise, bør du søkje profesjonell hjelp.

Hvis det står om liv og helse ring 113

Mental Helse Hjelpetelefonen: Telefon 116 123 (hele døgnet)

Alarmtelefonen for barn og unge: Telefon 116 111

Kors på halsen (for alle under 18 år): Telefon 800 33 321

Table of contents

1.0 Introduction	6
2.0 Theory and Methodology in the Analysis of Young Adult Literature with Mental Health Themes	6
2.1 Theoretical concepts	6
2.1.1 Contemporary Research on YAL with Mental Health Themes	9
2.2 Thesis Methodology.....	9
2.2.1 Research Questions and Outline	9
3.0 YAL, Mental Health, and Societal Influences	11
3.1 Young Adult Literature	12
3.1.1 Mental Health Issues in Young Adult Fiction	13
3.1.2 Literature Review	15
3.2 Depression	16
3.2.1 Differences between MDD and depression in adolescents.....	18
3.3 Anxiety	19
3.4 Comorbidity.....	21
3.5 Covid-19	23
3.6 Mental health issues today	24
3.6.1 Stigma	24
3.6.2 Society	25
3.6.3 Sexual orientation.....	25
3.6.4 Cyberbullying.....	26
3.7 LK20.....	27
4.0 Representation of depression and anxiety in contemporary Young Adult Fiction	28
4.1 Representation of depression in Adib Khorram's <i>Darius the Great is Not Okay</i>	29
4.1.1 The power of relationships	31
4.1.2 Bullying and self-image.....	39
4.1.3 Depression.....	42
4.1.4 Validity	44
4.1.5 Can adolescents identify?	45
4.2 Representation of anxiety in Sophie Kinsella's <i>Finding Audrey</i>	46
4.2.1 Family	47
4.2.2 Anxiety.....	48
4.2.3 Can adolescents identify?	52
4.3 Comparison and discussion.....	53
4.3.1 Themes and Motifs.....	53
4.3.2 Representation of Mental Health	54
4.3.3 Writing Style and Narrative Techniques	55
4.3.4 Comparison and Contrast	56
5.0 Implications for the EFL classroom	57
5.1 Benefits of Using Young Adult Literature about Mental Health.....	57
5.1.1 Relatability and Empathy	57
5.2 Potential Didactic Strategies for Teaching <i>Darius the Great is Not Okay</i> and <i>Finding Audrey</i>	58
5.2.1 Didactic Strategies.....	59
5.3 Discussion.....	60
5.3.1 Future Research.....	61
6.0 Conclusion.....	62
6.1 Research question	63
6.2 Relevance of the study	66
6.3 Final Reflections	67
References	68

1.0 Introduction

Many Norwegians live healthy and happy lives, yet mental health issues are on the rise among adolescents and young adults (Bang, 2019). Children and young adults struggling with mental health issues often feel isolated and suffer in silence. As teachers, discussing mental health with students may be challenging due to the seriousness of the subject. However, I am curious if using young adult literature (YAL) can make students and teachers more comfortable discussing these topics.

The world is currently facing a turbulent time, with Covid-19, wars, questionable and everchanging social climates, and turmoil many places. This can make one wonder how it might be affecting the youth in our society. Teachers may sometimes feel unprepared to handle these situations. This is what makes the topic intriguing: using YAL as a "bridge" between the mental health problems of fictional characters and those of real-life individuals. It is crucial to engage young adults in discussions about these topics to better prepare them for the challenges they may face in today's world. Through YAL, both teachers and students may gain a deeper understanding of mental health complexities and the emotional turmoil they can cause. These stories are essential for building emotional resilience and providing a platform for open dialogue and further exploration.

This study consists of theory, data, and previous research as a basis for literary analysis. The research also provides a thorough overview of depression, anxiety, and social and societal influences. The primary analysis is of two contemporary young adult novels, where each of them has themes of mental health issues. After concluding the analysis, there will be an assessment and discussion of potential didactic strategies to teach YAL in the EFL (English as a Foreign Language) classroom.

2.0 Theory and Methodology in the Analysis of Young Adult

Literature with Mental Health Themes

2.1 Theoretical concepts

Literary analysis involves employing different theoretical frameworks as lenses through which readers can explore and interpret literary texts. These theories not only provide a basis for understanding various dimensions of literature but also offer a systematic way of examining human experience as seen through literary works. Young adult literature (YAL)

with mental health themes frequently employs three central theories for literary analysis: Reader-Response Theory, Psychoanalytic Theory, and Social Identity Theory. These theories enable readers, educators, and scholars to delve into the multiple layers of YAL to gain a more in-depth understanding of mental health issues represented and the possible repercussions these narratives might have for readers.

Reader-Response Theory

Rosenblatt (1978) proposed Reader-Response Theory as an approach to understanding literary texts, emphasizing the reader's role in shaping meaning and interpretation of it. According to this theory, readers bring with them their personal experiences, emotions, beliefs, and interpretation of narrative to form their individual understanding.

As Wolk (2009) notes, reader-response theory plays an essential part in young adult literature with mental health themes. By engaging with texts that contain mental health themes and engaging emotionally with characters/situations present within it, this interaction allows readers to draw connections between personal experiences and what happens within literature--such as increased empathy or deeper self-awareness from its themes -and characters/situations presented therein that allow readers to find connections that foster increased empathy or deepen an understanding of mental illness issues within themselves.

Reader-response theory in young adult literature featuring mental health themes can foster dialogue between reader and text, sparking critical reflection and introspection. When engaging with these narratives, readers might not only empathize with characters' experiences but may also question societal attitudes toward mental illness issues and instigate change within themselves as individuals; reader-response theory provides a key framework to understand how such literature impacts perceptions and attitudes of readers, and potentially contributing towards creating more empathetic societies overall.

Psychoanalytic Theory

Psychoanalytic Theory This framework, inspired by Sigmund Freud's work, serves as an effective means for understanding both authors' unconscious motivations and desires as well as readers' desires (Freud 1923). Psychoanalytic Theory offers an important tool for exploring

young adult literature with mental health themes; providing us an insightful lens into understanding emotional and psychological factors which drive character behavior.

Psychoanalytic theory allows scholars and readers to explore deeper motivations behind characters' actions and decisions by applying psychoanalytic theory to Young Adult Literature with mental health themes, delving deeper into how mental health issues intersect with characters' innermost thoughts, feelings, and unconscious desires - giving a nuanced understanding of all that mental illness experience entails in literature (Coats 2004).

Psychoanalytic theory offers another useful approach for exploring readers' unconscious desires and conflicts that influence how they interpret a text (Coats 2004). Readers' individual motivations and emotional reactions could affect how they connect with and interpret characters or situations presented within literature (Coats, 2004), providing valuable insight into attitudes about mental health challenges while offering them empathy toward characters struggling in this arena.

Social Identity Theory

Tajfel and Turner (1979) proposed Social Identity Theory, which holds that individuals define themselves through membership of specific social groups that shape their sense of self and sense of identity. When applied to young adult literature featuring mental health themes, this theory provides an effective lens through which characters create identities as related to their struggles with mental illness.

Applying Social Identity Theory to young adult literature with mental health themes allows for deeper exploration into how characters cope with mental health struggles while maintaining a strong sense of themselves and relationships (Hughes-Hassell & Cox 2010). Their experiences may form their social identities over time and influence both how they perceive themselves and those they interact with (Hughes-Hassell & Cox 2010).

Social Identity Theory provides a framework for exploring how readers might relate or identify with characters based on their experiences and social affiliations, engaging with narrative texts like books about mental illness. Through reading stories like these, readers may discover parallels between themselves and characters' social identities that foster understanding and empathy between reader and text; further enabling readers to reflect upon

personal growth opportunities while broadening understanding (Hughes-Hassell & Cox 2010).

2.1.1 Contemporary Research on YAL with Mental Health Themes

Contemporary research on YAL with mental health themes has shown growing interest and recognition of the importance of exploring mental health issues in this genre. Researchers, educators, and mental health professionals are increasingly acknowledging the potential of YAL to raise awareness, reduce stigma, and provide support for young readers who may be grappling with mental health challenges. Recent studies have focused on various aspects of YAL with mental health themes, including representation and accuracy, reader impact, and the role of educators and librarians in facilitating discussions around mental health.

2.2 Thesis Methodology

Drawing on Reader-Response Theory, Psychoanalytic Theory, Social Identity Theory, and previous research on the subject, this thesis will examine the potential of YAL with themes of mental health through a qualitative design focused on the novels *Darius the Great is Not Okay* and *Finding Audrey*. By applying these theoretical frameworks, a comprehensive understanding of the mental health representation, as well as the potential reader's engagement and identification with the characters, will be achieved.

Data will be collected through close readings and thematic analysis of the novels, focusing on depression and anxiety representation. Ethical considerations will be adhered to, and validity and reliability ensured through multiple strategies. Limitations include sample size, generalizability, and potential subjectivity in thematic analysis.

This methodology aims to explore mental health representation in YAL, its potential classroom applications, and the ways in which the theories discussed earlier contribute to the understanding of the novels' impact on readers, and it's EFL classroom applications. By examining the novels through these theoretical lenses, the study will provide valuable insights into the portrayal of mental health issues in contemporary YAL and offer guidance for educators on how to utilize these texts effectively in the classroom.

2.2.1 Research Questions and Outline

The purpose of this thesis is to answer the following research questions:

- How does contemporary YA literature depict mental health issues, such as depression in Adib Khorram's *Darius the Great is Not Okay* and anxiety in Sophie Kinsella's *Finding Audrey*?
- How can YA literature be utilized to address mental health issues in the EFL classroom?
- What are the potential advantages of using young adult literature about mental health to stimulate a conversation about these issues?

This research seeks to answer these questions by exploring theories, research, and literature related to YAL, depression, and anxiety in modern society. The foundation will be constructed by integrating research and literature on these subjects and the theories associated with depression, anxiety, and YAL. Subsequently, an analysis of two contemporary YA fiction novels will be conducted, applying the notions outlined in the theoretical section. This approach will facilitate a more profound understanding of the characters and themes within the books. Key elements to be focused on include:

- Examining the main characters and their relationships in depth
- Presenting an outline of the plot and the main ideas in the work
- Providing an overview of the text's overall theme
- Recognizing symbolism in the novels
- Examining the style and structure

Furthermore, a comparison of the representation of mental health issues and the analyses of the novels will be conducted. Following that, a discussion of the potential implications for EFL classrooms based on the insights gained from the books will be presented. This approach allows us to make connections between research and books, and to better understand how themes of depression and anxiety are depicted within young adult literature. These insights can then inform teaching strategies and create a more inclusive classroom environment for students. By exploring the implications of these themes in classrooms, a more understanding and supportive EFL learning atmosphere can be fostered, which is conducive to student growth and success.

3.0 YAL, Mental Health, and Societal Influences

As teachers, we face students having difficult times, and we are key people in their general wellbeing at school. Both depression and anxiety are two frequently used terms among students. In this chapter, I will review YAL as a category, as well as define and discuss important terms regarding depression and anxiety. I will also review how several factors effect mental health (society, cyberbullying, sexual orientation, etc.). It is essential to have set definitions and an overall foundation throughout this thesis, as it will address medical terms. I will discuss the terms of depression and anxiety to an extent that is sufficient for the context of this thesis. I will then review the status of young adult literature research regarding depression and anxiety. Reviewing terms of depression and anxiety will allow me to discuss more openly in the analysis of the fictional literature. Note that my review of the literature regarding depression and anxiety will be exclusively about adolescents, because there are key differences between adults and adolescents in this regard.

The main objective of this thesis is to take a deeper look at fictional characters' struggles with depression and/or anxiety and determine whether they might serve a symbolic purpose, as the fiction is representing real-life issues. The real-life issues pupils might struggle with will influence their life at school. Every pupil is entitled to a safe place to receive their education, and teachers must strive to achieve this. The school has a duty to act to give the pupils a better environment. The following quotation sheds light on the responsibility that the school has to make their pupils daily life a safe and as good as possible.

All pupils and students are entitled to a safe and good school environment that promotes health, well-being and learning. To safeguard this right, schools are obliged to take action against bullying under Section 9 A-4 of the Education Act. The objective of this clause is to ensure that schools act quickly and appropriately when a pupil does not feel safe and well at school. If the school fails to act by taking the appropriate measures, the pupil may complain to the county governor. (Udir, 2019)

This paragraph is written in regard to bullying, yet it indirectly supports the need for active discussions about mental health issues, that will aid in the elimination of stigma, the feeling of being alone with mental health issues, and lowering the threshold for seeking professional help.

3.1 Young Adult Literature

Young adult literature is a category of books that has a vast selection of literature that cover a plethora of themes. Looking at the volume of copies sold in this category we can assume that many teens still find joy in reading books. Each year, 35.03 million copies of young adult books are purchased. This is a slight decrease from the previous year, which saw 35.29 million copies sold (Curcic, 2023).

Historically, YAL is a relatively new category. It emerged during the mid-20th century from children's literature (Cart, 2008). Young adult literature first earned official classification by the Young Adult Library Services Association (YALSA) in 1957. Young adult literature surged forward during the late 1970s and '80s thanks to authors like Judy Blume and Robert Cormier exploring issues pertinent to adolescents (Reynolds, 2011). J.K. Rowling's Harry Potter series during the late 1990s dramatically expanded young adult literature's scope and audience reach, garnering extraordinary commercial success as well as renewed excitement for this category (Nikolajeva, 2010). Since 2000, young adult literature has progressed through several subgenres and themes including dystopian fiction, fantasy novels, issue driven books and issue novels. The authors Suzanne Collins, John Green and Angie Thomas also have played major roles in the category's development.

Adolescents should read and consider the works of these and other authors since they have been specifically tailored to their age group. Young Adult Literature provides valuable perspectives into contemporary issues while offering invaluable support for struggling readers. Thus, readers are better able to relate to and comprehend the themes more easily (Hendrickson, 2018). Young Adult Literature stands out from other categories by constantly adapting and staying current with what youth experience today. Young adult literature is often inspired by current events; therefore, adolescents may benefit greatly from reading YAL. Reading can provide them with invaluable insight into their own experiences as well as those of their peers, providing comfort, understanding, motivation and creating empathy as well as developing critical thinking and problem-solving skills.

Every teacher must decide for themselves if and when YAL should be used as part of an EFL classroom toolkit, so its usage remains entirely up to each teacher. Manutscheri (2021) discusses the benefits of using YAL in an EFL classroom and lists various purposes it might serve. First, she discusses how the material gives readers an engaging story which shows they aren't alone when facing struggles (in this instance mental health issues). Second, YAL

provide readers with stories that promote empathy for others (Manutscheri, 2021, p.33). Empathy allows pupils to identify with issues that they have not yet experience and engage in discussions regarding these themes. This evidence suggests that Young Adult Literature could help de-stigmatize challenging topics like mental health and provide insight and a forum for participation and dialogue. Furthermore, creating shared understanding among characters and the issues they experience is of equal importance. Exploring characters' feelings, motivations and values helps build empathy between reader and characters; enabling readers to see things through their eyes and understand why certain decisions were made by these characters. By understanding them more fully, readers gain a better appreciation for complex issues being raised in literature while discovering how best to respond or interact with them (Manutscheri, 2021, p.46-48).

3.1.1 Mental Health Issues in Young Adult Fiction

Mental health has long been a topic that has resonated strongly in young adult fiction; today more than ever this topic is relevant, as is evidenced by an abundance of books related to mental illness on YAL market. TV and movie adaptations of Young Adult Literature with mental health themes have grown increasingly popular, most notably Jay Asher's *Thirteen Reasons Why*, Stephen Chbosky's *The Perks of Being a Wallflower*, and John Greene's *The Fault in Our Stars*. The surge of popular media may have given this genre of YAL more popularity, and exposure to adolescents. Arguments can be made in support of this trend. Romantically and popularizing mental health may help remove stigma associated with mental illness and make it more acceptable to discuss. This could result in more people seeking assistance for their mental health needs. Furthermore, highlighting courage among main characters may spur conversations around tough subjects like suicide and mental health awareness - ultimately leading to greater understanding. On the contrary, researchers and reporters argue that romanticizing mental illness is a dangerous trend, arguing that awareness and empathy for mental illness differ significantly from romanticizing it - the latter could cause people to seek it out instead. As seen in *Thirteen Reasons Why*, readers may view suicide as an act of bravery by its protagonist and may even perceive her as an inspiration to take their own lives

Young adult literature with mental health themes can also provide validation and hope to young adults experiencing depression. By seeing characters who share similar experiences

and emotions as them, young adults may feel less isolated during their struggle and more empowered to seek professional assistance for themselves.

Conversely, stories depicting characters with mental illnesses could cause adolescents to identify with them and "emulate" their actions. Reading Young Adult Literature with themes related to depression and anxiety (at least within an educational setting) should serve to raise awareness, not romanticize mental health issues. Readers exposed to characters with mental illnesses in literature may more readily identify with them and believe they share similarities with them. A faulty understanding of their mental health may lead them down an unexpected path and to seek unnecessary medical treatments. Overdiagnosis of mental illnesses becomes all too easy and distinguishing what is real from what are romanticized versions of illnesses can become difficult. However, it's important to recognize that not all literary depictions of mental illness are negative. Many readers find comfort and understanding from such stories, and for some readers these tales provide hope of recovery. Others can benefit from reading novels that take a different perspective on mental illness to help destigmatize them. For instance, portrayals of protagonists living with depression that show the hardship this involves can help readers recognize the symptoms of this condition and understand requirements for treatment.

Depression is often treated like an illness; even those suffering from serious mental conditions sometimes do so to get help or receive assistance. Many people often assume that when someone claims they are suffering from depression, they must be clinically depressed whereas some may perceive this claim to be just sadness or temporary sadness. Professionals, family members and peers often struggle to understand whether someone who claims they are depressed is truly clinically depressed because people often use "depression" and "sadness" interchangeably when they actually represent different conditions. Clinical depression is a serious mental illness and should be addressed as such, while sadness tends to dissipate more quickly without needing professional assistance. As a result, decision makers find it increasingly challenging to allocate resources effectively and to differentiate between normal emotions and severe mental illness. Furthermore, children and adolescents are becoming increasingly exposed to misused mental health words which distorts their working definition (mental health literacy) of depression and anxiety.

Though YAL with mental health themes is abundant, we should still exercise caution in selecting our choices, as the quality of the literature may not always meet expectations. In particular, classroom-friendly fiction should contain at least some degree of realism for

successful implementation. Due to young adult literature being used as a vehicle for teaching lessons and providing insight into difficult topics, it's crucial that it accurately portrays mental health issues (Manutscheri, 2021, p.42). Representing mental health in Young Adult Literature can help destigmatize the topic and facilitate more open dialogue among young adults. However, it's worth taking note of the variety of titles available for reading on the subject. Over the last several decades, there has been an upsurge of young adult literature with mental health themes, making it easier to select material from multiple subcategories. Furthermore, mental health has garnered increased social and political focus as an issue (Surén, 2018).

3.1.2 Literature Review

Researchers have recently been exploring how mental health is represented in young adult books and how this depiction might have an effect on young readers who dive into these stories. Many of these books explore mental health with care and detail, helping break down stigmas and promote understanding among young readers. Some portrayals are genuine and compassionate, creating greater awareness and comprehension of mental health issues among them (Richmond, 2018).

However, not all research paints such a positive portrait of mental health representation in past young adult literature (Severn, 2018, p.50). Unfortunately, some portrayals can perpetuate negative stereotypes and stigmatizing attitudes; therefore it is essential that we carefully assess depictions of mental illness in young adult literature in terms of potential effects on readers. Aside from existing literature sources such as Young Adult Library Services Association's (YALSA) annual list of Best Fiction for Young Adults also provides data regarding its representation; one such source includes books that cover themes involving mental health.

A review of this list reveals several novels which address mental health issues in an intelligent and balanced manner. For instance, Anna Jarzab's *Breath Like Water* explores living with anxiety and obsessive-compulsive disorder, and John Green's *Turtles All the Way Down* follows a teenager living with OCD while she navigates friendships and relationships. On the contrary, there are also novels which may be criticized for their portrayals of mental health issues.

Overall, literature and data suggest that depictions of mental health in young adult literature is an extremely complex issue with both positive and negative representations. While many novels address mental health issues sensitively and in a nuanced manner, others may perpetuate negative stereotypes and stigmatizing attitudes. Therefore, authors, publishers, educators should carefully consider all depictions of mental illness within young adult literature to promote understanding while decreasing stigma through these depictions.

3.2 Depression

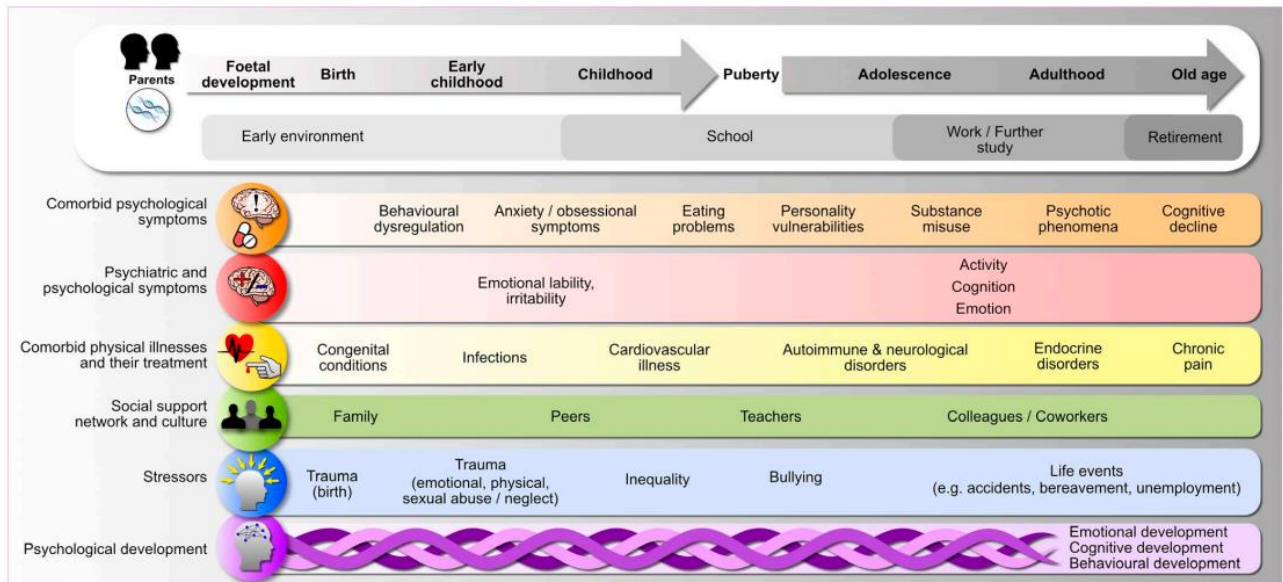
Depression is a prevalent illness among both children and adolescents, and its frequency increases with older children. A report by the Norwegian Institute of Public Health provides statistics regarding its frequency among both groups; for children this ranges between 0.1-1.6 percent prevalence; among teens it ranges between 2.2 - 3.2 percent. Furthermore, 14.3 percent had experienced or had depression (NIPH, 2022).

Depression symptoms vary between adolescents and adults. Depression is often referred to as Major Depressive Disorder (MDD), and its hallmark symptoms will differ accordingly. We will outline some key distinctions later in this section. For adolescents specifically, depression symptoms often vary widely from person to person. The Mayo Clinic characterizes depression in adolescence by “sadness, irritability, feeling negative and worthless, anger, poor performance or poor attendance at school, feeling misunderstood and extremely sensitive, using recreational drugs or alcohol, eating or sleeping too much, self-harm, loss of interest in normal activities, and avoidance of social interaction” (Mayo Clinic Staff 2022).

There are several potential causes for depression. “Looking at its biological basis, there are key differences in adolescents with depression versus adolescents without depression. One such difference is an over-activation in limbic system circuitry (ventral prefrontal cortex, amygdala, hippocampus, HPA axis) while reward system circuitry (prefrontal cortex, striatum and ventral tegmental dopamine neurons) remains underactive” (Rice & Sher, 2013 p 71-72). Several studies show decreased volumes which resulted in increased activation (Rice & Sher, 2013 p 72).

To fully comprehend why the brain acts this way, we must consider several contributing factors. There is no one-off cause of depression; rather, its causes vary widely across age groups and individuals. Depression can be a result of many factors, ranging from acute events to gradual transitions that build up over time. Depression can result from any number of

factors, including unbalanced hormone levels, genetics, inadequate nutrition, substance abuse, prolonged stress and lack of social support. All these factors can alter the brain's structure and chemistry, potentially leading to depression. Stressful life events, personality traits, family histories, loneliness, alcohol abuse or drug dependence and illness are common triggers for depression (Malhi et al, 2020).



(Figure 1 retrieved from the 2020 Royal Australian and New Zealand College of Psychiatrists clinical practice guidelines for mood disorders: Major depression summary (Malhi et al).)

In the figure above, we can see a framework of factors that contribute to depression. On the left side of the figure, we can see the person's life as it grows and ages from fetal development to old age. Below, there are factors with various contributors, that change over the course of the individual's life. As the development of the person continues into puberty and adolescence, the factors change. The environment the person is exposed to is changing, and there is more emotional development. The typical comorbid psychological symptoms are changing and becoming more complex and significant, and the psychiatric and psychological symptoms are developing (Malhi et al, 2020).

To sum up, depression has many reasons, causes, and symptoms. The process of becoming an adult and leaving childhood behind makes the adolescent years challenging for people who are prone to or suffer from depressive symptoms. There are many reasons for people to develop depression, but they are not always obvious. Chemical imbalances in the brain may contribute or even cause depressive symptoms (as discussed, with a less active reward center in the brain), without there being any specific reason. Adolescence is a time of rapid physical, cognitive, and social development, and these changes can be overwhelming and difficult to

manage. This can cause people to become depressed, even if they don't have any specific reason to be. Additionally, the transition to adulthood can be particularly challenging for people with a predisposition to depression due to chemical imbalances in the brain. These imbalances can cause people to become depressed even if they don't have any obvious reason. There are also genetic dispositions that may contribute. These genetic dispositions may make individuals more vulnerable to environmental stressors, such as the transition to adulthood, which can trigger depression in those with a predisposition. Additionally, factors like social isolation, financial struggles, and difficulty adapting to new roles and responsibilities can also contribute to depression during this phase of life. Additionally, during this period of transition, adolescents may have difficulty dealing with the pressure to fit in with their peers, fear of failure in school, and difficulty establishing a sense of identity. These can all lead to a heightened sense of anxiety and stress, which in turn can lead to depression.

3.2.1 Differences between MDD and depression in adolescents

Adolescent depression and MDD share similar traits; both are characterized by feelings of sadness or loss of interest in activities that persist over an extended period of time. MDD can be more severe and persistent than depression, diagnosed based on specific criteria outlined by the Diagnostic and Statistical Manual of Mental Disorders Fifth Edition (DSM-5) (American Psychiatric Association 2013). One such criterion involves experiencing symptoms of depression for at least two weeks with at least one symptom being either depressed mood or reduced interest/pleasure in activities.

Outside of diagnostic criterion, there are other differences between adolescent depression and MDD that distinguish it. Adolescents diagnosed with MDD were more likely to report feelings of guilt and worthlessness as well as more intense symptoms of anxiety and suicidal ideation; by comparison, adolescents diagnosed with depression were more likely to report somatic symptoms, such as headaches or stomach aches (American Psychiatric Association 2013).

Treatment approaches for adolescent depression and MDD differ considerably, too. While psychotherapy such as cognitive-behavioral therapy is effective for both conditions, medication may be more often used to treat MDD. A study by Birmaher et al. (2007) discovered that antidepressant medication was more effective than placebo in treating adolescents suffering from MDD.

The differences between MDD and depression among adolescents can be substantial, with MDD being diagnosed according to specific criteria outlined by DSM-5. Adolescents diagnosed with MDD often display more anxiety symptoms and suicidal thoughts whereas those suffering from depression typically report somatic symptoms instead. Treatment approaches for MDD typically include medication while psychotherapy may help treat both conditions simultaneously.

3.3 Anxiety

Anxiety disorders is a general term that is used to describe several issues a person might experience. Some of the most usual anxiety disorders are panic disorder (PD), agoraphobia, social anxiety disorder (SAD), generalized anxiety disorder (GAD), obsessive-compulsive disorder (OCD), posttraumatic stress disorder (PTSD), acute stress disorder (ASD), and specific phobias (SP) (Grant, 2013).

Grant (2013) provides a detailed description of various anxiety disorders: Panic Disorder (PD) is characterized by the fear of sudden and unexpected physical symptoms of anxiety, known as panic attacks. Agoraphobia involves the fear of being in places where escape may be difficult in the event of a panic attack. Social Anxiety Disorder (SAD) is the excessive fear of being negatively evaluated in social or performance situations. Generalized Anxiety Disorder (GAD) is characterized by persistent and uncontrollable worry that leads to somatic and cognitive symptoms of anxiety. Obsessive-Compulsive Disorder (OCD) is characterized by distressing and intrusive thoughts, known as obsessions, and repetitive behaviors or thoughts, known as compulsions, aimed at reducing anxiety. Posttraumatic Stress Disorder (PTSD) involves intrusive thoughts related to a past traumatic event, avoidance of such thoughts, emotional numbing, and physical symptoms of anxiety. Acute Stress Disorder (ASD) is similar to PTSD in terms of anxiety related to trauma, but can only be diagnosed within the first month following the traumatic event. Finally, specific phobias involve excessive and irrational fears of specific objects or situations (Grant, 2013, p. 507).

Anxiety is a worry or stressor about something that is *going* to happen. Craske et al (2011) explain that it is easy to confuse anxiety with fear and believe that they are the same process, but that is not the case as there are key differences. Fear is a response to an immediate threat, which causes physiological changes in the body (hormone production, blood pressure, etc.), but anxiety is a response to something in the future. An example of fear could be an interaction with a predator (dangerous animal, etc.). This interaction will naturally cause the

body to feel fear because of this immediate threat the person is facing. In Craske et al. (2011) the symptoms of fear are classified as:

The thoughts of imminent threat (verbal-subjective), escape (overt motor), and a strong autonomic surge resulting in physical symptoms such as sweating, trembling, heart palpitations, and nausea (somatic-visceral). (p. 370)

On the other hand, Craske et al. (2011) classify the symptoms of anxiety as:

Worry (verbal-subjective), avoidance (overt motor acts), and muscle tension (somatic-visceral activity). (p.370)

Anxiety is a normal response in humans and is necessary for us to get our goals and daily tasks accomplished. We need the anxiety of specific situations that lies ahead to help us get there. The issue, and when anxiety becomes a disorder, is when people experience anxious symptoms frequently and over prolonged periods of time, even when the situation that might be causing the anxiety is concluded.

Furthermore, the research on anxiety in children as opposed to adults shows quite different results. Grant (2013) elaborates on this and mentions the lack of research on anxiety in adolescents. There is therefore a challenge for researchers and medical professionals as to which age group (child or adult) is most relevant to look at when reading and learning about anxiety in adolescents.

Research indicates that certain brain areas function differently in individuals with anxiety disorders. Craske et al. (2011) explore four brain regions involved in anxiety disorders:

1. A network consisting of the amygdala, ventromedial prefrontal cortex (vmPFC), and hippocampus plays a key role in anxiety disorders. The amygdala assesses threats, forms associations with danger, and regulates responses to potential threats. The vmPFC and hippocampus help inhibit fear responses; for example, the vmPFC moderates the amygdala's reaction to threat cues while the hippocampus provides information about safe and dangerous situations (Craske et al., 2011, p.382).
2. The orbitofrontal cortex (OFC) has two subregions: medial (mOFC) and lateral (IOFC). These areas are involved in decision-making and assigning value to situations. The mOFC deals with positive valuations (e.g., rewards and safety), while the IOFC handles negative valuations (e.g., punishment). The IOFC, along with the ventrolateral

PFC, mediates negative thoughts, obsessions, and worries, while the mOFC suppresses fear and anxiety (Craske et al., 2011, p.382).

3. The insular cortex is responsible for interceptive processes, which involve awareness of and sensitivity to internal bodily sensations. The insula is implicated in anxiety sensitivity, as heightened physiological responses to aversive stimuli generally result in stronger conditioning.
4. The anterior cingulate cortex (ACC) has functionally distinct subdivisions: dorsal (dACC), pregenual (pgACC), and subgenual (sgACC). The dACC, known as the cognitive division, deals with error detection, conflict monitoring, and attention. The pgACC, or the affective division, is involved in suppressing attention and responding to emotional stimuli. The dACC regulates attention and response to cognitive stimuli, while the pgACC focuses on affective stimuli.

Anxiety disorders have become more and more prevalent among adolescents over recent years, according to research. Anxiety among adolescents can have devastating repercussions, negatively influencing academic performance, social relationships, and overall quality of life. Furthermore, studies have linked anxiety in adolescence with an increased risk for anxiety disorders or mental health concerns in adulthood. Medical professionals, teachers and parents need to recognize signs of anxiety among adolescents and provide appropriate support and treatments. Cognitive-behavior therapy and medication have proven their worth as effective tools in relieving anxiety symptoms in teenagers while improving overall well-being.

To sum up, anxiety disorders encompass a variety of conditions characterized by excessive worry, fear, and stress, which can result in both physical and cognitive symptoms. These disorders, as explained by Grant (2013), include Panic Disorder, Agoraphobia, Social Anxiety Disorder, Generalized Anxiety Disorder, Obsessive-Compulsive Disorder, Posttraumatic Stress Disorder, Acute Stress Disorder, and specific phobias. While anxiety is a natural response to certain situations, it becomes a disorder when individuals experience anxious symptoms frequently and for extended periods.

3.4 Comorbidity

Comorbidity refers to the simultaneous existence of two or more disorders within an individual, often at high rates of prevalence both clinically and among community populations. Depression and anxiety are two such co-occurring conditions with high

prevalence rates both clinically and among community populations. This section will review research conducted regarding co-occurrence between depression and anxiety.

Comorbid depression and anxiety disorders in adolescents have become an increasingly prevalent phenomenon that have substantial repercussions for their mental health and well-being. In this section we review current research into this phenomenon among teens.

Comorbidity between depression and anxiety disorders is prevalent among adolescents, ranging from 20%-50% (Costello et al., 2003). Even higher estimates exist among clinical populations of adolescents who meet diagnostic criteria for depression also meet criteria for an anxiety disorder (Konac, 2021).

Risk factors associated with depression and anxiety co-morbidity among adolescents have been identified, including genetic, environmental, individual-level influences like temperament and coping styles, as well as environmental ones like bullying. Twin studies have revealed that genetic factors account for between 30-40% of variance in depression-anxiety co-occurrence among adolescents (Eley et al. 2003).

Environmental factors, including stress, trauma and life events that contribute to depression and anxiety among adolescents have been identified as risk factors. Bullying victims or victimizers could be more at risk for depression and anxiety than other adolescents (Costello et al. 2003).

Temperament and coping styles have also been found to play a pivotal role in the co-occurrence of depression and anxiety among adolescents, such as high levels of negative affectivity and low effortful control, leading to an increase in likelihood of experiencing both conditions at once. Furthermore, adolescents using maladaptive coping strategies such as avoidance or rumination increase their risk for co-occurrence (Hankin et al. 2010).

Comorbid depression and anxiety in adolescents have significant treatment implications. According to studies, adolescents suffering from both disorders simultaneously may experience worse treatment outcomes (Birmaher et al. 2000). For this reason, when designing treatment interventions for depression and anxiety in adolescents it is crucial that comorbidity factors are taken into account in designing those interventions.

Comorbid depression and anxiety among adolescents is a widespread phenomenon with significant adverse repercussions for their mental health and well-being. Genetic, environmental, and individual influences have all been identified as potential contributors,

while its treatment ramifications also require special consideration when treating adolescents suffering from both conditions concurrently.

3.5 Covid-19

The Covid-19 pandemic was an unforgettable and life-altering period for many people. Life changed considerably with social distancing and school/university closure, working from home becoming increasingly common, and working life being altered drastically in general. News broadcasters, politicians, and medical professionals have expressed great alarm over the possible negative repercussions of this pandemic on young adults' mental health. While more studies need to be completed, many believe its impact has worsened their wellbeing. Kreski (2022) presents us with data which indicates a decline in young adults' mental health quality due to increased unhealthy practices (vaping, smoking, alcohol abuse, recreational drug use etc.). Furthermore, these statistics also point towards feelings of isolation due to the lack of social interaction, or economic hardship caused by pandemic. Harmful habits could also increase in response to stress from pandemic strain causing anxiety. Kreski (2022) concludes with:

The COVID-19 pandemic added to the already substantial depressive and anxious symptoms of young adults. This psychiatric harm warrants urgent interventions that not only support effective coping practices but provide tangible socioeconomic resources. (p.11)

As result of Covid-19, teachers must devote greater focus and care towards mental health issues among their pupils. To effectively assist their pupils, teachers require sufficient training, resources, and support; teachers should know how to recognize signs of mental illness so they can direct students towards appropriate resources; being familiar with all services (BUP/PPT and school nurse/therapists, for instance) that offer assistance can also aid this effort.

Covid-19 has had an undeniably detrimental impact on young adults' mental health, leading to both diminished access to quality mental healthcare as well as an increase in harmful habits. Pandemic isolation, lack of social interaction, stress, and economic hardship are major factors that may have contributed to hardship. Teachers play an essential role in helping their students identify and address mental health concerns, so it is vital that they receive proper training, resources, and support to accomplish this task successfully. By recognizing signs of mental

illness in students and guiding them to appropriate support systems they can reduce the impact that the pandemic has had on young people's mental wellbeing.

3.6 Mental health issues today

3.6.1 Stigma

Stigma surrounding mental health is an ongoing and pervasive problem in society, and adolescents are no exception. Mental illness stigma has significant ramifications for adolescents, including barriers to seeking help or accessing treatment options.

Studies highlighting stigma's negative effect on help-seeking and treatment outcomes among adolescents with depression is extensive, as are studies detailing its negative ramifications for help-seeking behavior and outcomes. One such study by Corrigan et al (2014) noted stigma as one of several major barriers preventing adolescents from seeking mental health treatments.

Stigma can greatly impact the care that adolescents receive, including mental healthcare providers' attitudes. A study by Coles et al (2016) suggests that adolescents have a mental health literacy that is not sufficient. Studies have illustrated the devastating consequences of stigma for adolescents' mental health, with numerous studies documenting its negative ramifications on help-seeking and treatment outcomes. Adolescents may avoid seeking help due to fear of stigmatization.

There are various strategies available to combat stigma surrounding adolescents' mental health issues. These strategies include increasing public awareness and education about mental illness, encouraging positive attitudes about these issues among the general population, as well as improving access to mental healthcare for all adolescents.

In summary, stigma surrounding mental health issues is a challenging barrier to seeking help and accessing treatment for adolescents suffering with mental health disorders. Negative attitudes held by society often results in lower treatment outcomes; minority adolescents can especially fall prey to its negative impacts. Strategies aimed at increasing public awareness and education about mental health matters while simultaneously encouraging positive attitudes about such issues while improving access to mental healthcare facilities is necessary in combatting stigma while improving results for these youth with mental illness.

3.6.2 Society

Studies have uncovered a correlation between young adults' social media use and depressive symptoms. Now, 90% of young adults and adolescents use social media, up from 12.5% in 2005 (Bettmann 2021). This drastic rise has been tied to an upsurge in mental health issues like depression and anxiety in young people; teens in particular seem particularly prone to it - causing great concern among educators who strive to provide healthy mental stimulation sources.

Research on phone use and adolescent mental health suggest that excessive phone usage can have negative repercussions for their mental wellbeing. There is an association between increased phone usage among adolescents and decreased psychological well-being; similarly, an increased association between excessive phone usage among adolescents and symptoms of anxiety or depression among this same age group (Thomé, 2018).

The impact of phone use and social interaction on adolescent mental health can be complex. Technology and social media may offer many benefits; however, excessive phone use may have adverse effects for one's mental health, leading to symptoms of anxiety and depression as well as decreased social contact leading to feelings of loneliness or social isolation that have been linked with various mental health conditions in adolescents. As part of a holistic strategy to foster good mental health in adolescents, finding a balance between phone use and social interactions is essential to promote their wellbeing. This may mean setting rules around phone use (for instance limiting screen time) while actively seeking meaningful social interactions and making meaningful relationships with others.

3.6.3 Sexual orientation

Adolescence is an integral period in a person's development when they explore and form their sexuality and sense of identity. Sexual orientation plays a vital role in an individual's identity, and discrimination based on sexual orientation has the potential to have devastating repercussions for mental health. Research has repeatedly demonstrated that sexual minority adolescents experience more mental health issues than their heterosexual peers (Fergusson, 2005).

Many factors influence the effect of sexual orientation on adolescents' mental health, with discrimination due to sexual orientation being one of the primary drivers. Sexual minority adolescents who experienced discrimination were more likely to report symptoms of

depression and anxiety compared to their counterparts who did not. Family rejection is key predictor of mental health problems like depression and anxiety (Luk, 2018).

Sexual orientation has an immense effect on adolescents' mental health. Sexual minority teens face higher levels of mental health problems compared to their heterosexual peers; discrimination due to sexual orientation plays an integral role. Family rejection also serves as a major predictor of mental health problems in sexual minority teens (Fergusson, 2005).

Preventing discrimination and increasing acceptance of sexual diversity are crucial steps towards improving mental health for sexual minority adolescents. Educators and mental health professionals play a crucial role in encouraging understanding and acceptance of sexual diversity among adolescents.

Sexual orientation has an immense effect on adolescents' mental health. Sexual minority adolescents typically suffer from more mental health issues than their heterosexual peers and discrimination based on sexual orientation is an influential contributor. Family rejection of sexual minority adolescents also predicts mental health problems; therefore, it is vital that we promote acceptance and understanding of sexual diversity to better their wellbeing.

3.6.4 Cyberbullying

With the rise of the digital age, cyberbullying has unfortunately emerged as an all-too-common form of aggression among young individuals, made possible by their high engagement with internet-based platforms and social media. This form of bullying, unlike its traditional counterpart that usually happens in person and is restricted to school premises, can happen anywhere. It infiltrates every corner of its victims' lives, at any time, creating a constant sense of vulnerability.

Research underscores the profound effects of cyberbullying on young people's mental health. Those unfortunate enough to fall prey to cyberbullying often grapple with higher levels of depression, anxiety, and stress, in contrast to their peers who have not been victimized. Furthermore, these victims frequently suffer from diminished self-esteem. An alarming correlation has been established between both traditional and cyberbullying, with an increased risk of depression and anxiety disorders (Landstedt, 2014).

However, the detrimental psychological impact of cyberbullying is not confined solely to its victims. Perpetrators also experience negative outcomes, as it has been observed that those

who engage in cyberbullying are more likely to experiment in substance abuse or partake in risky behaviors, a finding that suggests cyberbullying might be a manifestation of more deeply rooted psychological issues (Landstedt, 2014).

The harmful effects of cyberbullying on adolescents' mental health are undeniable. Not only do victims struggle with higher levels of depression, anxiety, and stress, decreased self-esteem, but perpetrators too often face issues including substance abuse and risky behaviors. Cyberbullying's position in the lives of today's adolescents calls for action from parents, teachers, and mental health professionals alike to devise effective strategies for its prevention and resolution.

3.7 LK20

In LK20¹, communication is recognized as an effective way of teaching conflict resolution and empathy. Literature can certainly be seen as a means of communication due to the stories being told and topics and themes being covered. This ability is identified in the competence aims and assessments after year 10, as the ability to "read, interpret and reflect upon English-language fiction (including young people's literature)" (Ministry of Education and Research 2019). Literature allows readers to discover and understand characters' ideas and emotions as well as gain an insight into the writer's point of view, providing a deeper understanding of themes and messages being communicated that can be applied directly to their lives.

Literature provides a powerful medium for exploring complex ideas and feelings, providing a potent form of expression. Some authors utilize symbolic language in their works to depict difficult emotions such as sorrow or hope that may be difficult to verbalize directly.

LK20 incorporates health and life skills into its core curriculum, where relevant areas include physical and mental health, lifestyle habits, sexuality/gender differences, drug abuse/consumption as well as personal economy (Ministry of Education and Research 2019).

¹LK20 is an acronym for "Læreplan - kunnskapsløftet 2020", which serves as the primary curriculum for Norway's elementary and secondary educational institutions. This framework, devised by the Norwegian Ministry of Education and Research, was implemented in the autumn of 2020, superseding the preceding curriculum. The LK20 curriculum is structured with an aim to not only equip students with the necessary knowledge and skills to become proficient adults but also to imbue them with values that foster social consciousness. It provides comprehensive coverage of a range of disciplines, such as language, mathematics, social studies, science, and arts and crafts. Moreover, it emphasizes interdisciplinary topics like health and life skills, digital competence, and sustainability (Udir, 2019).

The objective is to equip students with the skills and knowledge needed to make informed decisions regarding their health and lifestyle, while simultaneously raising awareness of social and environmental factors affecting health and wellbeing. By giving students a deeper understanding of these issues, it is expected that they will become better prepared to make positive decisions as adults. Furthermore, providing students with this knowledge could help them gain more insight into both their own mental health as well as that of others. For instance, learning to recognize signs of mental health problems in themselves or others as well as accessing mental health services that can give them more perspective into mental health issues and provide invaluable opportunities for self-improvement.

Teachers have both an ethical and legal duty to act within their classes. Since LK20 goals can be interpreted in various ways, their definition may change accordingly. Due to limited time and resources, some teachers may feel powerless to take meaningful steps within their classes or interpret these goals correctly; others may find them too generalized or complex for interpretation. Assessing mental health with students requires time and effort, yet prioritizing mental wellbeing within classroom environments could bring long-term benefits.

4.0 Representation of depression and anxiety in contemporary Young Adult Fiction

In this chapter, we'll delve into an analysis and discussion of two young adult novels: Adib Khorram's *Darius the Great is Not Okay* and Sophie Kinsella's *Finding Audrey*. Both of these books offer a genuine and candid look at mental health struggles, with each protagonist dealing with depression or anxiety. These stories follow their struggles to understand and address mental health conditions, while stressing the importance of seeking assistance as well as maintaining relationships.

Young adult literature offers young readers a way to normalize mental health issues while providing a safe space to discuss them openly and candidly. They have been selected because both titles have become highly rated in Amazon's Teen & Young Adult Fiction section. By depicting mental health issues in an accessible manner, these novels may have the potential to help reduce stigma around mental illness. These novels have had success both in regards to sales, as well as reviews. This is the reason I have chosen to evaluate the representation of mental health in these titles.

4.1 Representation of depression in Adib Khorram's *Darius the Great is Not Okay*

In this section, we will conduct an in-depth analysis of the book *Darius the Great is Not Okay*, with a focus on its key elements of depression and significant developments in the narrative. Given the importance of character relationships and the protagonist's internal dialogue, our analysis will primarily concentrate on these aspects.

By examining the relationships between characters and analyzing the protagonist's internal dialogue, this analysis aims to reveal deeper insights into the book's message and the themes explored by the author. Additionally, this approach will assist in understanding the motivations, decisions, subtext, and character arcs throughout the story.

It is worth noting that Khorram employs a style that allows for interpretation between the lines. This thesis will utilize this type of analysis, drawing inspiration from the theories discussed, to delve into the inner workings of the characters, their relationships, and the author's intentions behind the story's message. This critical analysis will aid in understanding the author's use of symbolism, character arcs, and overall themes of the story.

Given the prominence of depression in this book, this thesis will also evaluate the accuracy and applicability of its representation. Specifically, the thesis will examine whether the author portrays depression and related issues in a realistic and non-stereotypical manner.

Additionally, given the stigma surrounding mental illness, this thesis will scrutinize whether the author perpetuates any harmful stereotypes.

Darius the Great is Not Okay by Adib Khorram (2018) introduces us to the young, overweight, tea-loving, and clinically depressed Darius Kellner. Darius never feels like he belongs anywhere, as he is half Persian on his mother's side, yet feels distanced from his heritage. Darius' father, who he usually refers to as either "Übermensch" or his full name "Stephen Kellner", has a distanced relationship with his son. One of the only things they ever do together on a regular basis is watch one episode of *Star Trek* every night. Stephen, along with Darius, also struggles with depression. They are both clinically depressed and take medication daily to treat their depression. Throughout the course of the story, we are presented with numerous scenarios where Darius sheds light on both his own depression as well as the depression of his father. At the beginning of the story, there is a clear indication that Stephen and Darius have a strained relationship. This is because Stephen fails to provide Darius with the guidance and attention he needs. Rather than being open and discussing their common illness, they keep quiet. For instance, Stephen tells Darius that he should not be

afraid of his depression, but he does not explain why or how to cope with it. Stephen fails to provide Darius with the emotional support he needs. Without honest and open dialogue between them, Darius does not receive the understanding and support he requires from Stephen. This further distancing from his father lead Darius down a path of resentment and depression. This relationship is described early in the book as:

Dad and I both took medication for depression.

Aside from *Star Trek*- and not speaking Farsi – depression was pretty much the only thing we had in common. (p.28)

They proceed to take their medications, yet Darius has a sense that his father feels shame:

He was ashamed of me.

He was ashamed of us.

Übermensches aren't supposed to need medication. (p.28)

Khorram does an excellent job in describing the tension and lack of communication between Darius and his father. While the reader only sees events from Darius' perspective, there are realistic and real emotions represented throughout the book. The way Khorram presents the theme of depression, is quite lighthearted and grounded. Depression is “just” something Darius deals within his life and there is nothing specific causing it, in his mind. It is a part of him, and that is the way it is.

Reading the story from Darius' perspective, we get insight in the way he thinks about himself and others. How he reacts to being bullied, how he thinks of his father, how he treats his depression, and his own body image.

Stephen's attitude toward his son is questionable. He shames Darius for being overweight and makes little effort in comforting his son when he is being bullied. Instead, he hands Darius the salad bowl during dinner, and questions Darius about why he did not stand up for himself when he is being bullied. This constant doubt and disappointment contribute to the continuation of the tension and resentment between the two. This is something Darius questions himself, “I wondered if that's why Dad treated me the way he did. Because he could tell he was getting to me” (p.41). This occurs when Stephen picks Darius up after school, after another student had broken his backpack.

Darius lives with his Iranian mother, father, and sister in the US. Darius' grandfather in Iran becomes ill with a brain tumor, and the family decides to go visit them. Darius had never

been to Iran and has a somewhat superficial relationship with his family there, as well as the culture. He did not speak Farsi very well, and only ever saw his grandparents through videocalls. Darius does not seem to consider his Persian side as a part of his identity. He has very little experience with the culture and has given up trying to make it so. When traveling to Iran, Darius is faced with an unknown and exiting world, with a culture that Darius has only seen second hand before.

4.1.1 The power of relationships

Darius experiences various relationships throughout his story with family, friends, and enemies alike; some more significant than others. I will explore those that had the biggest impact on Darius. These relationships hold tremendous power over Darius' thoughts and actions. They can motivate him to do great deeds or lead him down wrong paths, and open his mind to different perspectives or blind him from seeing the truth. Darius' relationships are ultimately what shape his journey and destiny. Through interactions with these individuals, his mindset also shifts significantly. This in turn provides invaluable insight into himself and others he encounters along his journey. These interactions play a crucial role in developing his character over time. Darius learns something from every relationship he forms and the lessons it teaches him about ideas, values, and beliefs from outside his immediate environment.

Stephen Kellner/Übermensch/Dad

Darius' most pivotal and influential familial connection is with his father, a relationship riddled with numerous issues. Khorram instills in the reader a sense of the emotional chasm between the two when the characters are initially introduced. Despite being family and living together, a profound distance separates them. Darius seemingly harbors the belief that his father lacks affection and interest in him, instead desiring that Darius more closely resemble himself. Consequently, Darius develops an idealized image of his father, causing him distress and transforming Stephen into “Übermensch”. Stephen is portrayed as attractive, possessing luxurious hair, and driving an Audi, while Darius is characterized as overweight, predisposed to hair loss (attributed to the his mother’s lineage's baldness, referred to as the “Picard Crescent” by Darius), and without an Audi.

Significantly, Darius and Stephen share several commonalities, including an interest in *Star Trek*, partial integration into the Persian side of the family, and struggles with clinical depression. The distinctions between them are as stark as those between their respective life circumstances. While they share several elements, it is the contrasting aspects that render their comparison particularly vivid. Despite these disparities, their similarities afford them a

common ground for relating to one another, providing a source of support, and facilitating mutual understanding and acceptance.

However, the differences between them also generate tension and conflict. The contrasting nature of their lives may hinder their ability to find common ground, while their similarities could hinder their understanding and acceptance of each other's differences. Comprehending each other's divergences can be challenging when they share a similar background, as it may be difficult to acknowledge the distinct experiences and values of the other. Conversely, the differences between them can provoke tension, stemming from disparate perspectives on shared issues or divergent expectations of one another. Darius continues to have negative thoughts about his father's views of him:

I knew my dad wished I was more like him. Our problems went deeper than my hair and my weight. It was everything about me: the outfits I picked for school photos, the messiness of my bedroom, even how inaccurately I used to follow the directions on my LEGO sets. (p.132)

Stephen and Darius have a complex relationship. Stephen tries to be supportive and provide guidance to Darius in his own way, while Darius looks to Stephen for approval and validation. Darius tends to assume the worst intentions behind his father's actions. This dynamic is a result of Darius's difficulty trusting people and his need to protect himself from potential hurt and disappointment. As a result, he often sees his father's actions as controlling or manipulative, rather than understanding and supportive. For example, when Stephen gives Darius advice, Darius interprets it as an attempt to control his life, rather than an attempt to help him make better decisions. This is because Darius has been hurt in the past and is wary of trusting people. He is afraid to open up and be vulnerable to potential pain and disappointment, so he assumes the worst in order to protect himself. This is why he often interprets his father's actions as controlling or manipulative, instead of understanding and supportive.

After an altercation with Sohrab (Darius' friend in Iran), Darius becomes very sad and cries by himself. Stephen finds him curled up, and tries to talk with Darius and comfort him. Darius is under the impression that Stephen wishes him nothing well, and that he doesn't want him to cry:

Sometimes I can't help crying. Okay? Sometimes bad shit happens. Sometimes people are mean to me and I cry. Sorry for being such a target. Sorry for disappointing you. Again. (p.283)

Stephen proceeds to tell him that he is not disappointed in him. He tells Darius:

I just want to make sure you're healthy. Your illness can run away with you before you even know it. (p.283)

In this conversation between Darius and his father, we learn about several key factors that have contributed to how Darius perceives him. We learn about how Stephen truly loved his son, and how he was suicidal when Darius was a child, and how he was a “walking zombie” after being prescribed tranquilizers to keep him from ending his life. This explains many questions Darius had when growing up: Why did his father stop reading him bedtime stories? It was because Stephen was barely functioning due to his medication and had to do what was necessary to survive his depression and suicidal ideation. This sheds light on the emotional distance between Stephen and Darius, and helps Darius understand why his father was unable to be there for him the way he wanted. It also shows how strong Stephen was for being able to continue living despite his depression. This strong will and determination were an admirable trait that Darius could look up to, even if his father was not able to actively express this to him during his childhood. This allows Darius to understand the struggle his father was going through and why he may have been unable to be emotionally present. It also gives Darius an appreciation for Stephen's strength to keep living despite his depression and suicidal ideation. Stephen knows a lot about depression and how Darius may be feeling. More than Darius might have realized.

In this tender and true moment, we are presented with a heartfelt confession from Stephen:

You've always been good enough for me. I loved you from the first moment I saw your little hands on the ultrasound. And felt your little feet kicking in your mom's belly. I loved you the first time I got to hold you and look into your beautiful brown eyes and know you felt safe in my arms. (p.284)

This is everything Darius needed to hear, and everything Darius has doubted about his father. Even when Stephen tells Darius this, he still struggles to believe it. Right now, he is very uncertain and has a low opinion of himself. Darius has been living with self-doubt and negative self-talk for such a long time, and this new information is difficult for him to accept

and process. It is hard for him to believe that he is capable of being successful and his father truly believes in him, because it goes against what he has been telling himself for so long. Despite Stephen's reassurances, Darius is still hesitant to accept the idea that he can be healthy, as he has been in a cycle of self-doubt for so many years. It takes courage for Darius to believe in himself, and to move forward despite his internalized negative messages. As Stephen comforts him and reassures him that he is going to be fine, Darius is still not sure he will get over this:

"You're okay," he murmured.

"No. I'm not."

"I know". He rubbed my back up and down. "It's okay not to be okay."

(p.286)

After this pivotal moment, Darius and Stephen's relationship starts to change. They spent more time together, and as Darius states himself "It seemed we had increased our intermix ratio by a substantial factor" (p.289). There is less tension between them, and Darius enjoys spending time with his dad. The internal dialogue has changed, as Darius has gained new perspectives on his father and learned more about who he really is and what he has been through. When they get back to the US, Darius notices that things have changed for the better between them. They continue to watch *Star Trek*, and spend more time with each other in general. As the story concludes, the relationship between the two is better than ever. As a result, Darius is now grateful to have his father in his life, and they both enjoy the newfound bond they share. For instance, Darius and his father have begun to drink tea together, and Stephen actually shows interest in Darius' passion. Darius has found that spending quality time with his father has helped him to open up and express his feelings more. He now feels comfortable enough to share his passions with his father, and Stephen has become more interested in learning about what his son enjoys. The two have found a connection through their shared activities, and it has helped them to grow closer as father and son. In the last paragraph of the book, when the family is drinking tea together, the reader is presented with a powerful conclusion to the story and their growing bond:

Dad looked at me.

"Are you okay, son?"

"Yeah, Dad," I said.

I took a long, slow sip of my tea.

“I’m great.” (p.312)

At the conclusion of the narrative, Darius and his father share this intimate moment, marking an incredible transformation in their relationship over time. A shared experience such as drinking tea together is symbolic of newfound understanding and acceptance between them, while being part of such an event unifies family life while reflecting emotional growth across both characters' journeys.

Darius' response to his father's inquiry, "I'm great," highlights both his emotional growth and newfound confidence he has acquired since returning home, including in regards to their relationship. Their bond has significantly strengthened; what once seemed distant between them has become closer due to shared experiences and greater understanding.

The conclusion emphasizes the significance of open communication and vulnerability for fostering genuine connections. Through shared activities and opening up to one another, Darius and his father have managed to strengthen their bond while forging deeper familial ties.

This emotionally powerful conclusion not only offers a satisfying resolution to each character's individual and relational development, but it also serves as a powerful testament to empathy, communication, and shared experiences in overcoming personal and interpersonal challenges.

Sohrab

Sohrab lives next door to Mamou and Babou (Darius' grandparents, where the Kellner family is staying in Iran), and he becomes Darius' best friend. Besides playing soccer with Darius, he introduces him to the other Iranian boys. Sohrab and Darius connect partly because Sohrab has been bullied for being different, since he is one of the few Bahá'í at school. Darius thinks of Iranian culture in the US when he hears of Sohrab's struggles with prejudice; where every Persian is one people together, no matter if they were Bahá'ís, Muslims, Jews, Christians and Zoroastrians, and “secular humanists like Stephen Kellner” (Khorram, 2018, p.111). Darius appreciates Sohrab's ability to show compassion and be open about his life. We see Darius finally find a friend who appreciates and accepts him in his relationship with Sohrab. Sohrab, who refers to Darius as “Darioush”, becomes increasingly important to Darius, even though they experience some difficult moments. The discovery of Sohrab is indeed a massive moment in Darius' life, since he does not have many friends at home.

In addition to his ability to make people feel heard and cared for, Sohrab also has a knack for asking the right questions. This allows him to draw out the stories and feelings of people. He also has a genuine interest in hearing and understanding people's stories and feelings. These traits are combined with a kind, gentle approach which allows him to create an environment that is inviting and comfortable for others to open up and share. Darius needs such a person in his life. For instance, Sohrab can quickly build a rapport with Darius by asking him questions about his interests and hobbies, showing that he is genuinely interested in getting to know him better. These qualities allow Sohrab to form meaningful connections with Darius, which can be a great source of comfort and reassurance in times of difficulty. Sohrab is someone who can be trusted and can offer a listening ear. His compassionate nature and ability to empathize with others will allow Darius to feel supported, valued, and understood.

Sohrab's father has been imprisoned for years. In the chapter "Magnetic Contamination", Darius is faced by a sad and angry Sohrab. This is the moment when Darius learns about Sohrab's father's passing. Sohrab feared he'd never see his father again, which turned out to be true. Sohrab struggles to understand Darius' fraught relationship with his own father. It turns out that Sohrab's dad was murdered in prison. When Darius visits Sohrab this time, he is not welcomed by Sohrab, as he usually is. Sohrab is angry and wants Darius to leave. Darius proceeds to try and give Sohrab the shoes he had gotten for him, which escalates the situation. Sohrab is angry and hurt by the realization that his own father has been taken away from him. He is unable to understand why Darius would have such a complicated relationship with his own father. His grief and pain drove him to lash out at Darius, even though Darius was only trying to be kind. He questioned why Darius was crying all the time, and pointed out that he had nothing bad in his life, and that he was always complaining. This ends with Sohrab saying to Darius: "No one wants you here". This results in Sohrab slamming the door and screaming at the top of his lungs as Darius leaves. He leaves in shock and thinks to himself:

No one wants you here.

I knew it was true.

I stumbled out the back door.

No one wants you here.

I ran. (p.279)

Darius' own experiences with his father, who had been emotionally distant and uninvolved in his life, had prevented him from being able to relate to Sohrab's situation. He had no idea how it felt to have a positive relationship with his father or to fear that he'd never see him again. Learning of Sohrab's father's death, and the circumstances surrounding it, was a wakeup call for Darius. It made him think about his own father, and how he hated himself for wanting to see him less.

This chain of events continues through the next chapter, where Darius feels very low. He wishes to go back to the US and feel even more alone than ever. Darius' mind is overflowed with emotions, as he recalls how his relationship with Sohrab had been, and how he truly accepted him and was kind to him when he needed it. This is when Stephen finds Darius crying and attempt to comfort him (pivotal moment in Darius and Stephens relationship, which we discussed in the previous section). He proceeds to express his feelings for Sohrab and how he was the best friend he ever had. Darius thinks to himself in that moment:

Dad looked at me for a long moment. Like he knew there was more.

But he didn't ask.

Instead, he pushed the hair off my forehead, kissed me there, and rested his chin on top of my head again.

Maybe he knew, without me saying it out loud, that I wasn't ready to talk about more.

Maybe he did. (p.287)

There is a subtle subtext in this paragraph that might suggest to the reader that Darius and Sohrab were more than simply friends. Perhaps romantic feelings also ran deep between them. Time passes and Darius and his family must leave Iran and head back to the US. Sohrab visits Darius to say goodbye. Initially they have an awkward exchange before Sohrab suggests going outside instead. This moment gives both Darius and Sohrab a final opportunity to make peace before their journeys apart; both apologize for past disagreements as well as spending quality time together prior to saying their respective farewells. Spending time speaking aloud as well as in silence together is clearly difficult for both of them as they care deeply for one another. Sohrab proceeds to tell Darius how he envied his ability to not care about what other people think, and that he could be more like Darius. Sohrab finally gives Darius a framed picture of the two of them. Darius feels ashamed about not having anything for him, and doubts what Sohrab is telling him about himself. He mentions how he is treated back home and how he is not the person Sohrab is describing. Sohrab reassures Darius that he is by saying the following:

“They don’t know you, Darioush.” Sohrab grabbed my shoulder. “I wish you could see yourself the way I see you.”

“I wish you could see yourself too.” I swallowed. “You’re the only person who never wanted me to change.”

Sohrab blinked at me then, like he was fighting a containment breach himself.

“I’m going to miss you, Darioush.”

“I’m going to miss you, Sohrab.”

“I wish . . .”

But I didn’t find out what Sohrab wished. (p.297)

Though it was difficult, Darius and Sohrab take time to forgive each other before parting ways, creating a bond which will never be forgotten. After long embraces they part ways knowing they had left each other with new understanding and friendship between themselves.

Khorram leaves an open ending when it comes to Darius and Sohrab's relationship. Through thick and thin, they have managed to remain friends. What did Sohrab plan on saying at the end? And how do they really feel about each other? Darius and Sohrab remain at odds over many issues yet remain close enough that their dynamic is captivating. Even with all of their difficulties between them, Darius and Sohrab remain close. As the novel nears its climax, their friendship remains unclear and further intrigues the reader. One might presume Sohrab wanted to declare his affection for Darius regardless of their complicated pasts while Darius may have reciprocated this sentiment. This unspoken tension only heightens as neither character expressed their true feelings to each other, leaving readers wondering what could have been. This theme is highlighted further by their physical proximity in the novel's climax, as well as by their developing an intimate knowledge of each other throughout their individual journeys in this novel. All leading them closer together at that crucial moment; yet both still choose not to speak out, adding suspense and anticipation for readers. This beautiful and powerful friendship is concluded with the two of them embracing on the rooftop, and Darius thinking:

He held me. And I held him.

And then he sighed and pulled away.

He gave me this sad smile.
And that was it.
Maybe he didn't know how to say good-bye either.
I loved Sohrab.
I really did.
And I loved being Darioush to him.
But it was time to be Darius again. (p.298)

4.1.2 Bullying and self-image

Darius has long been subjected to bullying and teasing from other children and students, yet has become more resilient when confronted by difficulty, refusing to let the hurtful words of his peers affect him directly; but unfortunately, they still do despite Darius' best efforts at being strong. Even if he does not show it outwardly, these words can have lasting repercussions for his mental health and self-esteem. Internalizing issues due to bullying causes great discomfort on an internal level. Situations often prove too much for him to bear, and he finds himself reluctant to speak up for himself out of fear or lack of confidence and self-worth. He may feel pressure from his peers that he is not good enough, which can be extremely harrowing. Because of this, it can be difficult for him to believe in himself and see his potential, making it hard for him to speak up for himself and advocate for himself. Khorram (2018) depicts this internal response of bullying throughout its narrative. Darius finds himself facing bullies during the short time that the story is in the US. Classmates tease him for his ethnicity and call him names. This is evident in an interaction with Trent Bolger, who never called him by his real name:

Mom always said she named me after Darius the Great, but I think she and Dad were setting themselves up for disappointment, naming me after a historical figure like that. I was many things—D-Hole, D-Wad, D's Nuts—but I was definitely not great.
(p.4)

Due to Darius' internal dialogue, we gain insight into his self-perception. By watching how he talks to himself and interprets various situations, we gain knowledge into how he perceives himself, his place in the world, and interacts with others. Understanding Darius requires understanding of his self-image. His internal dialogue provides a window into how Darius

perceives himself - his strengths and weaknesses as well as how he reacts in different situations.

However, one could argue that we cannot fully grasp Darius' character from simply his internal dialogue alone; to gain a comprehensive view of him we would need to observe how he interacts with other people and their perception of him for a more complete analysis of his persona. Analyzing Darius' interactions with other people and how they perceive him could provide an insight into his motivations and values. It could also help to explain any discrepancies between the way Darius perceives himself and how others perceive him, which would further contribute to our understanding of his character.

One of the examples of this discrepancy is his relationship with Stephen, which was discussed earlier, with readers only being able to learn about their relationship through Darius' eyes. Does Stephen really dislike his son? Do they really differ that much from one another? How would Stephen view the relationship if we were to look at it from his point of view? Because of Darius' low self-image, we are presented with many negative relationships, as well as many situations that he perceives solely as negative. It's possible that Stephen's feelings toward his son are complex, and that he is struggling to reconcile the differences between them. Stephen may also be feeling guilty for not being able to provide Darius with the guidance and support he needs. As a result, Stephen may be having difficulty expressing his true feelings about his son.

In the chapter "The Ayatollah's Turban", the reader is presented with an example of how Darius' self-esteem and self-image are affected by comments made from the Iranian boys. It is a new culture for Darius, and unusual for him to shower after PE at school. Sohrab says that Darius should shower, since he was dirty, and even brought an extra towel for him. It is when Darius sees that there are no individual stalls in the shower that he thinks "Red Alert". He proceeds to go in into the showers with the Iranian boys, and nearly has a panic attack:

I thought I was having an anxiety attack.

I had never been diagnosed with an anxiety disorder, but Dr. Howell said that anxiety and depression often went hand in hand. Comorbidity, he called it.

It was an ominous-sounding word.

It made me anxious.

Sometimes my heart would pound so fast I thought I was going to die. And then I would start sobbing for no reason.

I couldn't let the guys see me do that.

That wasn't something True Persians did. (p.114)

At this already vulnerable moment, the other boys start making comments about Darius' uncircumcised penis. Ali-Reza, one of the Iranian boys, laughed at Darius and commented that "It looks like the Ayatollah's turban" (p.115). This remark is particularly hurtful because it not only points out the physical difference between them, but also implies that Darius is not as culturally connected to Iran as the other boys are. This remark is particularly powerful because it reinforces the idea that Darius is an outsider and that his physical difference from the other boys is a sign that he does not truly belong. It also implies that he is not as connected to the culture and traditions of Iran as the other boys, which can be a difficult thing for someone who is already feeling vulnerable. This is because Darius is not only being ostracized because of his physical differences, but also because of his lack of connection to the culture and traditions that the other boys know so well. This emphasizes the feeling of being an outsider and further highlights the fact that Darius does not feel like he fits in with the other boys.

During the terrible situation that is taking place, Sohrab said to all three Iranian boys, "Ayatollah Darioush" and all of them laughed. This is hard for Darius. The one person Darius had connected with so far, and the one he person trusted, had betrayed him. Darius did not find humor in this situation and felt attacked and vulnerable. It was then in this moment that Darius began to have thoughts about wanting to die or at the very least "... slip into a black hole and never come out" (p.116). This sudden change in dynamics forced Darius to confront the reality of the situation. The laughter of Sohrab reminded him that he was alone in this situation, and that he had no one to rely on. This realization left him feeling helpless and overwhelmed, and triggered thoughts of wanting to give up and escape the world. His sudden sense of helplessness and despair cemented his desire to leave, prompting him to wipe away his tears and exit quickly.

Darius has begun contemplating suicide as an alternative way out of his situation, feeling as if there is no other option available to him for dealing with his feelings and self-esteem. Darius may feel helpless and overwhelmed; to cope with his current state he needs new perspectives and ways of coping.

As a result of this incident, Darius becomes very distressed, beginning to cry and staying in bed for extended periods. His emotions overwhelm him, rendering him incapable of dealing

with anything; as such he cannot find energy to do anything other than crying in bed while trying to process his emotions. While in bed, he proceeds to think about what had happened:

I didn't actually sleep. I couldn't. Sohrab's laughter kept dancing around in my skull.
And the way he had said "Ayatollah Darioush". (p.120-121)

Darius' sorrow is so potent that it renders him powerless to act or make decisions, leading him to an impasse. Darius feels disconnected from himself and powerless to act meaningfully, as though trapped in an endless state of paralysis with no way out. Darius can't find an exit out of the darkness that overtakes him.

4.1.3 Depression

As we discussed earlier in this analysis of *Darius the Great is Not Okay*, the main character is suffering from depression. This is blatantly and honestly presented to the reader throughout the story. This book portrays depressive disorders in a way that allows the reader to be a part of the struggle and healing. Khorram writes this experience from the perspective of Darius, and Darius is not one to be too dramatic about his own depression. He has a very grounded and relaxed relationship to his diagnosis, where he has internal dialogue that can express how he deals with it, without there being any explicit or "over-the-top" descriptions of depression. As we read the first couple of chapters, Darius proceeds to casually mention his (and his father's) depression. In order to understand Darius' depression in a deeper manner, we must distinguish between the casual mentions of his depression and the occasions when he truly reflects on his own emotions.

As mentioned earlier, Darius is medicated for his depression. This is something that recurs throughout the story and has become a daily routine. Darius tells the reader about a time when he was taking antidepressant medication (Prozac) that caused extreme mood swings. For example, Darius recalls one particular day when he was in a pleasant mood and then suddenly found himself feeling very angry and wanting to break things. Khorram (2018) writes Darius' internal dialogues in a way that uses jargon and is quite theatrical. Darius' inner experience of his mood swings is described in a way that makes them seem almost real and tangible. This allows the reader to understand the severity of his condition and the effects medication has on him. It also gives insight into the power mental illness can have on a person's life. However, some readers may find this approach to be confusing or overwhelming. Additionally, because the author is using Darius' thoughts to provide information about his condition, readers who

are not familiar with mental illness may not be able to follow along. These internal dialogues are written in a way where Darius uses “his own language” and is quite theatrical in his descriptions:

... Dr. Howell switched me off Prozac, which gave me mood swings so extreme, they were more like Mood Slingshot Maneuvers, powerful enough to fling me around the sun and accelerate me into a time warp.

I was only on Prozac for three months before Dr. Howell switched me, but it was pretty much the worst three months in the Search for the Right Medication. (p.33)

This is after one of the first instances where Darius reflects over his depression and the medication. As he states himself, he experiences severe mood swings, and problems with his temper. This imbalance in medication is something that also results in a situation where Darius expresses real hate and lashes out on a boy that is bullying him. Darius justifies this incident since he was defending his mother. This version of Darius is different from the one we are used to in the story since he is for the most part a calm and collected person outwards. Yet, he often is torn and conflicted on the inside when he is faced with difficult situations.

The fact that Darius tends to avoid the social interactions he faces is somewhat aligned with the characteristics of depression. The internalization of issues that bothers him and the feeling of being misunderstood is also characteristics of depression (as discussed in section 3.2).

Darius is, at the beginning of *Darius the Great is Not Okay*, borderline anti-social and very sensitive to criticism. He is mostly introverted as he has few real relationships, has few friends, and does not truly communicate with his family. In situations where he is social, there is often some doubt or suspicion of ulterior motifs. This is evident throughout the story, yet there is an underlying longing for companionship and real relationships.

Darius and Stephen's relationship is also very intriguing, particularly their interactions regarding depression. Stephen's history with suicide enlightens his character further and gives insight into why Darius may perceive him as emotionally distant. Darius and Stephen's past disputes, mental health conditions, and effects of depression on their relationship all combine to form an intriguing character study. Through the story, it becomes apparent that Stephen and Darius' mental health struggles have caused tension between them. Their shared history of depression makes it hard for them to process and understand their emotions, leading to many miscommunications between them and resulting in many misperceptions that ultimately creates a rich and multilayered exploration of their relationship.

As Darius discovers more of Stephen's past and how he was tranquilized to prevent him from ending his own life, their bond deepens and strengthens. Stephen and Darius become more understanding of each other's struggles, open to communication and supportive of one another, creating a stronger foundation for their relationship. Stephen comes to realize that Darius has also experienced similar trials himself and can relate to some of his experiences. Stephen has long been concerned and fearful about Darius' health condition and fears that he could pose a danger to himself. Because of this fear, Stephen has always been harsh towards Darius and expected more from him. Stephen also harbors deep resentment over having given Darius his genetic disposition and struggles with depression, as he knows all too well what this entails. Darius gradually comes to appreciate Stephen's pain and suffering, which allows both of them to open up more freely with one another and be vulnerable with each other. Their mutual understanding leads them toward creating an even deeper bond.

At the conclusion of the story, one can assume he has found more support through his relationship with his father which will allow him to better cope and manage his depression going forward. It is evident that Darius has made significant strides on his journey toward recovery and healing.

4.1.4 Validity

How can we be certain that all the descriptions and statements in the book about depression and mental health illnesses are accurate? When reading any book, but particularly one dealing with personal, sensitive topics such as this one, it is crucial to assess author credibility carefully. Khorram writes from personal experience of depression, lending credibility to his story. Additionally, the author consulted medical professionals and experts in depression research in order to present accurate and up-to-date information that gives readers confidence that he has done their research accurately depicting mental illness such as depression. Finally, Khorram describes in the afterwords how his own battle against depression took place.

Khorram shares that at twelve years old he was diagnosed with major depressive disorder and worked closely with a psychiatrist for four years to manage his symptoms. He describes how depression can manifest differently for different people, such as comfort eating, skipping school classes or failing to complete homework assignments. The author also addresses the difficulties of living with depression, such as feeling misunderstood by loved ones and turning away from relationships, while depending on medication to survive. Witnessing someone

else's depression may also be challenging as individuals may feel helpless to assist. However, Khorram concludes by emphasizing that depression does not need to dominate one's life; with patience, kindness, and forgiveness as keys for managing its symptoms (Khorram, 2018. p.314). Furthermore, his personal account offers insight into living with depression as well as understanding its effects and providing proper support.

Darius the Great is Not Okay is an honest portrayal of a teenager's struggles with Major Depressive Disorder, providing it with credibility as a tale. Many symptoms and traits portrayed within its pages align with theories discussed earlier; it can thus be assumed that this book portrays depression accurately. The author's detailed accounts of their journey through MDD make it easier for readers to comprehend and empathize with his story. Emotions and mental states portrayed are reflective of what is understood about the disorder, providing readers with an honest depiction. Note, however, that not everyone with MDD will experience or respond similarly to treatment; thus, a book such as this one should not necessarily be taken as representative of all depression. As MDD is a complex illness with various symptoms, it's important to keep in mind that not everyone will experience identical signs and respond similarly to treatment. Reading this book may provide insight into one person's experience with MDD and gain valuable knowledge for adolescents, including how to recognize its signs, respond appropriately when someone struggles, and access appropriate resources either themselves or for someone close.

4.1.5 Can adolescents identify?

Darius the Great is Not Okay is an accessible book for adolescents, and many young readers may identify with Darius and his experiences; as its topic addresses issues relevant to them such as bullying, fitting in, relationships and self-discovery. Darius struggles accurately reflect some of the unique difficulties adolescents may encounter. Though initially feeling isolated he eventually learns how to cope and accept himself and take pride in who he is as an individual.

Subtly integrated within this story is an exploration of the protagonist's sexual orientation. His journey of self-discovery involves learning more about himself, which includes exploring his sexuality. This exploration is hinted at through passive interactions and moments throughout the narrative and provides teens an opportunity to consider exploring it without feeling pressured; particularly beneficial when discussing sexuality openly.

Darius' struggles reflect those experienced by many young people today and serve as an excellent illustration of mental health issues such as depression and major depressive disorder, while still remaining age appropriate. This book addresses them all while remaining accessible for teenagers of any age. This story introduces mental health issues in an accessible and relatable fashion. Plot and character development lead to an open ending where Darius discovers ways to manage his struggles while finding fresh perspectives in relationships, life, and identity. He perseveres despite various trials he encounters along his journey proving there's hope even during life's most trying moments.

4.2 Representation of anxiety in Sophie Kinsella's *Finding Audrey*

Sophie Kinsella's novel *Finding Audrey* is an insightful YA fiction book about mental health issues experienced by a teenage girl named Audrey who suffers from anxiety and depression as the result of experiencing a traumatic incident at school. This analysis explores Kinsella's portrayal of mental illness in *Finding Audrey* and its impact on its characters and themes. Through a close reading of Kinsella's text, this analysis will assess how she presents mental illness within Audrey and her family as well as how the novel challenges stigmatizing attitudes regarding mental health. This analysis will also analyze how writing style, humor, and lightheartedness play into *Finding Audrey*, contributing to its overall message about mental health. Ultimately, this analysis seeks to shed light on Kinsella's portrayal of mental illness within young adult literature and how its representation could potentially have an impact on readers.

Audrey, a teenager deeply affected by a traumatic incident at school, struggles with severe anxiety and comorbid depression following this event, making it hard for her to leave the house or interact with others. Kinsella captures Audrey's struggles with mental illness with raw honesty and authenticity in this novel as she navigates recovery challenges; readers become involved as Audrey navigates her world with its ups and downs; yet still remains an engaging character with an insightful point of view on life despite any difficulties that she might be encountering; through Audrey's journey Kinsella provides powerful explorations into mental health, relationships and the importance of seeking assistance when necessary. This is something readers may relate to as she makes clear in this novel. Audrey's struggles are depicted early in the novel as she experiences a panic attack when meeting Linus:

My chest is starting to rise in panic. Tears have already started to my eyes. My throat feels frozen. I need to escape. I need – I can't –

No-one comes in here. *No-one is allowed to come in here.* (p.21)

Audrey embodies the complex realities of mental illness through her experiences, giving readers insight into anxiety and depression and their effects on daily life. Audrey's struggles with anxiety are depicted with great nuance and depth, showing both physical and emotional toll it takes on her; panic attacks, racing thoughts, and overwhelming worry all making life challenging for her. Audrey is more than defined by her mental illness, as readers are drawn to her unique voice and intelligence. Through the relationships with her family and friends, we witness all sides of Audrey's personality, from vulnerability to strength.

One of the novel's key themes is seeking help and support in times of need. Audrey's journey towards recovery may not have been smooth sailing, but with help from Dr. Sarah and family support she eventually finds progress in managing her anxiety. Kinsella effectively portrays mental health awareness and professional help as integral aspects of everyday life that should not be neglected.

4.2.1 Family

Kinsella explores Audrey's complex dynamics within her family while dealing with her mental illness, showing the struggle between family members in providing the care that Audrey requires and understanding and supporting them for her in ways they understand. Kinsella uses this dynamic as a vehicle for exploring living with mental illness within familial context.

One of the most striking elements of Audrey's relationship with her family is how much her anxiety impacts their interactions. At an early point in the novel, Audrey's mother attempts to encourage her daughter to leave the house and socialize. This exchange shows both Audrey's tension with her mother as well as the difficulty associated with mental illness: Audrey can't just push through her anxiety on her own; thus her mother's insistence only serves to heighten it and make her more overwhelmed.

Audrey's relationship with her brother Frank, however, is also fraught. Though Frank clearly loves and wants to support his sister, he struggles to understand her anxiety and often makes misguided attempts at "fixing" it; for instance, suggesting online gaming as a distraction

technique. Audrey did not wish for this solution, and this illustrates the difficulty in communicating between siblings who experience different mental health. Frank truly wants to help Audrey, but his suggestions do not always prove helpful, leaving Audrey feeling frustrated and misunderstood.

Kinsella highlights the significance of family support when managing mental illness, while showing just how difficult it can be for loved ones to navigate its complexities. Audrey finds relief and strength from both her mother and brother, who both gradually come to understand what Audrey needs as the novel progresses, creating a safe space where Audrey can begin recovering.

Kinsella skillfully portrays the Turner family dynamics as they struggle with Audrey's mental illness. While her loved ones clearly love and care for her, they struggle to understand and assist in ways she needs, creating tension among family members which Kinsella utilizes as a central theme throughout his novel in exploring what it's like living with mental illness in a familial context. One of the central themes in the novel is how mental illness impacts not just an individual, but their entire family as a unit. Audrey's family all feel its effects - her parents and brother included. Audrey's mother tends to push Audrey out of her anxiety quickly by being pushy or demanding; on the other hand, Audrey's father struggles more to understand Audrey and connect with her needs.

As the novel unfolds, however, Audrey's family members begin to understand her struggles and the best ways they can help. Audrey's mother learns patience and understanding, acknowledging that Audrey's anxiety cannot simply be "snapped out of." Her brother Frank becomes more in tune with Audrey's needs as he recognizes that rather than providing solutions, he must instead provide an attentive ear, offering support as opposed to judgment if necessary.

4.2.2 Anxiety

In *Finding Audrey*, anxiety is explored in a nuanced manner, depicting its many manifestations in everyday life. Audrey experiences physical and emotional symptoms such as panic attacks, racing thoughts, and overwhelming feelings, all consistent with clinical definitions of anxiety, as discussed in 3.3, that include excessive worry that is difficult to control, along with physical manifestations like sweating, trembling, and heart palpitations.

Kinsella's portrayal of anxiety is particularly noteworthy due to its focus on its impact on daily life. Audrey experiences her anxiety as it interferes with everyday tasks like leaving home or engaging with others; this depiction aligns with research into anxiety which has demonstrated that this condition can significantly lower quality of life, social functioning and academic or occupational performance.

Kinsella's portrayal of anxiety is notable for its emphasis on seeking help and support. Through Audrey's interactions with Dr. Sarah, readers gain an understanding of the value of developing coping strategies and reframing negative thought patterns. This theme aligns with evidence-based treatments for anxiety which typically include medication combined with psychotherapy.

Therapy

The reader follows Audrey as she works with Dr. Sarah to manage her anxiety disorder and depression. This section will delve into the therapeutic approaches taken with Dr. Sarah. We'll also take note of how *Finding Audrey* depicts therapy as well as its representation of mental health treatment in general.

One of the most notable aspects of Audrey's therapy with Dr. Sarah is its emphasis on cognitive-behavioral techniques. Throughout the novel, Audrey learns strategies for challenging her negative thoughts and replacing them with more realistic and positive ones; for instance, Dr. Sarah encourages Audrey to reframe her perceptions about social situations so that they become opportunities for growth rather than sources of anxiety. Dr. Sarah also suggests that Audrey should use positive visualization as a tool, which is evident in the novel:

As I go to bet that night I'm thinking about Linus, I'm trying to picture myself greeting him at the front door when he comes round next. Like other people do.

Normal people. I mean, I know how the script should go:

“Hey, Linus.”

“Hey, Audrey.”

“How's it been going?”

“Yeah, good.”

Maybe a high five. Maybe a hug. Definitely a pair of smiles.

I can think of about sixty-five reasons why this is not going to happen anytime soon.

But it might, mightn't it? It *might*?

Dr. Sarah says positive visualization is an incredibly effective weapon in our armory and I should create in my mind scenarios of success that are realistic and encouraging. (p.109)

Dr. Sarah emphasizes that when you avoid something because it causes anxiety, you're reinforcing the idea that it could be hazardous. But she adds: "The more you engage with the outside world, the more you'll be able to turn down the volume on those worries" (p.85). This passage relates to how Audrey should stop worrying about what other people think about her, and that most people have the "attention span of a gnat" (p.85).

This approach is in line with the cognitive-behavioral model of therapy, which emphasizes the role of negative thinking patterns in the development and maintenance of anxiety. By teaching Audrey to challenge these thoughts, Dr. Sarah hopes to reframe her perceptions and develop more adaptive coping strategies.

Audrey's therapy with Dr. Sarah involves the use of exposure techniques. Throughout the novel, Audrey is gradually exposed to situations that trigger her anxiety, such as leaving home or speaking in front of others. By approaching these scenarios gradually and receiving support, Audrey learns how to manage and conquer these fears. In addition to these specific techniques, Audrey's therapy with Dr. Sarah also emphasizes the significance of self-care and self-compassion. Dr. Sarah encourages Audrey to prioritize her own needs and reminds her that recovery from anxiety requires time and effort.

Overall, *Finding Audrey* offers an insightful and nuanced depiction of mental health treatment. Through the use of different techniques used by Dr. Sarah, Kinsella gives readers a glimpse into the therapeutic process and how it can assist individuals manage anxiety or depression.

The many faces of Mental Illness

Kinsella's *Finding Audrey* offers us an insightful look into mental illness. The novel provides a multidimensional depiction that highlights its complexity and diverse manifestations. To better comprehend its depictions in *Finding Audrey*, we will rely upon academic research as well as medical terminology (from section 3.3) in order to examine more fully its depictions.

Audrey encounters acute symptoms of anxiety (Acute Stress Disorder (ASD)) and depression after experiencing a traumatic event at school. Audrey experiences feelings of overwhelm,

panic attacks and social avoidance, while her depression manifests itself through hopelessness and apathy. These symptoms of anxiety and depression fit the clinical definitions.

As the novel progresses, Audrey begins receiving treatment for her mental health issues and her symptoms begin to improve. With help from Dr. Sarah's therapy sessions, as we have discussed, Audrey learns coping strategies and gains greater insight into her condition so she can effectively manage anxiety and depression. At this point in recovery, there is emphasis placed upon self-care and self-compassion alongside evidence-based treatments like cognitive-behavioral therapy.

Kinsella captures the various stages of mental illness through Audrey, emphasizing its complexity. The novel emphasizes seeking help when facing these problems as well as developing effective coping strategies and self-care practices to manage them more effectively. Furthermore, by following Audrey through different stages of character development throughout this novel Kinsella contributes to a larger dialogue about mental health challenges and rewards experienced by those living with the condition.

Finding Audrey uses its subtext as an essential way of depicting mental illness with nuanced portrayal and its possible effects on relationships and social dynamics. Through Audrey's interactions with her family and friends, Kinsella explores its depths - exploring both its impact on interpersonal relations as well as potential effects of mental illness on social dynamics.

Subtext in this novel focuses on Audrey's anxiety-driven struggle to communicate effectively with others. Audrey frequently fails to express her needs and feelings to those closest to her, often retreating into silence or avoiding social interactions entirely. This subtext highlights just how difficult it can be to openly discuss mental health. Audrey's interactions with family members show how mental illness can influence family dynamics. For instance, Audrey's mother initially appears pushy and demanding of Audrey to overcome her anxiety. This subtext highlights tensions that may arise among loved ones when dealing with mental health issues as they attempt to understand each other better and offer support.

Subtext of the novel centers around Audrey's anxiety, which impacts her perceptions of social situations. Audrey experiences intense fear when introduced to new people and avoids them whenever possible; this subtext highlights how mental health disorders can negatively impact social functioning as well as lead to isolation or withdrawal from others.

Kinsella's subtextual exploration in *Finding Audrey* offers readers with an insightful understanding of mental health, its effects, and how communication, empathy, and support can play an essential role when faced with challenges related to mental illness. The novel delved into its intricacies while underscoring how essential they are in overcoming such difficulties.

4.2.3 Can adolescents identify?

Kinsella's portrayal of Audrey's anxiety disorders is realistic in its representation, from symptoms and experiences associated with them through internal struggles, thought processes, and coping mechanisms that may resonate with readers who may also have experienced anxiety themselves. Audrey is presented as an engaging protagonist, complete with unique voice, interests and relationships. Additionally, details regarding Audrey's family life, friendships and romantic interests help readers empathize with her on multiple levels.

Kinsella employs a first-person narrative style which gives readers insight into Audrey's feelings, helping them empathize with her struggles while remaining relatable for younger readers facing similar struggles in their own lives. Furthermore, her use of humor and lighthearted moments add an entertaining edge that may resonate with adolescents facing similar difficulties in their own lives. Audrey's realistic depiction of anxiety coupled with its relatable character and straightforward narrative style may cause adolescents to identify with Audrey and her experiences, yet other individual factors like personal experiences, cultural context and psychological traits could affect how closely readers identify with Audrey.

Finding Audrey provides an authentic yet relatable depiction of anxiety for adolescent readers, with relatable characters and captivating narrative style that are likely to resonate. By understanding how adolescent readers identify with characters in young adult literature as well as their experiences, teachers, mental health professionals, and authors can develop materials designed specifically to aid adolescents on their mental health journeys.

4.3 Comparison and discussion

4.3.1 Themes and Motifs

Mental Health

Mental health plays a prominent role in both *Finding Audrey* and *Darius the Great is Not Okay*. Both novels explore mental health's impact on individuals, their families, as well as the stigma and difficulties that accompany it. Where *Finding Audrey* primarily addresses anxiety and depression issues, *Darius* goes deeper into clinical depression to demonstrate its impact on its protagonist's life.

In *Finding Audrey*, Audrey's experiences with anxiety and depression are depicted realistically, emphasizing the difficulties associated with living with mental illness. Additionally, the novel emphasizes the significance of seeking professional help for mental health problems as well as family support during recovery. Through Audrey's story, the novel highlights both mental health stigma and its associated difficulties.

Darius the Great is Not Okay chronicles Darius' struggle with clinical depression and a sense of disconnection from his family and Iranian heritage. The novel delves into Darius' relationships as well as his experiences with bullying and discrimination. Similar to *Finding Audrey*, this novel emphasizes the significance of seeking professional help for mental health issues and having family support during recovery.

Identity

Identity plays an integral role in both novels, with both protagonists striving to find their place in the world. In *Finding Audrey*, Audrey's experiences with anxiety and depression have caused her to withdraw from society and avoid social situations - leading her to clashes with family members and friends. Part of Audrey's journey towards recovery involves finding her place within society while confronting her fears head-on.

In *Darius the Great is Not Okay* identity issues arise on several occasions. He has a lacking sense of cultural connection with his Iranian heritage. This is evident throughout their entire stay in Iran, where he never really fits in. He also struggles with his identity in regard to his sexual orientation. It is highly implied that Darius may have romantic feelings towards his friend Sohrab, yet it is not confirmed in the text. This leaves the reader wondering how he is feeling in regard to this subtext, and how Darius struggles with the potential challenges of exploring one's sexual orientation.

Family Relationships

In both novels, the relationship between the protagonist and their family plays a crucial role. In *Finding Audrey*, Audrey's family initially dismisses her mental health struggles and fails to provide necessary support. But over time in the novel, her family members' empathy and understanding grow, ultimately leading them to provide what she needs.

Darius the Great is Not Okay examines Darius' troubled relationship with his father, which further compounds Darius' struggle with depression. Yet at the same time, the novel also emphasizes the value of familial support systems.

Both novels emphasize the significance of strong family ties and support during times of hardship. They demonstrate that while family dynamics can be complicated and testing, they also serve as a source of comfort and strength during trying times. Furthermore, both novels stress how communication, empathy, and understanding are essential ingredients in creating lasting familial connections.

Additionally, both novels examine the impact of mental health issues on friendships and social connections. *Finding Audrey* emphasizes the difficulties anxiety and depression can pose to friendships, emphasizing the necessity for open and honest communication in order to repair those connections. *Darius the Great is Not Okay* similarly focuses on depression's impact on social life - particularly its difficulty maintaining connections when faced with mental health challenges.

4.3.2 Representation of Mental Health

Both novels offer realistic and sensitive depictions of mental health issues. *Finding Audrey* captures the devastating effects anxiety and depression have on individuals and their relationships, as well as the stigma and difficulties associated with these conditions. Furthermore, it emphasizes the significance of seeking professional help and having family support throughout recovery.

Darius the Great is Not Okay explores the effects of clinical depression on individuals and their relationships, as well as the difficulties experienced when living with mental illness. It emphasizes the significance of seeking professional help and family support during recovery, along with cultural identity and connection as important aspects in healing processes. Ultimately, both novels offer hope and optimism by showing that recovery and healing can happen given appropriate support and resources; additionally, they stress self-care and acceptance to help combat mental health struggles.

Khorrām and Kinsella both feature protagonists dealing with comorbid depression and social anxiety disorder. The novels illustrate the intricacy of mental health as these characters struggle to manage their respective disorders in tandem. *Darius the Great is Not Okay* explores Darius' depression and social anxiety as genetic predisposition combined with family dynamics; on the other hand, *Finding Audrey* highlights Audrey's mental health difficulties due to a traumatic event.

Both novels examine the effects of mental health issues on family dynamics and relationships. *Finding Audrey* emphasizes the strain these issues can put on relationships, as well as emphasizing communication and understanding to repair those bonds. *Darius the Great is Not Okay* also examines this connection between his father and protagonist, emphasizing the need for empathy and acceptance to foster stronger familial ties.

Overall, the two novels offer important insights into the lives of individuals suffering from mental health issues and stress the importance of seeking help and support. They convey messages of hope and optimism while also cultivating greater understanding and empathy towards those living with mental illness.

4.3.3 Writing Style and Narrative Techniques

Both novels employ first-person narration to immerse readers in the protagonist's experiences and emotions. However, the novels differ in their use of narrative techniques and writing style.

Finding Audrey is written in short diary-style entries that capture Audrey's thoughts and emotions. Readers gain intimate and personal access to Audrey's struggles with anxiety and depression through these insightful entries, underscoring the private yet often isolating nature of mental health struggles.

Darius the Great is Not Okay takes a more traditional narrative approach, with longer chapters and an organized plot. Additionally, it includes cultural references and descriptions of Iranian culture which add depth and nuance to the story. Furthermore, its use of Persian words and phrases highlights how important cultural identity and connection are throughout this novel.

Darius the Great is Not Okay uses vivid descriptions and sensory language to transport readers to Iran's setting, emphasizing both its differences and similarities with American

culture. In comparison, *Finding Audrey* takes readers into a more familiar modern-day London setting.

Furthermore, both novels employ distinct literary devices to convey their themes and messages. *Finding Audrey* utilizes repetition to emphasize the cycle of anxiety that follows Audrey as she embarks on her recovery journey, while *Darius the Great is Not Okay* draws upon symbolism such as a tea ceremony to explore concepts such as connection, acceptance, and finding one's place in the world.

The diverging narrative techniques and writing style between *Finding Audrey* and *Darius the Great is Not Okay* reveal their protagonists' distinct perspectives and experiences. Diary entries in *Finding Audrey* create a sense of intimacy that mirrors Audrey's struggles with mental health, while *Darius the Great is Not Okay* employs more traditional narrative strategies to explore cultural identity and connection more broadly.

4.3.4 Comparison and Contrast

Both novels address mental health issues and the struggle to find one's place in the world, yet they take different approaches and focus. *Finding Audrey* focuses mainly on anxiety and depression while *Darius the Great is Not Okay* delves deeper into clinical depression as well as biracial identity issues and sexual orientation.

Both novels provide realistic and sensitive depictions of mental health issues, stressing the importance of seeking professional help and family support in recovery. *Finding Audrey's* diary entries and intimate writing style emphasize the private and isolating nature of mental health struggles while *Darius the Great is Not Okay's* cultural references and Persian words emphasize cultural identity and connection as essential factors in recovery.

Finding Audrey and *Darius the Great is Not Okay* are two young adult novels that tackle mental health issues and the difficulties of finding one's place in the world. While their approach and focus differ, both offer realistic yet sensitive depictions of mental illness that stress the importance of seeking professional help and family support during recovery. Furthermore, both books emphasize cultural identity and connection as important aspects in achieving healing.

5.0 Implications for the EFL classroom

This chapter seeks to investigate the potential benefits of incorporating young adult literature about mental health into Norwegian EFL classrooms. We specifically analyzed Adib Khorram's *Darius the Great is Not Okay* and Sophie Kinsella's *Finding Audrey* for their depictions of depression and anxiety, respectively, along with their implications for Norwegian EFL educators.

Mental health issues among adolescents have become increasingly widespread, necessitating educational institutions to find effective solutions. Young adult literature that addresses mental health problems can provide students with an engaging and informative platform for discussion and understanding these issues. *Darius the Great is Not Okay* (Khorram, 2018) and *Finding Audrey* (Kinsella, 2016) are two such novels renowned for their authentic portrayals of depression and anxiety respectively.

In addition to discussing the potential uses of these novels in EFL classrooms, I will also provide an examination of possible didactic strategies that can be employed to efficiently and effectively teach these titles. Our mission is to foster an inviting and supportive learning atmosphere that encourages critical thinking, improves language proficiency, and fosters empathy and comprehension of mental health issues. This exploration will include a variety of teaching methods and activities drawn from both theoretical and empirical research to ensure their relevance and effectiveness in the teaching-learning process. By considering various didactic strategies, educators can craft tailored lesson plans to maximize these novels' educational value while meeting students' individual needs in EFL classes.

5.1 Benefits of Using Young Adult Literature about Mental Health

5.1.1 Relatability and Empathy

The realistic portrayal of characters experiencing mental health issues in young adult literature can help students relate to and empathize with the characters' struggles. Reading about Darius and Audrey's experiences with depression and anxiety, respectively, can create a safe space for students to share their own experiences and feelings, fostering a supportive and understanding classroom environment.

By encouraging students to engage with the texts critically, educators can help them develop critical thinking skills, which are vital for their academic and personal growth (Dewey, 1933).

Through discussions, students can explore various themes, such as cultural identity in *Darius the Great is Not Okay* (Khorram, 2018) and family dynamics in *Finding Audrey* (Kinsella, 2015), while analyzing the depiction of mental health issues in each text.

As EFL students, Norwegian learners can benefit from studying literature in English, as it exposes them to new vocabulary, idiomatic expressions, and sentence structures. Engaging with texts like *Darius the Great is Not Okay* and *Finding Audrey* allows students to enhance their reading, writing, speaking, and listening skills while simultaneously addressing mental health topics.

Incorporating young adult literature addressing mental health issues in the Norwegian EFL classroom can provide numerous benefits, including fostering empathy, enhancing language skills, and promoting critical thinking. However, educators must be sensitive to the cultural context and potential challenges faced by their students. For example, teachers can use these texts as a springboard for discussing mental health stigmas and cultural differences between Norway and the countries where the novels are set (United States/Iran and United Kingdom, respectively). Moreover, it is essential to ensure that the chosen texts are age-appropriate and carefully scaffold the discussions, providing necessary support for students as they navigate these sensitive topics.

The use of young adult literature about mental health, such as *Darius the Great is Not Okay* and *Finding Audrey*, can be an effective tool in sparking a discussion about mental health problems in the Norwegian EFL classroom. Through these texts, students can develop empathy, critical thinking skills, and language proficiency while fostering a safe and supportive environment for discussing mental health issues. By carefully selecting and implementing such literature, educators can play a crucial role in addressing the growing concern of mental health issues among young adults.

5.2 Potential Didactic Strategies for Teaching *Darius the Great is Not Okay* and *Finding Audrey*

Incorporating young adult literature that addresses mental health issues, such as *Darius the Great is Not Okay* and *Finding Audrey*, can provide significant benefits in the Norwegian EFL classroom. These novels can help foster empathy, promote critical thinking, and improve language proficiency while creating a safe and supportive environment for discussing mental health topics. However, to maximize the educational impact of these texts, teachers must

employ effective didactic strategies tailored to the subject matter and the unique needs of their students. This section will explore a range of didactic strategies that can be employed in the EFL classroom to facilitate meaningful engagement with these novels and promote a deeper understanding of mental health issues.

5.2.1 Didactic Strategies

1. Pre-Reading Activities

To help students become better prepared for engaging with the texts, teachers can introduce themes and background information related to each novel. For instance, students could research and discuss Iran's cultural context for *Darius the Great is Not Okay* or the United Kingdom's for *Finding Audrey*. Furthermore, pre-reading activities might include exploring mental health issues like depression or anxiety as well as sharing students' prior knowledge and experiences.

2. Reading Journals

Encourage students to keep a reading journal where they can reflect on their thoughts, feelings, and questions as they read novels. This provides students with an outlet for personal engagement with texts and sparks classroom discussions about them.

3. Vocabulary Development

Teachers can identify key vocabulary words and phrases related to texts' themes or mental health issues. Students can practice using these terms in context, create flashcards, or take part in vocabulary games to deepen their understanding.

4. Guided Discussions

Hold guided discussions in which students can explore the themes, characters, and portrayals of mental health issues. Teachers may provide discussion prompts and questions to encourage students to think critically about the novels and share their perspectives; these can take place in small groups, pairs or as a whole class discussion.

5. Creative Writing Activities

Encourage students to engage with the texts through creative writing activities, such as creating diary entries from a character's point of view, crafting letters between characters, or

creating alternative endings for stories. Doing this can help students gain a deeper understanding of both the characters and their struggles with mental health issues.

6. Role-Playing Exercises

Role playing exercises offer students the chance to empathize with characters and gain new perspectives. They can act out scenes from novels or create scenarios related to depression and anxiety.

7. Visual Representations

Encourage students to create visual representations of their understanding of the texts, such as mind maps, storyboards or illustrations. Doing this can help students consolidate their knowledge about the novels and provide a starting point for further discussions.

8. Connecting Literature to Real-Life Experiences

Encourage students to draw connections between the themes and experiences of characters in literature and their own lives or current events. Doing so can give students a deeper comprehension of mental health issues as well as foster empathy for those who suffer from them.

9. Post-Reading Reflection and Evaluation

After finishing the novels, students can reflect on their understanding of the texts and how it has affected their perspective regarding mental health issues. Teachers can facilitate discussions regarding how the novels have changed students' views on depression and anxiety.

5.3 Discussion

This chapter has examined the potential advantages of using young adult literature about mental health, such as depression in Adib Khorram's *Darius the Great is Not Okay* and anxiety in Sophie Kinsella's *Finding Audrey*, to initiate discussions about mental health problems in Norwegian EFL classrooms. By analyzing how these novels portray mental health issues, this research have shown they can serve as effective tools for engaging students in meaningful conversations about depression and anxiety while also cultivating empathy, critical thinking skills and language proficiency.

Furthermore, this chapter has examined various didactic strategies that can be utilized to effectively teach these titles in the EFL classroom, including pre-reading activities, reading journals, vocabulary development, guided discussions, creative writing activities, role playing exercises, connecting literature to real life experiences and post-reading reflection and evaluation. By incorporating these tactics into lesson plans educators can maximize the educational impact of these novels while meeting students' unique needs in an EFL setting.

Finally, young adult literature about mental health such as *Darius the Great is Not Okay* and *Finding Audrey* can offer Norwegian EFL students a valuable platform to engage in discussions about such issues. These novels foster empathy, enhance critical thinking, and develop language skills while creating an encouraging atmosphere where sensitive topics can be discussed safely and supportively.

By carefully selecting didactic strategies that fit the subject matter and specific needs of their students, educators can effectively use these novels in EFL classes to address mental health issues among young adults. By including literature that accurately and authentically portrays mental health struggles, educators give students a better insight into these struggles, helping to de-stigmatize mental health both inside and outside of the classroom setting.

5.3.1 Future Research

This chapter has provided an analysis of the advantages and strategies associated with using young adult literature with mental health themes in Norwegian EFL classrooms, while further research could yield even more insightful findings and recommendations for educators.

Potential areas for investigation may include:

- Examining the effectiveness of different didactic strategies used to teach mental health themed young adult literature to various age groups and educational settings would allow educators to tailor their teaching methods according to students' individual needs.
- Examining the effects of including mental health themed literature in EFL classrooms on student attitudes, comprehension, and experiences pertaining to mental illness could shed valuable insight into its long-term impacts. Such literature could increase awareness and empathy towards mental illness while at the same time further developing students' English proficiency.

- Evaluation of young adult literature related to mental health for use in an EFL classroom will enable one to understand whether certain texts or materials are more successful at engaging students in discussions about mental health while creating empathy and understanding among their learners.
- Conduct case studies or action research projects to demonstrate how didactic strategies suggested here works in real-life EFL classrooms. Such studies could offer valuable insight into any difficulties or successes associated with mental health literature use; giving teachers an opportunity to refine their strategies based on actual teaching experiences.
- Research in these areas can give educators and researchers greater insight into the potential advantages and drawbacks of using young adult literature centered around mental health in EFL classrooms, leading to best practices and creative approaches for teaching mental health topics in an inclusive, supportive educational setting for their students.

6.0 Conclusion

This thesis offers a thorough examination of how mental health issues are represented in contemporary young adult literature, specifically Adib Khorram's *Darius the Great is Not Okay* and Sophie Kinsella's *Finding Audrey*. Both novels present nuanced yet sympathetic representations of their protagonist's struggles, providing readers with greater insight into mental illness disorders.

This thesis has demonstrated the utility of using YAL to address mental health issues in EFL classrooms. By including texts that depict mental health struggles, educators can foster an inclusive learning environment and spark meaningful discussions on mental health among their students - these interactions may promote empathy, reduce stigma, and ultimately contribute to students' overall wellbeing.

Research has also explored the social determinants of mental health, taking into account factors like cultural identity, sexual orientation, cyberbullying and the COVID-19 pandemic. By considering these elements when discussing mental health in EFL classes, educators can offer more comprehensive and inclusive discussions of mental wellbeing.

Integrating young adult literature that addresses mental health issues into an EFL curriculum not only facilitates language acquisition but also aids students' personal and emotional well-being. Through discussions and reflection, they may gain better insight into mental illness's complexity, build empathy, and establish an atmosphere of community within their classroom.

This study investigated the benefits of using young adult literature about mental health as a starting point for conversations on this issue. Not only can such discussions increase awareness about these disorders, but it can also prompt students to share their own stories - creating an atmosphere of community support and creating a sense of support among peers. Furthermore, such discussions can cultivate critical thinking abilities by challenging literary representations of mental illness that students analyze critically and reflect upon.

Overall, this research has demonstrated the value of including contemporary YA literature that addresses mental health issues into EFL curriculums. By engaging with texts depicting depression and anxiety disorders, students may gain a more thorough understanding of such disorders while developing empathy and communication skills necessary for dealing with such complex matters. As EFL education evolves further, it is imperative that educators recognize literature's power to raise mental health awareness while creating supportive learning environments.

6.1 Research question

Now we will address each research question individually, summarizing the main findings and implications from the study:

1. How does contemporary YA literature depict mental health issues, such as depression in Adib Khorram's *Darius the Great is Not Okay* and anxiety in Sophie Kinsella's *Finding Audrey*?

This study revealed that contemporary YA literature accurately and sensitively portrays mental health issues. Adib Khorram's *Darius the Great is Not Okay* explores depression through its protagonist's persistent sadness, feelings of worthlessness and social withdrawal. The novel delves into the subtleties of depression and its effects on daily life, relationships, and identity. Similar to Sophie Kinsella's *Finding Audrey*, anxiety is authentically depicted through its protagonist's fear of social situations, avoidance of eye contact, and dependence on

dark sunglasses. Both novels effectively showcase these individuals' internal struggles as well as the obstacles they face due to their mental health conditions.

2. How can YA literature be utilized to address mental health issues in the EFL classroom?

This study demonstrated that YA literature which addresses mental health issues can be effectively integrated into EFL classrooms by using these texts as a starting point for discussion, reflection, and analysis. Educators can facilitate activities which encourage students to explore the experiences of characters, identify themes related to mental health and share their own perspectives on these themes presented in novels. Such activities create an supporting learning atmosphere which encourages students to tackle complex topics while developing empathy, critical thinking and communication skills.

Furthermore, the study discovered that using YA literature to address mental health issues in EFL classrooms can promote cross-cultural understanding and encourage students to explore diverse perspectives on mental health. As these novels often feature protagonists from various cultural backgrounds, students are exposed to diverse experiences and attitudes toward mental health which leads to greater empathy and comprehension.

3. What are the potential advantages of using young adult literature about mental health to stimulate a conversation about these issues?

This study has demonstrated the many advantages of including young adult literature related to mental health in classroom settings. First and foremost, it increases awareness and comprehension of disorders related to mental health while helping reduce stigmatization and misinformation about them. Second, this approach encourages students to share their own perspectives and build community among peers. Thirdly, discussing mental health issues through literature helps students build their critical thinking and communication skills while exploring texts to deepen their own understandings of mental wellbeing. Finally, including mental health-themed literature in their curriculum can contribute to both their overall wellbeing as well as provide an inclusive learning environment.

This study highlights the significance of selecting high-quality young adult literature that accurately portrays mental health issues while remaining authentic and accessible for

students. By carefully choosing texts that capture all aspects of mental health disorders, educators can ensure students gain an in-depth knowledge about them.

Furthermore, this research stresses the necessity of professional development for EFL teachers in mental health issues. Teachers must possess knowledge and abilities necessary for creating safe classroom environments while engaging meaningful conversations about mental health issues with their students while being alert for any possible signs of mental health concerns within their classes.

This study suggests that collaboration between EFL educators and mental health professionals can increase the effectiveness of using Young Adult Literature to address mental health issues in classroom. Mental health experts can offer invaluable insight and resources that enable educators to create lesson plans and activities which promote awareness and understanding about mental health.

Furthermore, this research explores the power of interdisciplinary approaches to mental health education in EFL classrooms. By including elements from psychology, sociology, and cultural studies in their curriculums, educators can encourage their students to examine mental health issues from multiple viewpoints and gain a comprehensive understanding of these complex subjects.

Finally, this study advocates for further exploration into using young adult literature to address mental health issues in EFL classrooms across culturally diverse contexts. By measuring their efficacy across settings and populations, researchers may contribute towards creating best practices for mental health education within EFL settings.

This research emphasizes the potential of contemporary Young Adult literature to serve as an invaluable resource for EFL educators when discussing mental health. By engaging students in meaningful conversations about mental illness, educators can foster empathy, reduce stigmatization, and create supportive learning environments which contribute to their students' overall well-being. As EFL education continues to evolve, incorporating mental health-focused literature into curriculums will become ever more critical in order to provide inclusive and supportive educational experiences for all learners.

6.2 Relevance of the study

Researching mental health representation in young adult literature today, particularly within education or EFL classroom settings, offers several tangible advantages. These benefits may include:

1. **Raising Awareness and Reducing Stigma:** Mental health concerns affect individuals of all ages and cultures alike, making young adult literature analysis one avenue towards raising awareness while diminishing stigma surrounding such conditions - an especially critical component in cultivating empathy and understanding among readers who may be going through pivotal periods in personal growth or identity formation.
2. **Improving Pedagogical approaches:** As educators become increasingly aware of the significance of mental health in classroom settings, research in this area can inform educators' approaches for including young adult literature on mental health into curriculums. This means understanding its effects on emotional wellbeing, engagement levels and learning outcomes for each student as well as finding effective techniques for sparking meaningful discussions surrounding such subjects.
3. **Promoting Inclusivity and Diversity:** Research conducted in this area can contribute significantly towards creating inclusive learning environments. By exploring how mental health conditions are represented relative to factors like culture, gender, sexual orientation in literature works they analyze, researchers can bring attention to the need for diverse yet authentic representations of mental illness experiences in works of fiction that foster more inclusive and representative classroom settings overall.
4. **Enhancing mental health education:** With mental health problems becoming a growing issue in society, research in this area can contribute to educational materials and interventions designed to raise awareness of and access to mental health issues among adolescents. By understanding how YAL influences these perspectives on these matters, researchers can better design materials and programs intended to foster their well-being.
5. **Informing Policy and Practice:** Research in this area has the power to have an enormously significant effect on policy and practice within education and mental health. By gathering evidence regarding young adult literature's effectiveness for addressing mental health concerns in classroom settings, researchers may help shape policies and guidelines designed to enhance students' wellbeing while creating inclusive learning environments.

Research in contemporary young adult literature that examines mental health representation can make significant strides toward increasing awareness, decreasing stigma, improving pedagogy approaches, encouraging inclusivity and diversity as well as informing policy and practice within education. By understanding how literary depictions of mental illness impact young readers and learners alike, researchers can foster more empathetic educational environments which prioritize all students' wellbeing.

6.3 Final Reflections

Through my research journey, I have gained an immense amount of insight into mental health issues and young adult literature available for adolescents to discover.

Through exploring contemporary young adult literature that addresses mental health issues, I have not only expanded my knowledge but also deepened my awareness of such conditions. I have come to value the critical role YAL may play in cultivating empathy and kindness among readers, particularly adolescents at an important juncture of personal development and identity formation. As I read these texts and their nuanced depictions of mental health conditions, I was struck by their ability to accurately portray the difficulties experienced by individuals living with these disorders. This insight further cemented my belief in authentic representation within YAL as well as its potential to reduce stigma and foster understanding.

As I have learned more, I understand the significance of incorporating YAL into educational settings like EFL classrooms. By creating supportive learning environments that foster empathy, critical thinking, and communication skills through meaningful discussions on mental health topics, educators can create productive environments that are conducive to effective learning experiences.

My research journey has been an eye-opening and transformative one, deepening my awareness of mental health issues as they relate to YAL. As I conclude my explorations on this subject matter, I am thankful to have contributed to ongoing dialogue regarding mental health in literature and education. Moreover, I am committed to spreading empathy, acceptance, and inclusivity through my work and interactions with others.

References

Primary sources:

Khorram, A. (2018). *Darius the Great is Not Okay*. Penguin Books.

Kinsella, S. (2016). *Finding Audrey*. Ember.

Secondary sources:

American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders* (5th ed.).

Bang, L. H., Furu, K., Odsbu, I., Handal, M., Suren, P., & Torgersen, L. (2019). Quality of life and mental health among children and adolescents in Norway. Institute of Public Health. <https://www.fhi.no/en/op/hin/mental-health/mental-health-children-adolescents/>

Bettmann, J. E., Anstadt, G., Casselman, B., & Ganesh, K. (2021). Young adult depression and anxiety linked to social media use: assessment and treatment. *Clinical Social Work Journal*, 49(3), 368-379.

Birmaher, B., Brent, D. A., Kolko, D., Baugher, M., Bridge, J., & Holder, D. (2000). Clinical outcome after short-term psychotherapy for adolescents with major depressive disorder. *Archives of General Psychiatry*, 64(10), 1228-1236.

Birmaher, B., Brent, D., Emslie, G., et al. (2007). AACAP Work Group on Quality Issues. Practice parameter for the assessment and treatment of children and adolescents with depressive disorders. *Journal of the American Academy of Child and Adolescent Psychiatry*, 46(11), 1503–1526.

Cart, M. (2008). *The Value of Young Adult Literature*. YALSA, The Young Adult Library Services Association.

Coats, K. (2004). *Looking glasses and neverlands: Lacan, desire, and subjectivity in children's literature*. University of Iowa Press.

Cohen, J. (2001). Defining identification: A theoretical look at the identification of audiences with media characters. *Mass Communication & Society*, 4(3), 245-264.

Coles ME, Ravid A, Gibb B, George-Denn D, Bronstein LR, McLeod S. Adolescent Mental Health Literacy: Young People's Knowledge of Depression and Social Anxiety Disorder. *J*

Adolesc Health. 2016 Jan;58(1):57-62. doi: 10.1016/j.jadohealth.2015.09.017. PMID: 26707229.

Corrigan, P. W., Watson, A. C., & Barr, L. (2014). The self-stigma of mental illness: Implications for self-esteem and self-efficacy. *Journal of Social and Clinical Psychology*, 23(6), 890-903.

Costello, E. J., Egger, H. L., & Angold, A. (2003). The developmental epidemiology of anxiety disorders: Phenomenology, prevalence, and comorbidity. *Child and Adolescent Psychiatric Clinics of North America*, 12(4), 567-584.

Curcic, D. (2023, January 30). Dimitrije Curcic. WordsRated. Retrieved 2023, from <https://wordrated.com/young-adult-book-sales/>

Deakin, K., & Eastman, G. (2019). Where's my happy ending? Fostering empathy through conversations about anxiety and depression in young adult literature. *Language Arts Journal of Michigan*, 35(1), 5.

Dewey, J. (1933). *How We Think: A Restatement of the Relation of Reflective Thinking to the Educative Process*. Lexington, MA: Heath.

Eley, T. C., Bolton, D., O'Connor, T. G., Perrin, S., Smith, P., & Plomin, R. (2003). A twin study of anxiety-related behaviours in pre-school children. *Journal of Child Psychology and Psychiatry*, 44(7), 945-960.

FERGUSSON, D., HORWOOD, L., RIDDER, E., & BEAUTRAIS, A. (2005). Sexual orientation and mental health in a birth cohort of young adults. *Psychological Medicine*, 35(7), 971-981. doi:10.1017/S0033291704004222

Freud, S. (1923). The ego and the id. In J. Strachey (Ed. & Trans.), *The standard edition of the complete psychological works of Sigmund Freud* (Vol. 19, pp. 3-66). W. W. Norton.

Graham, S., & Hebert, M. (2010). *Writing to read: Evidence for how writing can improve reading*. A Carnegie Corporation Time to Act Report. Carnegie Corporation.

Graham, S., & Perin, D. (2007). *Writing next: Effective strategies to improve writing of adolescents in middle and high schools*. Alliance for Excellent Education.

Graham, S., & Sandmel, K. (2011). The process writing approach: A meta-analysis. *The Journal of Educational Research*, 104(6), 396-407.

- Graham, S., Harris, K. R., & Mason, L. H. (2005). Improving the writing performance, knowledge, and self-efficacy of struggling young writers: The effects of self-regulated strategy development. *Contemporary Educational Psychology*, 30(2), 207-241.
- Graham, S., Harris, K. R., & Troia, G. A. (2000). Writing and writing instruction for students with learning disabilities: Review of a research program. *Learning Disabilities Research & Practice*, 15(1), 19-32.
- Graham, S., McKeown, D., Kiuahara, S., & Harris, K. R. (2012). A meta-analysis of writing instruction for adolescent students. *Journal of Educational Psychology*, 104(4), 879-896.
- Hankin, B. L., Badanes, L. S., Abela, J. R. Z., & Watamura, S. E. (2010). Hypothalamic-pituitary-adrenal axis dysregulation in dysphoric children and adolescents: Cortisol reactivity to psychosocial stress from preschool through middle adolescence. *Biological Psychiatry*, 68(5), 484-490.
- Hatzenbuehler, M. L. (2009). How does sexual minority stigma “get under the skin”? A psychological mediation framework. *Psychological Bulletin*, 135(5), 707-730.
- Hawes MT, Szenczy AK, Klein DN, Hajcak G, Nelson BD. Increases in depression and anxiety symptoms in adolescents and young adults during the COVID-19 pandemic. *Psychol Med*. 2022 Oct;52(14):3222-3230. doi: 10.1017/S0033291720005358. Epub 2021 Jan 13. PMID: 33436120; PMCID: PMC7844180.
- Hendrickson, B. (2018). *Using Young Adult Literature to Confront Mental Health: A Culturally Relevant Approach*.
- Horigian, V. E., Schmidt, R. D., & Feaster, D. J. (2021). Loneliness, mental health, and substance use among US young adults during COVID-19. *Journal of psychoactive drugs*, 53(1), 1-9.
- Hughes-Hassell, S., & Cox, E. J. (2010). Inside board books: Representations of people of color. *Library Quarterly*, 80(3), 211-230.
- Hvide, H. K. J., Julian;. (2022). COVID-19 and mental health: a longitudinal population study from Norway. *European Journal of Epidemiology*, 37, 6.
- Kan, Z. S., Erik Ganesh Iyer; Siqveland, Johan; Hussain, Ajmal; Hanssen-Bauer, Kjetil; Jensen, Pia; Heiervang, Kristian Sverdvik; Ringen, Petter Andreas; Ekeberg, Øiving; Hem, Erlend; Heir, Trond; Thapa, Suraj Bahadur;. (2022). *Coping, Social Support and Loneliness*

during the COVID-19 Pandemic and Their Effect on Depression and Anxiety: Patients' Experiences in Community Mental Health Centers in Norway. *Healthcare*, 12.

Konac D, Young KS, Lau J, Barker ED. Comorbidity Between Depression and Anxiety in Adolescents: Bridge Symptoms and Relevance of Risk and Protective Factors. *J Psychopathol Behav Assess*. 2021;43(3):583-596. doi: 10.1007/s10862-021-09880-5. Epub 2021 Mar 30. PMID: 34720388; PMCID: PMC8550210.

Landstedt E, Persson S. Bullying, cyberbullying, and mental health in young people. *Scandinavian Journal of Public Health*. 2014;42(4):393-399. doi:10.1177/1403494814525004

Larsen, M. S. (2015). Mental Illness in Literature Seeing and Recognizing Mental Illness in Conrad's 'The Idiots', Poe's 'The System of Dr. Tarr and Prof. Fether' and Scott Fitzgerald's *Tender is the Night* [Masters, The Arctic University of Norway].

Luk JW, Gilman SE, Haynie DL, Simons-Morton BG. Sexual Orientation and Depressive Symptoms in Adolescents. *Pediatrics*. 2018 May;141(5):e20173309. doi: 10.1542/peds.2017-3309. Epub 2018 Apr 16. PMID: 29661939; PMCID: PMC5931790.

Malhi GS, Bell E, Singh AB, Bassett D, Berk M, Boyce P, Bryant R, Gitlin M, Hamilton A, Hazell P, Hopwood M, Lyndon B, McIntyre RS, Morris G, Mulder R, Porter R, Yatham LN, Young A, Murray G. The 2020 Royal Australian and New Zealand College of Psychiatrists clinical practice guidelines for mood disorders: Major depression summary. *Bipolar Disord*. 2020 Dec;22(8):788-804. doi: 10.1111/bdi.13035. PMID: 33320412.

Mayo Clinic Staff. (n.d.). Depression (major depressive disorder): Symptoms & causes. Mayo Clinic. Retrieved January 21, 2023, from <https://www.mayoclinic.org/diseases-conditions/depression/symptoms-causes/syc-20356007>

McGonigal, J. (2011). *Reality Is Broken: Why Games Make Us Better and How They Can Change the World*. Penguin.

Ministry of Education and Research. Udir, (2019). Curriculum for English (ENG01-04). <https://data.udir.no/k106/v201906/laereplaner-lk20/ENG01-04.pdf?lang=eng>

Moon, J. (2006). *Learning Journals: A Handbook for Reflective Practice and Professional Development*. Routledge.

Nation, I. S. P. (2001). *Learning Vocabulary in Another Language*. Cambridge University Press.

Nikolajeva, M. (2010). *Power, Voice, and Subjectivity in Literature for Young Readers*. London: Routledge.

O'Bannion, C. M. (2010). *NAUGHTY OR NOT?: EXPLORING CONTROVERSIAL CONTENT AND CORE UNIVERSAL THEMES IN CONTEMPORARY YOUNG ADULT LITERATURE* [Ph.D, Chapman University].

Pavlov, I. P. (1927). *Conditioned reflexes: An investigation of the physiological activity of the cerebral cortex*. Oxford University Press.

Reynolds, K. (2011). *Children's Literature: A Very Short Introduction*. Oxford: Oxford University Press.

Rice, T. R., Leo, S. (2013). Suicide prevention in depressed adolescents. *Adolescent Psychiatry*. L. S. J. Merrick, Walter de Gruyter GmbH: 69-82.

Richmond, K. J. (2018). *Mental illness in young adult literature: exploring real struggles through fictional characters*. ABC-CLIO.

Rosenblatt, L. M. (1978). *The reader, the text, the poem: The transactional theory of the literary work*. Southern Illinois University Press.

Severn, C. G. (2018). *Representations of Mental Health in Young Adult Literature: A Cultural Analysis of the Three Ps of Patient, Practitioner and Population*.

<https://scholarworks.utrgv.edu/etd>. Retrieved April 2023, from

<https://scholarworks.utrgv.edu/cgi/viewcontent.cgi?article=1366&context=etd>

Surén, P. (2018). Har Ungdommer dårligere Psykisk Helse Enn Før? *Tidsskrift for Den norske legeforening*. Retrieved April 2, 2023, from <https://tidsskriftet.no/2018/09/leder/har-ungdommer-darligere-psykisk-helse-enn>

Tajfel, H., & Turner, J. C. (1979). An integrative theory of intergroup conflict. In W. G. Austin & S. Worchel (Eds.), *The social psychology of intergroup relations* (pp. 33-47). Brooks/Cole.

The Norwegian Education Mirror, Udir, (2019). *School environment and well-being*. (n.d.). <https://www.udir.no/in-english/education-mirror-2019/school-environment-and-well-being/>

Thomé, S. (2018). *Mobile Phone Use and Mental Health. A Review of the Research That Takes a Psychological Perspective on Exposure*. *International Journal of Environmental*

Research and Public Health, 15(12), 2692. MDPI AG. Retrieved from
<http://dx.doi.org/10.3390/ijerph15122692>

WHO; (2021). Adolescent mental health. <https://www.who.int/news-room/fact-sheets/detail/adolescent-mental-health>

Wolk, S. (2009). Reading for a better world: Teaching for social responsibility with young adult literature. *Journal of Adolescent & Adult Literacy*, 52(8), 664-673.