



PTSD in Young Adult Fiction:

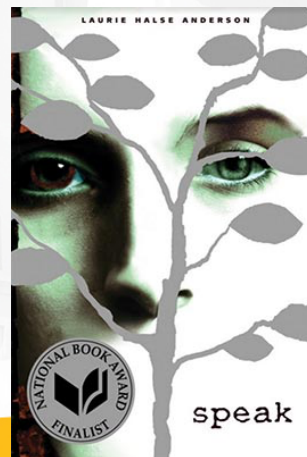
Fantasy, Dystopia and Realism

Louise M. Freeman, PhD.

Professor of Psychology, Mary Baldwin University
Compass Counseling Services of Virginia

Examples of PTSD in YA Fiction

- Laurie Halse Anderson's *The Impossible Knife of Memory* and *Speak*.
- But.... Your students may have already encountered PTSD in their favorite books.



Facts and Figures

- Cluster of symptoms that can develop after traumatic experience
 - Especially deliberate acts of violence like combat, sexual assault.
 - Less common with accidents or natural disasters.
- Lifetime prevalence: 7.8%
- Women (10.4%) more likely to develop than men (5%)
- After trauma, 8.1% of men and 20.4 % of women will develop PTSD.
- Estimated lifetime prevalence of 27-30% of combat veterans.
- Among rape victims: 46% of women and 65% of men develop PTSD.
- Up to 24 million Americans currently have PTSD.

How is PTSD diagnosed?

- Diagnostic and Statistical Manual IV (DSM-IV)
 - Published by the American Psychiatric Association.
 - Updated in 2013
- Diagnostic and Statistical Manual V (after 2013)
 - Placed in new category: Trauma and Stressor-Related Disorders.
- International Classification of Diseases-10 (1994)
 - Used by World Health Organization.
 - Less stringent criteria

DSM-IV criteria

- A. Trauma:
 - 1. Experienced, witnessed or was confronted with actual or threatened death or serious injury, or a threat to the physical integrity of self or others
 - 2. Reacted with intense fear, helplessness or horror.
- B. Re-experienced in 1 of the following ways:
 1. Intrusive, recurrent memories.
 2. Recurrent distressing dreams.
 3. Flashbacks.
 4. Intense distress when exposed to cues.
 5. Physiological reactivity when exposed to cues.

DSM-IV, continued.

- C. Avoidance/Numbness (3 of the following)
 1. Avoids thinking or talking about incident.
 2. Avoids places, activities or people associated with incident.
 3. Inability to recall elements of trauma.
 4. Diminished interest in activities.
 5. Detachment and estrangement from others.
 6. Restricted range of feelings.
 7. Sense of foreshortened future.

DSM-IV criteria, continued.

- D. Increased arousal (2 or more of the following)
 - 1. Difficulty sleeping.
 - 2. Irritability, anger.
 - 3. Difficulty concentrating
 - 4. Hypervigilance
 - 5. Exaggerated startle response.
- E. Lasts for more than a month.
- F. Functionally significant; impairs social life, work, or other significant aspect of functioning.

Can be acute (< 3 months), chronic (> 3 months) or delayed onset (more than 6 months after trauma).

Matching Moody's symptoms

- **PTSD symptoms**

- Intrusive recollections of trauma
- Trivia Question #1:
 - What is Mad-Eye's real first name?
- Trivia question #2:
 - What is Moody's motto?
- Hypervigilance
- Exaggerated startle reflex
- Trivia question #3:
 - Why did Moody carry a flask with him everywhere?
- Expects foreshortened future
- Irritability, outbursts of anger



- **Mad-Eye Moody traits**

- “Alastor” means “avenger,” literally “one who does not forget”
- “Constant vigilance!”
- Wears magical eye that is always spinning, looking for things.
- “Did you hear... what he did to that witch who shouted 'Boo' behind him on April Fool's Day ?” –Ron, *GoF*
- Feared poisoning, drank only from own flask
- “If one of us is killed, the others just keep flying, don't stop, don't break ranks” – Moody, *OotP*
- “Moody” means “irritable.”

Is Moody's Portrayal a Problem?

- Considered “crazy” by many.
 - Sometimes symptoms are a source of humor.
- Moody emerges as highly respected character, once we meet the real one.
 - Remember, the guy in *GoF* was an imposter!
- Evidence of Rowling's respect for combat vets.
- Reading HP associated with higher tolerance for mental illness patients.

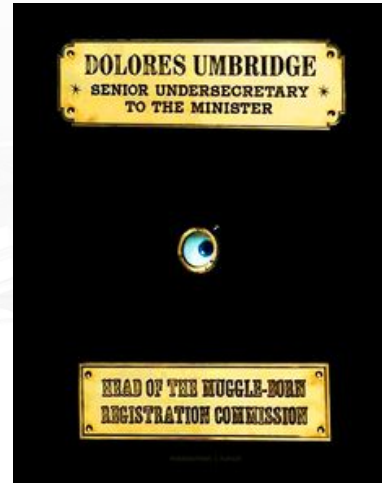
PTSD can be useful in combat.



- *Order of the Phoenix*
 - Moody has elaborate plan to get Harry from Privet Drive.
 - “If they take out all of us and you survive, Harry, the rear guard are standing by to take over; keep flying east and they’ll join you.”
 - “Are you mad, Mad-Eye?!” – Tonks.
- *Deathly Hallows*
 - Even more convinced they are going to be attacked.
 - *And he’s right!*
 - Has even more elaborate plan.
 - Even this plan could not prevent casualties.
 - Moody himself died.
 - How does Harry respond?

Honoring the soldier.

- “So tough, so brave, the consummate survivor ...”
- Stole eye from Umbridge’s office in Ministry
- Buried it under “oldest, most gnarled and resilient-looking tree he could find.”
- Carved cross.



2007 “A Soldier’s Heart in a Mad Eye”

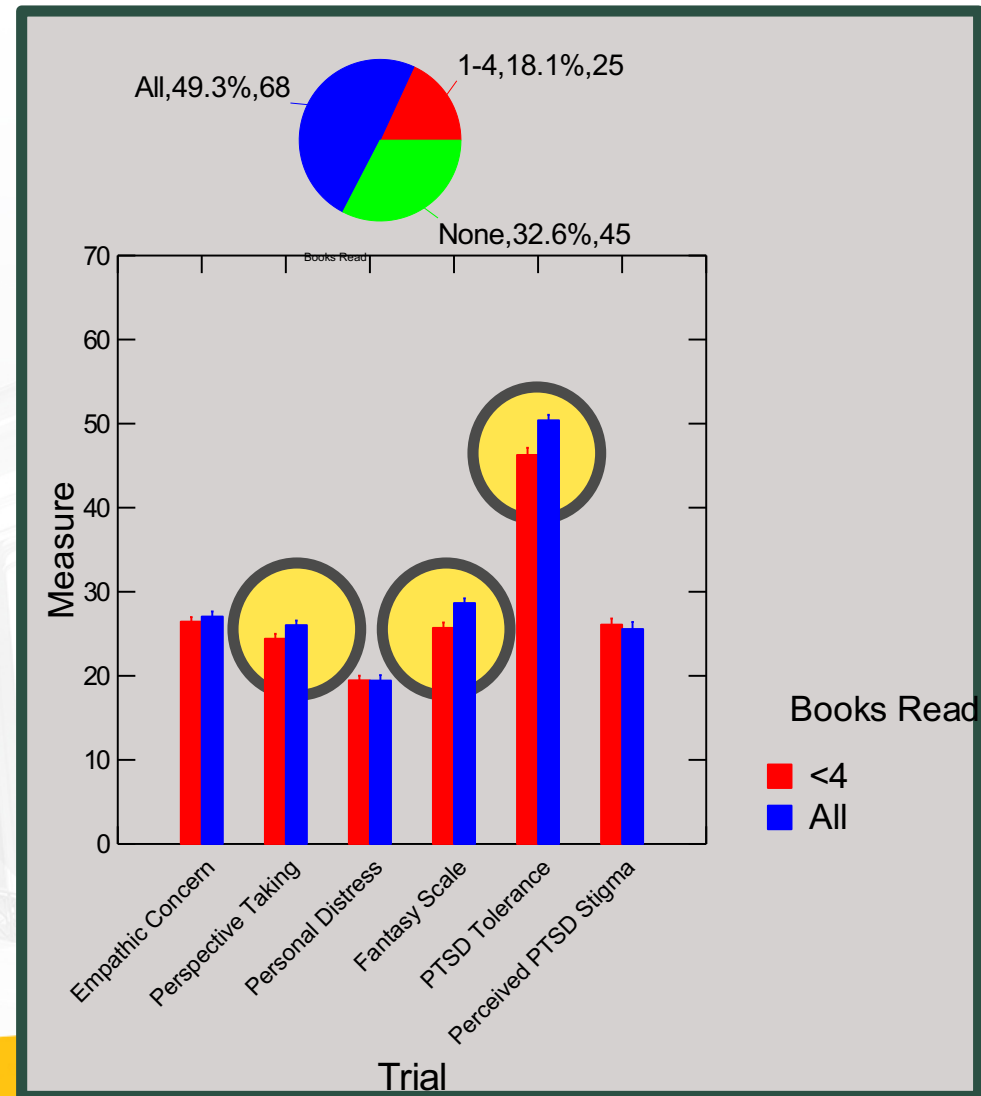
- “A darned fine example of what happens to a good person... when the shooting stops. ...How J. K. Rowling gained her insight into the veteran's condition, I do not know, but she has fleshed out a great character to reflect this particular aspect of war and society.”
- Cormoran Strike, hero of JK Rowling’s mystery series for adults, is also a combat veteran who lost a leg in war.
 - Shows some PTSD symptoms.



HP associated with higher empathy, tolerance for people with mental illness.

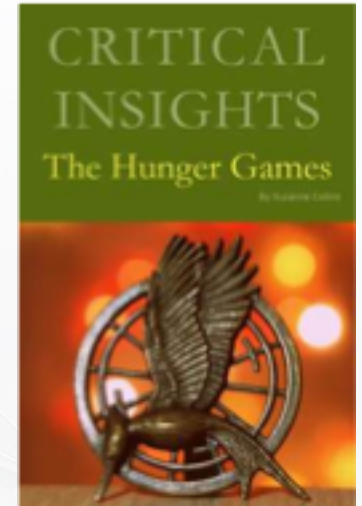
Surveyed 138 students about how much they read and liked Harry Potter.

- Also measured:
 - PTSD tolerance and stigmatization
 - Their own “I would be uncomfortable with a PTSD patient in my neighborhood”
 - Perceived from society “Most people are uncomfortable being around PTSD patients.”
 - Interpersonal Reactivity Index: 4 subscales of empathy.
 - Empathic Concern
 - Perspective-taking
 - Personal distress
 - Fantasy scale



Which Hunger Games characters don't have PTSD?

- Katniss before 74th Games: YES NO ✓
- Katniss after 74th Games: YES ✓ NO
- Haymitch: YES ✓ NO
- Johanna (*Mockingjay*) YES ✓ NO
- Peeta after 74th Games: YES NO ✓



IDC-10 criteria

- A. Exposed to stressor.
- B. Re-experienced in 1 ways:
 - Flashbacks.
 - Intrusive memories or dreams.
 - Distress when exposed to cues.
- C. Avoidance
 - 1 of the symptoms.
 - DSM-IV requires 3.
- D. Increased arousal
 - Impaired memory OR
 - Two of:
 - Sleep problems
 - Irritability
 - Difficulty concentrating
 - Hypervigilance
 - Exaggerated startle.
- E. Onset within 6 months.

Peeta's Hijacking

Figure 1. Comparison of Watson & Rayner's 1920 fear conditioning of Little Albert to Peeta's hijacking.



At first, Albert likes the rat.



Rat is paired with loud noise.

Fear



Fear

Albert learns to fear rat.



At first, Peeta loves Katniss.



Katniss is paired with venom.

Fear



Fear

Peeta learns to fear Katniss.

Artwork courtesy of Jade Walters and Katriel Cho

Hijacking Gave Peeta a Mutation-version of PTSD.



PTSD Symptoms

- Distress, reactivity to stimuli.
- **Memory lapses about event.**
- Emotional detachment from others.
- Sense of foreshortened future.
- **Irritability, moodiness, anger.**
- Exaggerated startle response.

Peeta's symptoms

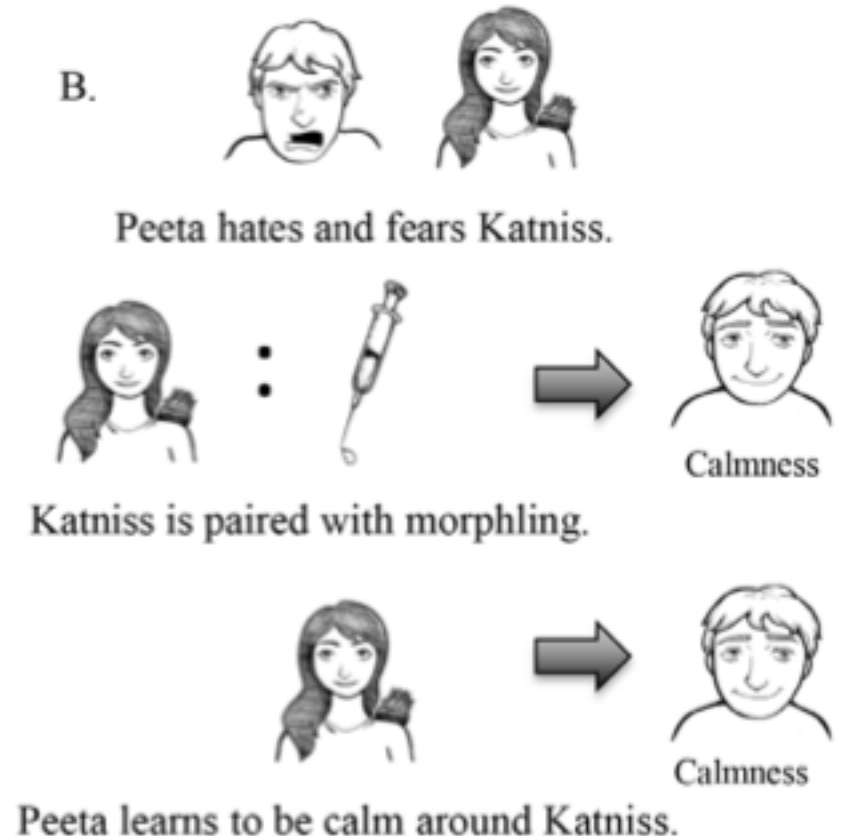
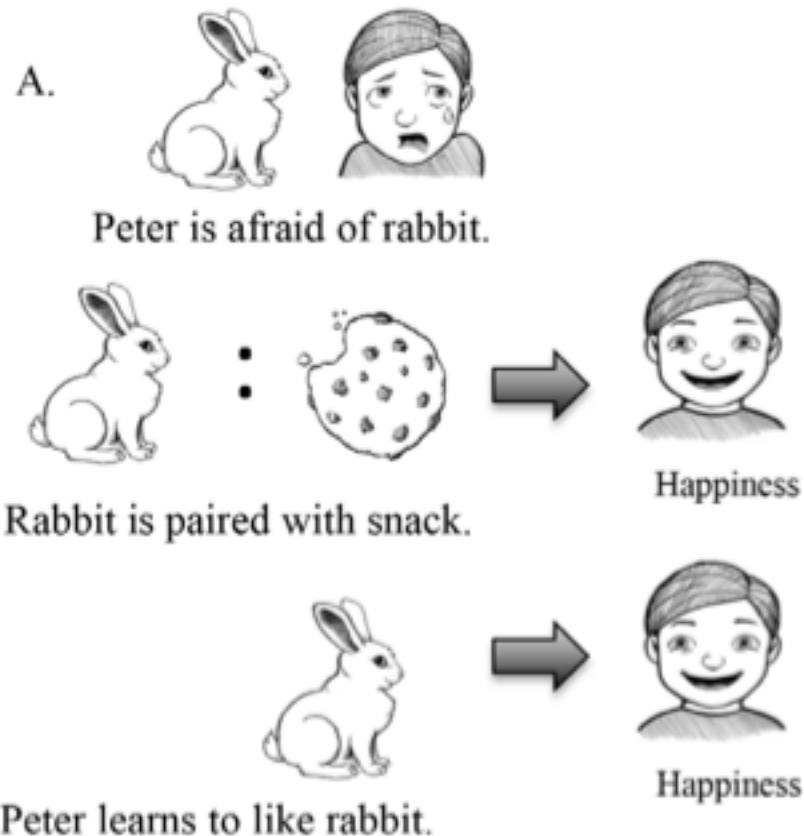
- Uncontrollable urge to kill Katniss.
- **Completely false memories.**
- Hates Katniss, thinks she's a mutt.
- Tries to get squad to kill him.
- **Uncontrollable rages, need for restraints.**
- "Goes off for no reason."

What can we learn from Peeta's treatment?



- ✓ *Mockingjay* shows us several sample treatments that resemble therapies for PTSD and other fear disorders.
 - ✓ Prim independently develops Jones' counterconditioning procedure.
 - ✓ Prolonged exposure.
 - ✓ Peeta begins to recover when he and Katniss are thrown together in the mission to the Capitol.
 - ✓ Cognitive restructuring.
 - ✓ "Real or Not Real?" game.
 - ✓ Art therapy.
 - ✓ Peeta's painting hobby, updating the Everdeen family plant book, memory book.
- ✓ Haymitch tells Katniss Peeta "will never be the same."
 - ✓ Treatment for PTSD is a long and difficult process.
 - ✓ Some will never be fully "cured," but most can be helped with the right treatment.

Figure 2. Comparison of Jones' 1924 counterconditioning study to Prim's suggested treatment.



Artwork courtesy of Jade Walters and Katriel Cho

Changes with the DSM-V

- No longer considered an anxiety disorder.
 - Grouped in new category: Trauma and Stressor-related Disorders
- Restrictions on what could count as trauma
 - Eliminated most “natural cause” medical emergencies
 - Eliminated exposure through media.
- Removed “intense fear, horror or helplessness.”
 - Too subjective.

Changes with the DSM-V

- Split Cat. C (avoidance/numbness).
 - Avoidance is its own category; must have one symptom
- Numbing symptoms now in D: negative thoughts and feelings, along with three new symptoms
 - Chronic negative mood
 - Distorted negative assumptions of self or world
 - Exaggerated blame of self or others.

Changes with DSM-V

- Reckless or self-destructive behavior added to Arousal group (E).
- Exclusion criteria:
 - Symptoms not result of substance abuse, medication or illness.
- Two new subtypes:
 - Dissociative
 - Depersonalization or derealization.
 - Delayed
 - Symptoms appear more than 6 months after trauma.

Activity:

- Choose a character:
 - Andy or Hayley from *The Impossible Knife of Memory*.
 - Melinda from *Speak*.
- Look at the PTSD criteria
 - How are the symptoms illustrated in the text language?

Conclusions

- Psychology and YAL can inform each other.
- Illustrations of mental illness can be effectively shown both implicitly and explicitly.
 - In a variety of genres.
- Potential to increase understanding and compassion for patients.