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Mental Illness in Young Adult Literature: A Classroom Approach

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Mental Illness in Young Adult Literature: A Classroom Approach

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Mental Illness in Young Adult Literature: A Classroom Approach

Submitted in partial fulfillment
of the requirements
for the Murray State University Honors Diploma

Claire Ghent

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Abstract

As high school curricula in the 21st century evolve, the need to increase exposure to diverse literature that reflects culture, gender, and ethnicity is growing. One crucial area often overlooked by educators, parents, and publishers is literature that draws attention to mental illness, in spite of the growing number of adolescents who suffer from a mental illness. By increasing awareness of mental illness in the classroom, teachers can reduce stigma and increase empathy in their students while still providing challenging and engaging literary interactions. One of the best vehicles to deliver mental illness and stigma education is young adult literature because of its relatable and engaging content. The texts explored in this thesis are Laurie Halse Anderson's *The Impossible Knife of Memory*, John Green's *Turtles All the Way Down*, Jennifer Niven's *All the Bright Places*, and Neal Shusterman's *Challenger Deep*. Each of these texts can be integrated within a high school English classroom and is valuable in its presentation of complex characters, extensive use of figurative language, and accurate treatment of mental illness. This thesis provides a summary of the texts' presentation of mental illness and an exploration of literary elements. This thesis also offers a variety of educational activities and cross-curricular and canonical pairings for these young adult texts when included in a high school English curriculum. Finally, this thesis includes an outline for a project-based, multimodal unit plan intended for a high school English classroom that integrates the four texts mentioned above with informational and canonical texts.

Introduction

As high school curricula in the 21st century evolve, the need to increase students' exposure to diverse literature that reflects culture, gender, and ethnicity is growing. One crucial area often overlooked by educators, parents, and publishers is literature that draws attention to mental illness, in spite of the alarming statistic that one in five teens experiences some type of serious mental illness ("Mental Health: Prevalence"). The absence of literary scholarship and classroom readings dealing with mental illness suggests "a larger cultural issue of invisibility and dismissal" (Thaller 43). According to the National Institute for Mental Health (NIMH), 20% of adolescents ages 13-18 live with a mental health condition, and "37% of students with a mental health condition aged 14 and older drop out of high school, which is the highest dropout rate of any disability group." As mental disorders have become the most common condition affecting youth, there are serious implications for students and schools (Meldrum 3). Despite these statistics, the issue remains largely untouched in scholarship on teaching literature and secondary classrooms. Recently, however, there has been an influx of young adult texts that deal with mental illness, which suggests "a growing acknowledgment that talking about mental illness and depression is a lot healthier than not talking about it" (S. Corbett 20). Laurie Halse Anderson's statement that "we've got to do a better job helping out our teens in this country" is a powerful proclamation of the need for mental health discussions and stigma reduction education in secondary classrooms (Lodge 2013).

Although mental illness rates are incredibly high in young adults, and "the onset of depression is occurring earlier in life today than in past decades" (Jones 32), Froese-Germain and Riel, researchers at the Canadian Teachers' Federation, note that stigma is one of the largest barriers to individuals seeking mental health (1-2). Dr. Heather Stuart, Bell Canada Mental

Health and Anti-Stigma Research Chair at Queen's University, defines stigma in this context as "society's negative response to people who have a mental illness" and highlights how this stigma "prevents individuals and families from seeking early identification and treatment" (qtd. In Froese-Germain and Riel 2). As mental health stigma is so closely linked to prejudice and inequality, it is important to address this topic and take steps to reduce mental health stigma in the United States' adolescent population.

While some parents, administrators, and teachers push back against integrating such sensitive topics into the classroom, "teens must deal with the suicides of classmates, mental illness, absentee parents, and bullying" in daily life (Ward 63). Considering these situations, it is a teacher's duty to prepare students to best face these challenges in healthy ways, instilling tolerance and resistance as they do so (Ward 63). In the English classroom, one of the most effective ways to increase understanding and empathy while reducing stigma is through the use of young adult literature (YAL) that deals with mental illness. In a high school classroom, some texts that are specifically useful in reducing stigma while meeting teaching standards are Laurie Halse Anderson's *The Impossible Knife of Memory*, John Green's *Turtles All the Way Down*, Jennifer Niven's *All the Bright Places*, and Neal Shusterman's *Challenger Deep*. The aim of this thesis is to provide justification for using these texts in the classroom, an explanation of the literary merit in each text, specific strategies to implement when using each text, and a unit plan that employs all four texts in a standards-based curriculum for a high school English classroom. By exposing students to these young adult texts that deal with mental illness in a realistic manner, teachers can make students more aware of social issues, create engaging, multimodal lessons, and reduce stigma in their classroom while still meeting the required curricular standards.

YAL is an ideal platform to explore issues of mental illness within a high school English classroom. While YAL is “stigmatized as lacking significant literary merit,” it is crucial to provide students with characters with whom they can identify (Bean 249). By capturing students’ interest through engaging and relevant topics, these texts allow readers to apply higher-level thinking skills without the intimidation of specialized vocabulary and the need for extensive prior or contextual knowledge that traditionally accompanies canonical literature (Bean 249-250). Most young adult texts contain depth and complexity in character development and theme with lower barriers of prior knowledge and vocabulary to overcome. In other words, YAL is valuable for English curriculums because “it can meet the standards for quantitative and qualitative measures of complexity at the same time as it meets the needs of readers and the tasks in which they must engage” (Ostenson and Wadham 7). When teachers provide easily accessible yet complex readings, students are significantly more motivated to participate in activities and lessons focused on content learning and skills acquisition.

The need for YAL in the classroom extends beyond student engagement and relevance: “the time is urgent for all schools and teachers to awaken their students’ knowledge and inspiration to make a better world, from local to global...[and] teaching with young adult literature is one of the best ways to make that happen” (Wolk 665). The use of YAL can help students to develop into conscientious, aware citizens who work to counteract social injustice. By showing students that their voices matter, teachers can help them to “become active learners rather than passive receivers of information” (Rybakova and Roccanti 32). Some scholars argue that the emphasis on canonical literature in classrooms has created an “aliterate society” that discourages reading for pleasure (Gallo 35). One of the goals of English classrooms is “developing literacy and creating lifelong readers and writers,” and these texts are ideal for

fulfilling such a task (Rybakova and Roccanti 43). YAL can increase the emotional literacy of students, as even the most advanced students still face quintessential teenage problems. If teachers limit these students to solely classics, “our curricula fail to meet their social and emotional needs” (Gallo 36). The goal to create conscientious citizens can be achieved in unison with the acquisition of standards-based skills in an engaging yet challenging environment, and YAL plays a crucial role in inserting civics into the high school English classroom.

YAL is diverse in its form, themes, and style, and it can be integrated in a variety of ways. As these texts can increase motivation and engagement, they are especially beneficial when employed in scaffolding (Rybakova and Roccanti 32). Lesesne advocates for the use of reading ladders, which is the application of sequential text sets that increase in complexity to provide scaffolding for students to reach the highest text complexity possible (qtd. in Rybakova and Roccanti 32). Herx and Gallo introduced the strategy of bridging with YAL, which enables students to make connections between texts through common themes, plots, characters, settings, and other features (qtd. in Rybakova and Roccanti 32). While YAL can serve as an element in a scaffold for deconstructing complex canonical literature, it also functions to create “critical consumers and functioning citizens,” which is a vital task for all classroom teachers. (Rybakova and Roccanti 34-35). Consequently, teachers should advocate for YAL, equipped with research and justification, to increase student motivation, emotional literacy, engagement, and understanding of canonical literature.

YAL is also an ideal genre to integrate discussion about mental illness into the classroom. As YAL is typically more relatable than canonical literature, students will be able to understand and engage with characters’ thoughts, experiences, and illnesses. It is important to note that “for a teen experiencing depression, a novel about another teen going through a similar situation may

be all that reader needs to feel less alone or to convince him to confide in a friend or parent” (Monaghan 34). Monaghan identifies such texts and experiences as “narrative medicine” (34). This phrase is powerful, as it assigns the weight of healing and growth to such texts. Unlike much classic literature, recent YAL views mental illness as a medical problem rather than a personal or societal problem, which is an important representation for adolescents (Scrofano 15). When students begin to understand that mental illness is not only medical but also treatable, the fear of the symptoms associated with mental illness will reduce.

Teachers must be aware of the possible issues for the representation of mental illness in texts. Fiction has the power to do one of two things; “Fiction...can open readers’ minds to entrenched discriminatory attitudes, or it can be complicit with those attitudes, making them worse” (Dunn 1). Teachers have the power to present literature in a way that either dispels these stereotypes or exacerbates them, so it is important for teachers to be aware of such issues. When teachers effectively integrate literature about mental illness into the classroom, they “contribute to the reduction of stigma and enable those who suffer from mental illness a chance to be seen, a chance to let go of the shame they may feel for being stereotyped” (A. Corbett 92). Stigma is a major issue for sufferers, of which so few students understand the impact. Goncalves, Moliero, and Cook, researchers studying stigma reduction, found that stigma is still the largest barrier to the advocacy of youth mental health (204). The lack of education regarding mental health causes adolescents to feel isolated and discourages them from seeking help. Often, the media links mental illness to crime and violence, which causes people to see sufferers as dangerous and volatile (Ma 98-101). Although mental illness can be impacted by neurochemistry, psychological and social factors, genetics, and/or personality characteristics (Alberta Teachers’ Association 13), many individuals still fear mental illness sufferers, and the stigma attached to such illnesses

continues to discourage individuals from seeking treatment. In order to make treatment more accessible and reduce stigma, mental health education must increase across the population, but it is especially important for adolescents.

Many researchers uniformly advocate for stigma education during adolescence, although there is much debate over the most effective means for stigma reduction. Meldrum et al. notes, “during secondary school students are passing through a vulnerable time of neurodevelopment that can have a serious impact on all aspects of their life” (3). Specifically, as adolescents are still crafting their beliefs about mental illness, they are more impressionable towards stigma reduction education (Strassle 352). Therefore, the need for such education in adolescents is widely agreed upon. The most common stigma reduction methods are education, contact, and video-based social contact interventions (Goncalves, Moliero, and Cook 204). Strassle argues that “stigma education [is] the best stigma reduction technique for adolescents” (352), whereas other researchers found “contact has the highest likelihood of reducing stigma” (351). Therefore, it is advantageous for teachers to combine both stigma education and contact in their classrooms. According to Corrigan and Penn,

education specifically targets stereotypes and myths about mental illness in order to reduce or eliminate such misconceptions, and contact brings people with and without mental illness diagnoses together to highlight commonalities and diminish stereotypes.
(qtd. in Strassle 351)

YAL that deals with mental illness can serve both purposes. Through an inquiry-based approach, students can educate themselves about mental illness and connect to characters on a personal level, increasing contact to reduce stereotyping.

The use of YAL as a stigma-reduction tool requires texts that “present accurate representations of the experience of living with a mental illness” (Thaller iv). Teachers must include literature that provides realistic yet hopeful depictions next to the more dire representations in literature like Sylvia Plath’s *The Bell Jar*. Canonical literature often presents problematic depictions of mental illness, using insanity as a trope to illustrate a societal or other flaw. According to Thaller, the crux of the issue within literary mental health representation is “the common use of mental illness as a metaphor for larger social and personal issues” (179). Dunn notes that

if required literature does include disabled characters that are depicted in a negative, stereotypical manner, teachers will be able to pose critical questions about those depictions in the same way they would pose critical questions about stereotypical characterizations of women or people of color. (94)

Thus, it is possible to use canonical literature in a productive manner to reduce stigma and increase mental illness awareness in the classroom.

There are themes, tropes, and characterizations, though, that should be avoided within classroom literature. Thaller notes that YAL that presents mental illness as “a punishment for bad behavior” should be avoided, which occurs in texts like *Go Ask Alice* (5). Older works of YAL, such as *Go Ask Alice*, may present regressive values, which are not useful in this framework. Literature that presents suicide and mental illness as a tool should be avoided as well. For example, Jay Asher’s *13 Reasons Why* is structured to present a character’s suicide as “a necessary tool for others to learn lessons about maturity, social conduct, and personal growth” (153). The depiction of mental illness to develop other characters should be averted unless they are intended to be critiqued in the

classroom. Thaller lists four tropes to avoid: mental illness sufferers depicted as “the learning opportunity...the victim...the non-human or the beast...[and] the invisible” (Thaller 185-187).

In addition to avoiding these tropes when selecting texts, teachers must be aware of and advocate against the normalization of metaphorical social blindness to mental illness sufferers (Thaller 55-56). Dunn states that teachers should avoid texts that include “stereotypes, plot structures ending in death/miraculous cure, unchallenged discriminatory remarks, and preference to the able-bodied characters,” as these narratives can worsen discrimination towards and even exclusion of some students (Dunn 1-3). With these guidelines in mind, teachers can make literary selections that avoid these characteristics and/or encourage students to critically challenge such depictions.

By following these parameters, teachers can select empowering and productive stigma-reducing texts. Monaghan notes that “the act of naming a disease or condition works to eliminate the stigma surrounding it,” so texts should identify the mental illnesses from which characters are suffering (41). Moreover, texts should realistically represent experiences of clinical illness, including trips to a psychologist or psychiatrist, experimentation with pharmaceutical medication, realistic side effects, conflicts with family and friends, and all else that accompanies modern-day diagnoses and treatments of mental illness (Scrofano 15). Monaghan outlines that a productive narrative about teen mental health should include a protagonist who is reflective of someone his or her age in his or her circumstances, a depiction of experiences that are comparable to those of a teenager, believability in the story, and explicit articulation of the mental condition at some point in the narrative (Monaghan 39). If teachers are cognizant of these criteria for

healthy and productive mental illness themed YAL, they can be confident their text selections will be useful for mental health education and stigma reduction.

The YAL texts selected for this thesis, *The Impossible Knife of Memory*, *Turtles All the Way Down*, *All the Bright Places*, and *Challenger Deep*, exhibit the traits specified above for a productive and empowering depiction of mental illness in YAL. These texts include depictions of counseling, use of medication, interactions with hospitals, the narrator as the sufferer or close friend or family member to the sufferer, and an overall positive outlook on life by the end. Moreover, all four narratives are relatable and accessible for a teenage audience, and the depictions of mental illness are realistic. Another common problem in many texts that depict mental illness is that the “stories are...told by people who have never experienced or seen mental illness for themselves, thereby perpetuating myths, misinformation, and damaging stereotypes” (Thaller 210). Shusterman, Anderson, Green, and Niven all have intimate experience with mental illness, either being sufferers themselves or having experienced mental illness through the experiences of close family and/or friends.

The Impossible Knife of Memory

Review of Novel and Connections to Mental Illness

Published in January 2014, *The Impossible Knife of Memory* by Laurie Halse Anderson is a novel that explores the effects of PTSD on an individual and his family. The text is a first-person narrative; the protagonist, 17-year-old Hayley Kincaid, details events that occur during her senior year of high school. While she is concerned with school and her friends, Hayley's largest daily obstacle is taking care of her father, Andy, who suffers from severe PTSD due to his four tours of duty in Iraq and Afghanistan. Throughout the novel, Hayley's father struggles with addiction issues and severe symptoms of PTSD, and Hayley cares for herself and her father while desperately trying to keep her circumstances hidden from her school and other authorities. While her father falls into a cycle of despair and substance abuse, Hayley attempts to have a normal life with her boyfriend, Finn, and control the chaos that occurs daily in her home. Finn deals with his own problems, as his sister abuses substances and takes advantage of his parents. While the narrative is told primarily through Hayley's voice, flashbacks dispersed throughout the text reveal Andy's experiences while on active duty. These flashbacks allow readers to sympathize with Andy and understand, to some degree, his thought processes.

The Impossible Knife of Memory measures at a 720 Lexile level, which is appropriate for readers aged 12-16. When paired with canonical texts in a structured curriculum, *The Impossible Knife of Memory* can be used for readers through 12th grade. The text is 416 pages, and although the quantitative measures show the text as easily digestible for teenagers, the mature themes may not be appropriate for younger

audiences. The text includes depictions of alcohol and marijuana use, as well as graphic scenes of battle. These depictions are appropriate for a high school audience as they do not encourage an exhibit the possible detrimental effects of substance or alcohol abuse, and it presents any graphic violence in small, digestible passages. It appears on the American Library Association's 2015 Best Fiction for Young Adults and the National Book Award's 2014 Long List for Young People's Literature.

Anderson herself endured events very similar to those experienced by the protagonist, Hayley, and these experiences assisted Anderson in presenting a realistic and riveting story. Anderson's father served in WWII and returned home with severe PTSD. Following WWII, there was little understanding of PTSD and virtually no assistance for returning soldiers. In an interview, Anderson states that "echoes of what he [her father] experienced in Dachau are still being passed down in our family" (qtd. in Lodge 2013). She notes that if she had a book like *The Impossible Knife of Memory* when she was a teenager, she would have experienced less confusion and exhibited more empathy for her father (qtd. in Lodge 2013). Not only did Anderson write this story for other struggling teens, but also for her childhood self. Anderson states that she wants the book to touch a wider audience than just veterans' children: she wants the text to help "kids from families dealing with substance abuse issues, chronic disease, bad divorces, or loss of their home" (qtd. in Lodge 2013). She states that she recognizes that literature, including *The Impossible Knife of Memory*, "makes sense of our lives and brings the world into our hearts," which she says is her goal when crafting texts for young adult and adult audiences alike (qtd. in Lodge 2013).

While the text depicts Andy's lack of control over his symptoms of PTSD, it also explores Hayley's struggles in navigating high school life with little parental support. In *The Impossible Knife of Memory*, Hayley momentarily considers taking pharmaceutical drugs to numb her pain, and, in contemplating this act, describes that:

her face in the mirror melted, morphed one centimeter at a time...she waited to see what or who she'd turn into. Her skin lightened. The freckles vanished...the eyes smudged like they were being wiped off with a fat pink eraser, and then they were gone too. The mirror was empty. (Anderson 184-185)

This moment, in which Hayley considers overdosing on prescription pills "to make the hurt go away," illustrates the devastating effects of secondhand trauma (Anderson 184). Hayley experiences dissociation from her sense of self, as described above, when a traumatic event occurs and when her emotions are unstable. At one point, she has a panic attack at a mall. When Finn confronts her, Hayley narrates that "the me of me curled into a dark corner in the back of my skull and some Hayley-bitch version I'd never seen before came out roaring" (Anderson 323). When Hayley sees her father through a window laying in a pool of blood on the living room floor, she describes herself: "a girl screamed" (Anderson 329). This disassociation illustrates that Hayley experiences multiple versions of herself, and she often feels like she loses control over autonomy and her emotions when she enters heightened states of emotion.

While Andy is the one with a diagnosed illness, Andy's trauma affects Hayley, and Hayley's narration "gives the reader a vivid sense of the anxiety and panic she feels in relation to her father as well as intrusive nature of her traumatic memories and thoughts" (Crenlin 2). Hayley experiences anxiety and practices methods her father has

taught her to calm anxiety. As she worries about her father's condition, Hayley says, "the gray closed in on me...I fought the gray with Dad's tricks: *say the alphabet. Count in Spanish. Picture a mountain...*it took a few minutes but I won" (Anderson 35). Hayley's learned coping methods suggest that at one time Andy was stable enough to help his daughter cope with her own emotions, although this Andy is far removed from the one in Hayley's narrative. Throughout the text, Haley expresses both anger and fear towards her father, and "these emotions seem to feed her anxiety; without knowing what kind of mood her dad will be in from day to day...she is frequently on alert and unsure of what to do to help him deal with his symptoms" (Richmond 123). Because of Hayley's lack of understanding about PTSD, her frustration grows because Andy does not seek help or improve; she does not understand why he still exhibits the symptoms of PTSD so many years after his military tours.

In texts that deal with trauma, as in our society, "the characters often hide or overcompensate for a parent's or a sibling's mental illness out of fear," especially when the characters fear being placed in foster care (Scrofano 17). These instances illustrate the complexity of the relationship between a sufferer of mental illness and their loved ones, especially if those loved ones are minors or children. While never explicitly explained in the text, the "Knife" in the novel's title represents Hayley's experiences and her struggle between past and present, as well as her struggles with her father and her situation. In this metaphor, "the knife seems to cut holes in the fabric between the present and the past, allowing painful memories to travel and encroach upon the present" (Crenlin 2). The reader cannot help but be drawn into Hayley's painful battle between being stuck in the

past and present, like her father, and moving forward as a young adult with hope for her future.

The text also brings to light issues of the lack of support for returning soldiers and the need for a more structured system to integrate these men and women back into civilian life. Throughout the narrative, Andy seeks and receives ineffectual help with this adjustment and his PTSD, especially from professionals. The narrative notes Andy's visits to psychiatrists who prescribe multiple medications, and that he seldom follows the psychiatrists' advice (Anderson 286). The Office for Veterans Affairs (VA) is depicted as ineffectual as well, providing inadequate support for Andy. In the novel, Andy receives from the VA "a note...that listed all the appointments he'd missed and 'strongly urged' him to call their office," advice that is of course not followed (Anderson 356). After a night of drinking that results in a bar fight, Andy is taken to a VA hospital to be treated for dehydration. While Trish, Andy's girlfriend, is at the hospital, we are told that "now it only took three months instead of six" to get a doctor's appointment (Anderson 356). Anderson uses the lack of support for returning soldiers, a major issue in the United States, as motif throughout the novel.

In an interview, Anderson says that "soldiers come home broken and we don't help them heal...there are 20 million American veterans alive today - think about how many children, grandchildren, and great-grandchildren that means" (qtd. in Lodge 2013). Anderson brings to light a crucial issue that must be addressed not only for the benefit of sufferers but also for all those who interact with the sufferers, whether family, friends, or community members. This novel illustrates the devastating implications of former soldiers not receiving the care or monitoring they need after their return, leading to

detrimental effects on family members and loved ones. The novel's presentation of this motif can start a classroom discussion, resulting in students becoming more educated not only about substance abuse but also about PTSD and veterans' needs, and thus becoming more sensitive and socially aware.

General education about PTSD and the effects of this illness on sufferers and loved ones are largely absent from popular discourse (Crenlin 2). This narrative is particularly useful for raising awareness of this issue "because of its discussion of why individuals dealing with PTSD, unemployment, and the commonly concurrent substance use disorder may often refuse to seek help" (2).

Since the novel explores substance use, anxiety, and the struggles that accompany parent-child relationships, the issues raised in *The Impossible Knife of Memory* are applicable to most students. In the text, Hayley attempts to hide the instability of her home life when interacting with friends and teachers, which is a common experience for many teenagers (A. Corbett 93). The text illustrates "how little a child (even one who is 18) can control a parent's choices to seek treatment, take medication, or acknowledge he has a mental illness" (Richmond 126). *The Impossible Knife of Memory* illustrates that everyone battles with personal or familial issues, and compassion is a vital component for every interaction in life.

Instructional Strategies

The Impossible Knife of Memory can be used in the English classroom in multiple ways. A cross-curricular strategy would include pairing the text with informational texts regarding the Afghanistan and Iraq wars, providing background for understanding Andy's tour of duty experiences. An ideal canonical pairing for this text is Tim O'Brein's

The Things They Carried, or an excerpt from this novel. Other pairings can include war poetry such as John McCrae's "In Flanders Field," Wilfred Owen's "Dulce et Decorum Est," Siegfried Sassoon's "Dreamers," Rupert Brooke's "The Soldier," Philip Larkin's "MCMXIV," Yusef Komunyakaa's "Facing It," and Brian Turner's "Eulogy," which all can be accessed online. Providing students with poetry selections that span through World War One, World War Two, the Vietnam war, and the Iraq war, as listed above, allows them to see the connection throughout time of similar themes and motifs. After reading one or more of these poems, students can write their own first-person poems in their own voices, imagining the effects of war on them, or in the voices of soldiers returned from battle, as Andy does in the novel.

Students can research Veterans Affairs, exploring their founding, their services, and current controversies surrounding this governmental office. Students can use their research to develop a project on the VA to educate classmates and the community on veterans' needs and to make recommendations on how the organization can improve services to better serve all veterans. Or, students can write an argumentative paper defending the VA and its methods. Students can explore the disconnect between the institutions in which mental illness are supposed to be addressed, such as the VA, and the illness itself.

If students are unfamiliar with military life, students can research the needs of active duty soldiers and veterans and collect items to hold a fundraiser for them. Most communities have military recruitment offices and veterans' organizations who can provide a guest speaker, as well. Students can write letters to active duty members or veterans, developing literacy skills while making an impact for both those currently

serving and those now back home. Students can submit letters of gratitude and support through organizations such as A Million Thanks, Operation Gratitude, and Operation We Are Here, information about which is easily accessible online.

Students can play a video game called *Life is Strange*, which deals with a young woman struggling with depression, anxiety, and loneliness. The game has many parallels to this story, and the first chapter is free, available on iOS systems. Students can also play a game called *Depression Quest*, which is a free interactive fiction game played online. In this game, players live through a series of scenarios and must make every day decisions to manage relationships, jobs, and treatments. Both of these games help players to understand the everyday difficulties that accompany living with mental illness.

The Impossible Knife of Memory is an appropriate yet challenging and insightful text that can be integrated into any high school English classroom. Along with the motifs of mental illness, the text addresses the challenges of a 17-year-old high schooler struggling to enjoy her senior year, navigate her first love, and plan for her future. The protagonist has the additional challenge of having to keep her parent from hurting himself and those around him. She is haunted by her memories of a tumultuous childhood and lives in fear of her family being separated, despite deep trouble in that family, all of which are motifs that will engage most teens.

Turtles All the Way Down

Review of Novel and Connections to Mental Illness

Published in 2017, John Green's *Turtles All the Way Down* is a young adult novel narrated by protagonist Aza Holmes, a 16-year-old who suffers from severe Obsessive-Compulsive Disorder (OCD) and anxiety. Her obsessive "thought spirals," as she describes the symptoms of her disorder, make it difficult for her to function as a daughter, friend and student (Green 8). These "thought spirals" focus on one main concern, whether a blister on Aza's finger is infected with *Clostridium difficile*, or C. diff. When a billionaire goes missing and a hundred-thousand-dollar reward is offered for knowledge of his whereabouts, Aza attempts to become a detective. Along the way, she develops a relationship with the billionaire's son, Davis. Her illness hampers the progress of her investigation and her relationship with Davis. Throughout the novel, Aza's rational thoughts are interrupted by intrusive thoughts, which are shown in italics. These competing voices provide the reader with a representation of the symptoms of Aza's conditions. Aza's actions appear logical to her, but she feels out of control in her own mind and wants autonomy over her thoughts. Throughout the text, Green depicts Aza's OCD as a natural element in the narrative without perpetuating stigma or a need for a "cure" as an outcome.

Turtles All the Way Down measures at an 840 Lexile level and is composed of 288 pages. While the text contains some instances of explicit language, there is little controversial content in the novel. The text deals with complex ideas about self and autonomy, so it would be best received by students in grades 9-12. The text was in the top spot on the ALA's Teen Top Pick List of 2018. Because of the popularity of Green's

The Fault in Our Stars and *Looking for Alaska*, *Turtles All the Way Down* was highly anticipated, and young readers have gravitated to this novel as well. Green has become a celebrity, and his activities in digital media, particularly in podcasts and YouTube lectures, have made his novels more relevant to adolescents. The novel is ideal for the classroom because of its intricate narrative, extensive use of figurative language, and complexity of ideas.

As Anderson does, John Green speaks from a place of experience regarding mental illness, as he has suffered from OCD and severe anxiety since childhood (Alter). Green drew from his own experiences when crafting the novel, and he explains that he understands “being accessible and ‘being real’ does not have to come at the sacrifice of literary excellence,” a philosophy clearly exhibited in *Turtles All the Way Down* (Barkroll and Scherff 67). When speaking about his inspiration for the novel, Green notes, “I couldn’t escape the spiral of my thoughts, and I felt like they were coming from the outside” (Alter). Through the protagonist in the novel, Green explores the failures of language to describe emotions that often accompany mental illness.

Throughout the narrative, Aza desperately wants to be involved in the lives of those around her, although her OCD often causes her to disengage. In an interview, Green said, “I wanted to write a detective story where the plot keeps getting interrupted by this person’s ability to live in the world in the way that she wants to” (McClusky). Aza struggles with autonomy over her own thoughts, which torment her, and uses the term “thought spirals” as a way to explain her increasingly intrusive thoughts that stimulate panic and a feeling of confinement. The “spirals” do not stop; until she adopts healthier ways to cope with her illness, her thoughts invade until she quiets her mind through self-

harm, such as acts of reopening her wound or drinking hand sanitizer (Green 130). Aza's lowest point of mental instability occurs when she learns of the "gut-brain informational cycle" (209). After reading about this concept, she concludes that "bacteria [are] affecting my thinking," and the italicized intrusive voice in her mind notes, "*maybe your thinking's infected*" (209). This thought terrifies Aza, as she believes that her intrusive thoughts strip her of autonomy. At the conclusion of this scene, Aza cries out, "forged in the smith of someone else's soul. Please just let me out. Whoever is authoring me, let me up out of this. Anything to be out of this. But I couldn't get out" (211). This scene encompasses the never-ending battle Aza faces between her rational voice and the diseased voice which she recognizes is both a part of her and not.

Once she surrenders to her intrusive thoughts, Aza ascends out of her "thought spiral" and returns to a rational frame of mind, referring to this part of the process as "[swimming] up out of the depths" (Green 6). In counseling Aza about her intrusive thought patterns, her psychiatrist, Dr. Singh, asks Aza to "think of a rainbow. It's one arc of light, but also seven differently colored arcs of light" (87). In other words, Dr. Singh asks Aza to think of herself as many different parts of an integrated whole to better understand the influence of mental illness on her being. Dr. Singh tells Aza, "you often try to understand your experience through metaphor, Aza; It's like a demon inside of you; you'll call your consciousness a bus, or a prison cell, or a spiral, or a whirlpool, or a loop, or a – I think you once called it a scribbled circle" (88). Because the feelings associated with mental illness cannot be described in concrete terms, Aza must turn to figurative language to understand and explains what occurs in her mind. The title itself is an example of this, as the "notion of a never-ending stack of turtles provides an artful,

memorable way to envision a line of reasoning that goes on and on without end, spiraling down with no relief of escape” (Castellitto 2017). The complex figurative language infused throughout the text provides students with intricate and relatable ways to think about mental illness and the ways in which brains work.

Individuals battling mental illnesses such as OCD, anxiety, and depression, often face a crisis of identity and self-control, and sufferers may feel that they have little control over their thoughts. Aza’s questioning of autonomy is a thought process shared by many teenagers, and the complexity of her narrative offers young readers a challenge that fulfills the expectations for complex texts in the secondary classroom. Although Aza struggles with her sense of self and autonomous will throughout the text, she concludes, “I, a singular proper noun, would go on, if always in a conditional tense” (Green 285). While Aza clearly states she will never be “cured,” she recognizes that her selfhood contains a myriad of pluralities, and these pluralities will always unify to become one “I.” Aza’s realization helps young readers to cope with the process of developing into and accepting oneself.

Near the end of the novel, Aza achieves a degree of control over her “thought spirals” with medication, although she is wary that the medication is controlling her. The idea of her thoughts being controlled through medication makes her further question the idea of selfhood, she says, “there is something intensely weird and upsetting about the notion that you can only become yourself by ingesting a medication that changes your self” (165). For Aza, the medication that helps her order the chaos in her mind simultaneously threatens her sense of identity and autonomy, and this fear of medication that alters one’s mental state is a legitimate concern for many. On the other hand, for people like Aza, medication is necessary to maintain

normalcy and stability. She does note that her medication makes her feel “exceptionally groggy” to the point that she only has the energy to “[stare] at the blank [television] screen” (133). Green depicts the negative effects of medication: while it releases her from a state of panic, it also puts her in a physical and mental stupor. This depiction helps young readers to cope with the difficulties of medication and understand the struggles of family and friends in regard to medication.

By the end of the narrative, Aza recognizes that she has hope for order in her life, although it will come cyclically as it always has; when imagining her future self, she notes, “that girl will go on...have children and love them, that despite loving them she would get too sick to care for them, be hospitalized, get better, and then get sick again” (285). Aza finds comfort in the cyclical revolutions of her mental illness; only through identifying this pattern does she understand the concept of order over chaos. Young readers might fear for their future and how they will cope past high school, so Aza’s optimistic yet realistic view of her future life serves as a positive model for teenagers.

Despite Aza’s articulated inability to effectively describe her pain, readers recognize her experience through the use of metaphor. At one point, Aza asserts that “pain is the opposite of language” (89). Dr. Singh then quotes Virginia Woolf, who said, “English, which can express the thoughts of Hamlet and the tragedy of Lear, has no words for the shiver and the headache...let a sufferer try to describe a pain in his head to a doctor and language at once runs dry” (89). Pain is mysterious and intangible, as even the sufferer does not know from where it stems at times. This deficiency in language is detrimental to not only Aza but those around her. Dr. Singh notes, “we cannot know what we cannot name. And so we assume it isn’t real” (89). Many individuals are not able to understand the struggles of those with mental illness. Dr. Singh points out that the

terms “crazy” and “chronic pain” do not “connote the courage people in such pains exemplify” (89). Green, through Aza and Dr. Singh, uses figurative language to represent what it is like to battle mental illness and stigmatization.

Near the end of the novel, Aza notes the importance of not viewing her illness in the past tense, stating, “I would always be like this, always have this within me...my self and the disease were knotted together for life” (280). This is a crucial moment in the novel because it presents hope for the future. When dealing with mental illness, novels often portray recovery as a binary, which is an unrealistic and harmful model (Thaller 84-85). Rather, one expert asserts that texts should emphasize recovery as a lifelong process that is specialized for each person; through reading such perspectives, students understand that “any progress towards betterment is significant” (85). Diagnosis should be seen as a positive resolution of the narrative (Scrofano 18). Aza envisions an optimistic yet realistic future for herself. The healthy depiction of mental illness, exploration of language, and emphasis on empathy in this text would inspire engaging and important conversations in the English classroom.

Instructional Strategies

Turtles All the Way Down can be integrated into a high school English classroom in many ways. While the text is ideal for an exploration into metaphorical language and character development, there are a myriad of other factors that are valuable to investigate. One unique instance in the text is when Davis’ father, the billionaire, gives all his money to a Tuatara research fund in his will. The Tuatara is a rare reptile native to New Zealand and not widely known. Students can investigate the unique characteristics of the Tuatara and why Green chose this animal for this plotline. Students can create a visual organizer of the metaphors Aza uses for

her mental illness, paired with a rational on the use of these vehicles for the common tenor. Students can also practice blackout poetry with the passages in which Aza's struggles with her intrusive thoughts, emphasizing the positive words. Students can watch the original Zoloft commercial, which depicts depression as perpetually living under a rain cloud, and discuss the representations of anxiety and depression in a medium created for the general public.

Fanfiction is popular among educators and students alike and achieves several language arts, reading, and writing outcomes when integrated into a curriculum. In this novel, Aza's best friend, Daisy, is a "kind of famous writer of Star Wars fan fiction" (Green 96). She uses the personalities of her friends, including Aza, in her Star Wars characters. Students can write fanfiction that extends or changes the climax and resolution of *Turtles All the Way Down*. Students can write fanfiction using another well-known story, using the personality traits and characteristics of Aza, Daisy, or Davis, an adaptation of what Daisy does in her fanfiction. Students can track the progression of Aza's intrusive thoughts in the rising and falling action of the novel. Doing so would allow students to track the development of Aza's illness throughout the text, furthering their understanding of the tumultuous journey of a mental illness sufferer. Students can also consider the functions of fanfiction and how their voices can be used to alter or extend the storyline. These activities can lead to a conversation about why fanfiction, and possibly YAL, is disreputable and whether this is an appropriate label.

There are multiple options for canonical pairings, both in poetry and prose. Any poem that depicts the persona's struggle over his or her autonomy would be appropriate. One poem is Emily Dickinson's "I Felt a Funeral in My Brain." Because Dickinson's poem tracks the persona's descent into insanity, students can compare the persona's description of the experience to Aza's struggles. Students can read Sylvia Plath's "Tulips," which depicts the persona's feeling

of numbness and experience in a hospital. Students can read Edgar Allan Poe's "The Tell-Tale Heart," which uses literary devices like dashes to communicate the narrator's mental illness.

Turtles All the Way Down can be paralleled with Charlotte Perkins Gilman's "The Yellow Wall-Paper:" students can compare the narrator's experience of mental deterioration with that of Aza. In both texts, readers gain an insight into the thoughts and feelings of the narrators, which can be used in a comparative writing assignment or activity. Students can compare treatment methods in "The Yellow Wall-Paper" and *Turtles*, researching the developments of mental illness treatment over time.

Aza's first-person narrative allows a detailed and complex view into the difficulty of living with OCD and anxiety. While reading the novel, students can follow Aza's descent into her vicious "thought spirals," observe her struggle for autonomy, and sympathize with her as she tries to live the life of a normal teenager. The text has great value because of its use of complex images and figurative language. The novel is also important for its discussion of mental illness: it provides authentic images of living with a mental illness and a hopeful yet realistic depiction of diagnosis and long-term treatment. Integrating this text into the classroom will ensure that students understand the internal battle for sufferers of OCD and anxiety, increasing students' empathy, ultimately leading to stigma reduction.

All the Bright Places

Review of Novel and Connections to Mental Illness

All the Bright Places is a novel by Jennifer Niven published in 2015. The narrative is in first-person, but it switches between the points of view of two characters, Violet and Theodore, who goes by Finch. Both characters are seniors in high school, and they meet atop the school's bell tower, both contemplating committing suicide. Violet is a seemingly stereotypical popular girl with a seemingly perfect life, but she experiences guilt and grief since the death of her older sister, Eleanor, one year prior. Finch has always been labeled "a freak" by classmates and obsesses about death. After this initial meeting, Finch volunteers Violet and himself to work on a semester-long school project visiting monuments around Indiana. Through their "wanderings," Finch teaches Violet how to stray out of the comfort zone of her community and interact with those they meet along the way. In an intriguing plot twist, Finch's mental condition progressively deteriorates as Violet's improves. The two fall in love, and the school project turns into an epic adventure to visit all the unusual places in Indiana before they graduate. Despite his growing affinity for Violet, Finch continues to deal with dark thoughts and attempts to avoid what he calls "the great sleep," both symptoms of his undiagnosed bipolar disorder.

Ultimately, after a fight with Violet, the overwhelming sense that he will forever disappoint people in his life causes Finch to disappear. Nobody but Violet cares, and Violet attempts to process her heartbreak. After sending cryptic messages to his friends and family, Finch commits suicide. After finding him and identifying the body, Violet embarks on a journey to finish their school project and come to terms with Finch's death.

She discovers that he laid out a map and visited each place in the weeks preceding his death, leaving a small mark of his presence at every monument. The novel concludes on a bittersweet note, as Violet mourns the loss of her sister and Finch while making plans to go to college and continuing to appreciate life as her time with Finch had taught her.

All the Bright Places measures at an 830 Lexile level and is 378 pages. The text deals with the controversial subjects of suicide, drug use, and sex. However, all three sensitive issues are presented appropriately and with sensitivity. The text has been very well received, and a major motion picture based on the book will be released in 2019. The novel won the GoodReads Choice Award for Best Young Adult Fiction of 2015 and appeared on YALSA's Teens Top Ten Pick List of 2016.

There has been parental and administrative pushback against this novel in various school districts. Paula S. Berger at the University of Chicago, argues, though, that "by approaching this disturbing topic within the safe confines of a novel, the adolescent reader, even if he or she identifies closely with any of the characters, can maintain a discrete distance while absorbing potentially valuable information" (14). The novel is not, at any point, "pro-suicide." Because Violet's first-person narrative continues after Finch's ends, readers experience the despair that Finch's loved ones, and especially the protagonist Violet, which whom they will sympathize, endure after his death, and the novel concludes with the message that suicide is not a solution to any person's problems. Berger states that "the novel can show [suicidal teenagers] that they are neither unique nor alone...others have shared these same feelings and have found constructive ways to handle them" (14-15). According to the American Foundation for Suicide Prevention, suicide is the 10th leading cause of death in the US, and in 2017, adolescents aged 15-24

had a suicide rate of 14.46 per 100,000 (“Suicide Statistics”). Berger makes clear that, while suicide can be a sensitive topic in the classroom, discussion on the topic within a productive and safe environment is of value for teens. Teachers should provide trigger warnings, however, on these topics. If students feel uncomfortable with such topics, it is important to bring in a licensed counselor.

Niven presents a realistic image of suicide because she has personal experience with the topic. In an author note, Niven states that her “great-grandfather died of a self-inflicted gunshot wound,” and his family felt “silently judged and, to some extent, ostracized,” as suicide was deemed shameful (“Author’s Note”). Niven also tells readers that the novel was inspired by her experience of finding the boy she loved after he committed suicide, much like Violet’s experience. Niven addresses the stigma and shame associated with suicide, stating that “people rarely bring flowers to a suicide” (“Author’s Note”). Niven states that the greatest barrier to mental illness diagnosis is that “the person suffering symptoms is too ashamed to speak up” or “loved ones either fail or choose not to recognize the signs” (“Author’s Note”). Niven refers to herself as a “Survivor of Suicide” and says that she hopes this text will raise awareness for sufferers and loved ones. Much like Violet, Niven knows what it feels like to lose someone to suicide, and she recognizes the detrimental effects of mental illness stigma on sufferers and their loved ones. *All the Bright Places* includes stunningly realistic depictions of pain and suffering but also of love and hope, all of which can be useful for sensitive discussions in high school English classes.

Although Finch’s mental illness goes largely undiagnosed in the text, Niven references bipolar disorder in the note, and Mr. Embry, the school counselor, recognizes

Finch as having bipolar disorder, also known as manic depression, characterized by “extreme shifts in mood or energy” (Niven 271). Much of Finch’s struggle is trying not to be labeled and thus stigmatized. When he is in middle school, he makes the “mistake” of telling a friend about his splitting headaches and other symptoms, and he is characterized as “officially Theodore Freak” for the rest of his school years (141). He isolates himself from his peers to avoid being bullied for his differences. Finch learns that “the best thing to do is say nothing about what you’re really thinking” to peers, family members, and school officials (144). Although Finch clearly expresses that he does not want to suffer from his extreme mood swings and intrusive thoughts, stating “I hate them,” his fear of being stigmatized and the lack of support from others dissuades him from seeking help (294).

In fact, throughout the text, Finch says that he is worried about being labeled and stigmatized. At one point, he cries out, “I’m not a compilation of symptoms. Not a casualty of shitty parents and an even shittier chemical makeup. Not a problem. Not a diagnosis. Not an illness. Not something to be rescued. I’m a person” (307). This outcry illustrates Finch’s desire to be treated as a complex, sentient person who is struggling with an illness, not solely as symptoms in need of a cure. He recognizes the difference between physical illnesses and mental illnesses, stating, “I want to get away from the stigma they all clearly feel just because they have an illness of the mind as opposed to, say, an illness of the lungs or blood. I want to get away from all the labels,” as labels “explain people away as illnesses” (284; 272). This fear of being categorized is what deters Finch from returning to a support group he attends once. While Violet is

understanding and acknowledges his individuality, Finch feels he is defined by his illness and thus not treated as a person.

Other than Violet, few characters in the novel show sympathy for Finch or take his symptoms seriously, mostly due to the stigma associated with mental illness that Niven depicts effectively. When Finch is descending into an emotional vortex, a friend at school questions, “what is wrong with you? You are seriously bringing me down” (267). His father is physically and verbally abusive, and his mother is emotionally and mentally absent a majority of the time. Finch notes, “in this house there’s no such thing as being sick unless you can measure it with a thermometer under the tongue” (185). He often wishes “for measles or smallpox or some other recognizable disease just to make it simple for me and also for them,” as “people are a lot more sympathetic if they can see you hurting” (15-16). Even after Finch is expelled for fighting one of his bullies, teachers and administrators treat him as “just another troublemaker who’s been expelled” (317). While his counselor is aware that Finch struggles with mental illness, the administrators and teachers do not try to reach out to Finch or his parents.

After his suicide, school officials imply that his death was a result of drugs, refusing to address both mental illness and the officials’ roles in ignoring Finch’s symptoms. The school counselor tells Violet that “he was a good, screwed-up kid who should have had more help” (347). During this conversation, the counselor, Mr. Embry, brings up an important point for both Violet and young readers; Mr. Embry notes that he feels responsible for Finch’s death, but he knows that he is not responsible. Mr. Embry states, “I did what I felt I could do. Could I have done more? Possibly. Yes. We can always do more. It’s a tough question to answer, and, ultimately, a pointless one to ask”

(347). Violet too blames herself for not doing more. As Mr. Embry illustrates, it is important for survivors of suicide to recognize that they cannot control another person's actions, and no one person can be responsible for saving another.

Despite this conversation with Mr. Embry, Violet revisits the memories she created with Finch, attempting to understand where and when she could have acted differently to save him. At first, she states that she is “angry at him for leaving without a word, angry at myself for being so easy to leave and for not being enough to make him want to stick around” (323). At one point, she writes a “Letter to Someone Who Committed Suicide,” in which the final lines conclude, “I’ll never forgive you for leaving me. I just wish you could forgive me. You saved my life...why couldn’t I save yours?” (353). Through these exercises, Violet gradually recognizes that Finch’s symptoms did in fact take over his life, though he wanted to stay with Violet. She understands that “maybe Finch didn’t feel like he had a choice” (341), saying, “what a terrible feeling to love someone and not be able to help them” (349). Violet ultimately understands that she did all she could to aid Finch, and he required more than her support; he needed counseling, medication, and familial encouragement to overcome the bipolar disorder. Through Violet’s point of view, readers learn the devastating effects of stigma, lack of mental health education, and avoidance of mental health issues by adults at home and at school.

After reaching this understanding, Violet grows angry with Finch’s parents and the school for denying their neglect and claiming his death was not a suicide, noting sarcastically, “we’re free to mourn him [Finch] out in the open in a normal, healthy, unstigmatized way. No need to be ashamed or embarrassed since suicide isn’t involved” (Niven 346-347). This protagonist’s voice is important for young readers, as Violet

demonstrates the need for transparency and advocacy when speaking about mental health and mental illness sufferers. Violet concludes, regarding her relationship with Finch and his death, that “it’s good and it’s bad and it hurts, but I like thinking about him. If I think about him, he won’t be completely gone either. Just because they’re dead [Finch and Eleanor], they don’t have to be. And neither do we” (361). This optimistic resolution reminds readers that it is healthy to think about those who have died, and remembering them will preserve their memory, and that those memories should be celebrated. Violet learns to move on, and readers gain a new understanding of the importance of support, mental health education, and transparency.

Instructional Strategies

Because the text is very complex in its use of “multiple narrators, shifting perspectives...[and] varied viewpoints on personal and social problems,” it would have great merit in an English classroom despite its controversial content (Ivey and Johnston 257). Throughout the text, Finch and Violet use sticky notes in many ways. Finch keeps a wall of sticky notes containing positive thoughts he has, whether they be quotations, song lyrics, or words he hears and enjoys. Finch writes negative words or ideas on sticky notes and rips them up. Teachers can implement a “sticky note” wall where students contribute inspiring or positive words, quotations, and ideas throughout the unit or school year. Teachers can have a small bucket or container into which students put the remains of ripped-up sticky notes. Students can contribute these at their own will or complete a set number of sticky notes per class period. The result would be a colorful wall of positivity and inspiration. Students can use sticky notes to annotate their texts for plot, character development, or other literary elements, and use these notes for class discussion. Students

can read informational texts about the founders of Post-It Notes, Arthur Fry and Spencer Silver, exploring entrepreneurship and the impact of Post-It notes on society (Ward 65).

This novel suggests many creative writing opportunities, particularly ones on point of view. Students can rewrite one of the chapters, or a part thereof, from the point of view of another character; it would be interesting to see the opening bell tower episode from the perspective from a minor character who observes Finch's and Violet's interaction from afar. Students can learn about bipolar disorder and treatment and rewrite an alternative ending to the text in which Finch receives proper treatment and survives. Students can craft an omitted scene that brings closure to Violet or saves Finch, experimenting with different forms of narrative.

In one chapter, Finch's younger sister collects books and "take[s] out all the mean parts and the bad words," which is known as blackout poetry (Niven 165). Students or teachers can bring in popular magazines, and students can remove or black out demeaning and otherwise negative language. This exercise shows students how toxic popular culture can be. Students can make found poetry. Students can bring in a page from a newspaper or magazine, novel, or any other text and practice removing words either by cutting them out or blacking out the text around the desired words. This exercise is particularly valuable if students bring in texts that encourage stigma, misconceptions, and/or negative and harmful perceptions of mental illness. Students can take hurtful or demeaning texts and create inspiring and productive found poetry from them. Students can also find positive examples of mental illness perceptions in popular media and examine these.

Students can design a new book cover or movie poster highlighting plot elements, motifs, or themes of the novel. Students can create a trailer for the upcoming film. Students can create a collage of five pivotal moments from the book, using photos, magazine clippings, original artwork, song lyrics, or texts.

. In the novel, Violet creates a website called *Germ*, and Niven maintains this website in real life. Students can create their own website with similar content as *Germ*. The text includes a blog from Violet's point of view; students can create a blog from Finch's or another character's point of view. It would be intriguing to read a blog written by Finch in the weeks leading up to his death while he is "wandering," and students can practice adopting the language Finch uses for his mental illness. Students can create Fandoms, in which they host a wiki page. Other students can contribute to each other's wikis. Media and technological literacy are important for teenagers, so it is useful to provide them with assignments to improve these skills.

The novel's inclusion of road trips and "wandering" can be inspirational for teachers while designing assessments. Students can create a map of a memorable road trip or one that they would like to make. They can create an ideal road trip, complete with descriptions of activities at each stop. Students can draw a map of their route and annotate particular areas of interest using any number of media. By displaying these artifacts, teachers would see students through a different lens and better understand their dreams and challenges. Students can share their work by creating brochures enticing other teens to visit places from Finch and Violet's road trip or from their real or imagined road trips. A school's community can be the focus of a project in which students create a detailed map of the "bright places" in their own school and community and can include

photographs, illustrations, clippings, artifacts, dates, and symbols. Teachers can set up Finch's and Violet's wanderings as a tour, placing photographs, excerpts, and artifacts hidden around the school. Students would travel around the school, creating a map of locations and artifacts. Students can embark on a local wandering project, in which they explore the "bright places" of their community and write about them. Cross-curricular opportunities can include incorporating a history element into a "wandering" project.

There are many possibilities for canonical pairings with *All the Bright Places*. In the novel, Violet and Finch exchange lines from Virginia's Woolf's poetry and suicide note. The final message that Finch sends Violet before his death is a conglomeration of lines spanning multiple pages from *The Waves* by Virginia Woolf. This message states,

The words are written in *The Waves*: "If that blue could stay for ever; if that hole could remain for ever; if this moment could stay for ever...I feel myself shining in the dark...I am arrayed. I am prepared. This is the momentary pause; the dark moment. The fiddlers have lifted their bows...This is my calling. This is my world. All is decided and ready...I am rooted, but I flow... 'Come,' I say, 'come.'" (328)

In this final message, Finch makes a found poem by combining lines from multiple pages. Students can read the excerpt from which these lines derive and explore why Finch would choose these specific lines. Or, they can complete a close analysis of these lines and link them to Finch's and Violet's relationship, or to a key theme in the novel.

This text can be paired with Sylvia Plath's "Lady Lazarus": students would explore the multiplicity of the self and the language of regeneration in Plath's poem and compare these depictions to the multiple selves that Finch exhibits. Students can read

Edwin Arlington Robinson's "Richard Cory," which depicts a man who is externally happy but commits suicide. Students can compare this character to Finch in the disconnect between internal feelings and appearance. *All the Bright Places* can be paired with *Hamlet*, and students can explore the stigma attached to Ophelia's suicide and Gertrude's refusal to admit that Ophelia's death is a suicide, seen especially in Gertrude's speech in Act 4.7.

Students might read poetry by or about survivors of suicide that reinforces hope and resilience; students should be presented with poetry and prose that show suicide not as an end but as something to be overcome. To find poetry and stories of hope, teachers can visit websites like Suicide: Finding Hope and SAVE: Suicide Awareness Voices of Education.

Although conversations about suicide can be difficult in a classroom environment, Finch's story illustrates why they are necessary. If teachers present life-affirming lessons about suicide, students will gain a level of comfort when addressing this issue and gain resources and tools to help someone in a similar situation. By addressing these issues in the classroom, students will be better equipped to deal with the numerous topics that surround suicide, increasing understanding and decreasing stigma.

Barbara Ward, author of "Finding Hope and Resilience in Life's Bright Places: Helping Adolescents Face Life's Challenges," wonders whether "there is any danger in encouraging teen readers to read books like this that seem to say, in part, that two is better than one or that we need someone else to help us find our way...can we not be the heroes of our own story?" (66). While Ward makes a strong argument about independence and autonomy, it is important for readers to see that those suffering from

mental illness often cannot save themselves; they need support, counseling, and sometimes medication. *All the Bright Places* presents a painfully honest story of what happens when a struggling adolescent is overlooked by authoritative figures. Although Finch cannot save his own life, he manages to save Violet and teach her things that help her to thrive. While the text deals with sensitive topics, it has a crucial message about the importance of mental illness awareness and support, especially for adolescents. The value of the text outweighs potential controversy. *All the Bright Places* is a good choice for a high school English classroom.

Challenger Deep

Review of Novel and Connections to Mental Illness

Challenger Deep, published in 2015, is a novel by Neal Shusterman. The first-person narrative details the descent of the protagonist, Caden Bosch, into mental instability due to schizophrenia. The narrative tracks his transition from intermittent delusions and paranoia to severe disability and time in a juvenile mental health facility. In his sustained delusion, Caden is on a pirate ship headed for the deepest part of The Mariana Trench, Challenger Deep. He struggles to discern real world from his internal reality, often slipping in and out of awareness of his physical surroundings.

The closer the ship and crew in his delusion get to Challenger Deep, the more Caden suffers in the real world. The people he meets and his experiences at the hospital are subconsciously transcribed into his delusion: every character on the ship represents a person at the hospital. Despite slowly making progress, Caden has multiple setbacks: he has adverse reactions to his medicine, his love interest is released from the hospital, and his roommate attempts suicide. He gradually comes to understand that the ship is a metaphor for his mental health; the more he gives in to his delusions and allows himself to engage with the world of the ship, the more his mental health deteriorates. He finally decides to reject engagement with the ship, which allows him to improve enough to be released from the hospital. At the conclusion of the novel, Caden recognizes that he will always struggle with the pull of the ship and his delusions, but he feels he has the medication, support, and tools necessary to remain in a state of mental stability.

Challenger Deep measures at an 800 Lexile level and contains 308 pages. Since its release in 2015, *Challenger Deep* has received much acclaim. It won both the National

Book Award for Young People's Literature in 2015 and the Golden Kite Award for Fiction in 2016. While it can be read in middle schools, "experiencing Caden's movements back and forth between the two [reality and fantasy] complicates understanding of *Challenger Deep* for many adolescent readers," so the novel would be more suited for high school readers (Richmond 35). While there is no inappropriate language in the text and no mention of non-pharmaceutical drug use, alcohol use, or sexual encounters, the novel does describe an instance when Caden's roommate, Hal, attempts suicide with the use of a pencil sharpener blade. This event is not explained in detail nor is described graphically, so it should not be controversial in the classroom environment. Also, the text suggests that Hal survives and continues to seek treatment.

Shusterman's depictions of schizophrenia are realistic: his son was diagnosed with schizophrenia as a teenager and Shusterman claims that no part of the text is fiction ("Author's Note"). In reference to his son's journey, Shusterman says, "I watched as someone I loved journeyed to the deep, and I felt powerless to stop the descent" ("Author's Note"). While his son did find the right balance of medication and therapy to lead a somewhat normal life, Shusterman's closest childhood friend took his life as a result of schizophrenia, so Shusterman has much personal investment in educating people about the illness. Shusterman says that the artwork presented in the novel includes his son's drawings and sketches from his deepest point of descent, and some of his son's poetry is woven into the text as well, spoken by the protagonist's friend Hal. Shusterman states that he hopes *Challenger Deep* "will comfort those who have been there, letting them know that they are not alone" and help others to develop empathy for mental illness sufferers, allowing readers to understand "what it's like to sail in the dark, unpredictable

waters of mental illness” (“Author’s Note”). *Challenger Deep* flourishes in its aim to provide an egress into the mind of a schizophrenic individual, as readers understand and sympathize with Caden throughout the text. Shusterman’s personal experiences give the book authenticity and make it especially valuable.

At the beginning of the narrative, it is hard for readers to discern the difference between Caden’s imagined reality and his real life. He switches between explanations of events on the ship and events in his daily life seamlessly, and the narrative intentionally confuses readers. Throughout the text, Caden experiences “racing and disorganized thoughts, an urgent need to pace or walk around, auditory and visual hallucinations, and paranoia” (Richmond 35). He worries that his classmates are trying to kill him, and at one point he believes that his mom is just pretending to speak to his grandmother; instead, she is “talking to someone else, maybe about me, and maybe using codewords” (Shusterman 11). While at school, he concludes that his classmates drained his phone battery so he cannot warn his family of their planned attack (102). When he sees street signs, he believes the signs are giving him instructions (86). He expresses himself through abstract artwork because “words are completely ineffective” (70), and he has “an urgent need to see where the lines are taking [him]” (30). Once he enters the psychiatric hospital, the narrative becomes clearer, and readers are able to discern his shifts between his imagined reality and the hospital.

While reading the sections set in the hospital, readers recognize the link between Caden’s ship life and his real life, and the role of the ship as a metaphor. While getting a blood pressure reading, Caden believes that his “whole arm is wedged into the crook of a guillotine,” and he convinces himself that the doctor cut off his arm until he realizes his

arm is attached and unharmed (150). Caden describes his medication as a cocktail, saying, “the brew bubbles red and yellow, but the colors do not blend. My cocktail is a lava lamp” (45). Gradually, readers recognize life events coded within Caden’s narrative of experiences on the ship, and in this way gain insight into how his mind works. When Caden has an adverse reaction to a new medication, he says that “my brain escapes through my left nostril and goes feral” (196). Caden has no recollection of his behavior in the real world or those around him, describing the experience as being “Elsewhere” (200).

Readers observe Caden’s difficulties with medication and finding the correct doses throughout the novel. For his first few days in the hospital, Caden can only speak in a “medicated slur” (138), and he describes himself as being “slowly devoured” by the “venom” of medication (69). He goes back and forth contemplating whether his medications help or hinder him, describing these emotions as “waxing and waning like a tide, both toxic and healing at the same time” (154). While Caden begins to recognize that “the medication...may actually be working,” in his mind the captain of the ship persuades him to store the pills in his cheeks and spit them out later (243). The captain convinces Caden that if he stops taking medication, his “enlightenment will be sweeter than its [the medication] poison intoxication” (247). Ultimately, after descending to the depths of his delusion and experiencing firsthand the terrifying and devastating effects of not taking his medication, Caden vows to not miss a pill again.

Despite this resolution, Caden battles between the pulls of his delusions and the real world. He expresses a desire to leave his delusions and states that he seldom has control over them. He refers to his thoughts of paranoia and hallucinations as “ugly,

unwanted birthday gifts that you can't give back" or control (104). He also likens himself to a fish in a fish tank and feels "tortured by something incomprehensible and so much larger than [himself]" (131). Other characters in the psychiatric ward express similar sentiments even though they all suffer from different ailments. One of Caden's groupmates, who suffers from anxiety, says that if she does not touch her nose twice, she feels like she "can't breathe, like the air has been sucked away" (172). Through the experiences of Caden and his groupmates, readers gain an insight into the thought processes behind mental illnesses, increasing empathy and recognizing that these individuals are engaged in lifelong battles for control over their own minds and behaviors.

Caden pushes back against the stigmatizing of mental illness sufferers, saying that "the words themselves carry so much baggage" (213). Growing frustrated at his parents' refusal to identify his illness, he sarcastically refers to his diagnosis as "The-Mental-Illness-That-Must-Not-Be-Named" (213). Caden explains how "the labels mean nothing, because no two cases are ever exactly alike. Everyone presents differently, and responds to meds differently, and no prognosis can truly be predicted" (298). His frustration with his lack of control over his symptoms as well as the stigma attached to his diagnosis causes pain and confusion for Caden, and these feelings help readers to understand the struggles of a sufferer of mental illness. Caden's insights help readers to perceive the importance of looking past labels to understand the individual.

Near the end of the novel, Caden describes an event in which he obeys the captain's orders to shoot a parrot on the ship and travel through a whirlpool to reach the very bottom of The Mariana Trench, Challenger Deep. Once he reaches the bottom, he

discovers that the promised treasure is merely chocolate coins and Ring Pops; once he realizes that he did not make the right choice, Caden proclaims, “even though I’m already at the bottom of the world, I’m falling” (291), the climax of the novel. Here, Caden decides to pull himself out of the depths of his delusion and back to the real world. He recognizes that he could be “trapped in the maw of madness for all eternity” and forever remain in the void of his delusions (296). Caden resolves that “nothing is inevitable” and “there must be a way to bring [himself] out” (296). Once he grows determined to save himself, Caden returns to reality.

Ultimately, Caden reveals that he does have a choice, and he decides to take steps towards fighting his illness. His reasons for making this choice are the unrelenting support of his parents, the fact that Callie, his love interest, was able to better herself enough to be released, and because his “little sister held [his] hand, and tried to understand what it’s like to be in those other places” (304). For Caden, familial support, hope, and empathy contribute to his ability to save himself. In his final delusion presented in the novel, the ghost of the parrot says, “we can lead a horse to water - we can even make him drink. But to keep drinking, well, that’s up to the horse” (289). This revision of a cliché illustrates that mental illness sufferers must have the perseverance to save themselves, although as is clear from this novel, this is only possible through extensive support from family, friends, and doctors. Overall, Caden’s narrative is a moving depiction of the pain and confusion of mental illness but also the hope that is possible when one is able to decide he or she is stronger than the illness.

Instructional Strategies

Challenger Deep provides an interesting addition to a high school English curriculum as students explore Caden's journey and Shusterman's depiction of mental illness. A research-oriented cross-curricular activity is to study *Challenger Deep* in the Mariana Trench. As an opening activity, students can watch video footage of a diver's descent into *Challenger Deep* or explore James Cameron's *Deepsea Challenge* on the National Geographic website. This site provides background information on the Mariana Trench, information of Cameron's dive to *Challenger Deep*, a trailer of the documentary compiled about the expedition, and information about the custom submarine built as well as the marine life discovered. The National Geographic website also has links to articles and resources about *Challenger Deep* identified by grade level.

In the narrative, Caden sympathizes with the seventeenth-century character Don Quixote and his delusions. It would be valuable for students to read excerpts of Miguel Cervantes' *Don Quixote*, drawing comparisons between Quixote's perceptions and Caden's. Caden also meditates on madness in Shakespeare, particularly referencing Ophelia from *Hamlet*, as well as King Lear and Macbeth. If students are familiar with these plays, teachers can encourage comparisons between any one of these characters and Caden. Students can read excerpts from these plays, such as Ophelia's mad speech, Macbeth's dagger scene, or Lear's storm scene, comparing these depictions of mental illness to those in *Challenger Deep*.

As depicted in the novel, art is therapeutic for Caden, allowing him to express himself when words are inadequate. Students can draw scenes from Caden's delusions, practicing drawing feelings and abstract ideas as Caden does. Students can research the

use of art therapy, a form of therapy that helps multiple characters in the text, for mental illness sufferers. Students can explore the history of tortured artists. Caden notes that Van Gogh's artwork "couldn't save him from the depth of his tortured mind," and Michelangelo was "pathologically obsessed" while sculpting David (193-194). Students can conduct research into the connection between art and mental illness throughout history. Teachers can show an excerpt of the film "Loving Vincent," which explores elements of Van Gogh's mental health and emulates his painting style.

At one point in the novel, Caden notes, "if I had been born a Native American in another time...my voices would have been seen as the voices of ancestors imparting wisdom" (207). Students can explore the societal view of people now diagnosed as mentally ill throughout cultures and time. Students can be divided into groups and given a time period or a society to explore, tracking the development of treatments and societal conceptions. *Challenger Deep* is a rich source of inspiration for multimodal research and creativity in an English classroom.

Unit Plan

Unit Plan Considerations

This unit plan structure uses all four young adult texts explored above in a multimodal, project-based approach, culminating in a portfolio and an extended response based on the guiding question of the unit. The portfolio is based on a choice board, and students select one activity from a set that inspires engagement with their literature circles novel and one activity from a set that involves students in mental illness education in the community. This fifteen-day unit is designed for a 10th grade class. While the unit can be adjusted based on class size, skill or reading level of students, and amount of time, some elements are vital. It is important to include informational texts on mental illness, as “teaching through inquiry and teaching for social responsibility have a symbiotic relationship...with inquiry-based teaching, the process becomes part of the content” (Wolk 666). By using an essential question to explore possible answers and outcomes, students gain knowledge to approach mental health issues in society and actively seek positive solutions.

When implementing literature circles, it is important to incorporate self-selection into reading assignments. Students should be placed in the reading circle of their first or second choice. In their study over self-selected reading, Ivey and Johnston found that students reported more prolonged engagement with books, a strong feeling of agency when reading, motivation to push themselves to their limits, and greater use of scaffolds when faced with difficulty if they chose their own readings (270). Students who self-selected readings also reported “dialogic conversations with book characters, with one another, and with themselves, suggesting that engaged reading involved the active

construction of selves and of the narratives of their lives rather than temporary escape from those lives” (273). This research illustrates that giving students a voice in reading selection enables them to experience deeper engagement with texts and to feel more connected to the lives of the characters.

When constructing a unit about mental health, it is crucial to provide students with an opportunity for contact. In order to more fully reduce stigma and increase understanding, students should meet with mental illness sufferers or members of mental illness alliances. Researchers in Canada found that students who participated in contact-based educational opportunities were “more informed, less prejudiced, and more socially tolerant of people with a mental illness” (Froese-Germain and Riel 2). In a study conducted by Matteo and You, students interacted with members of the local community that had been diagnosed with mental illness. Students were able to ask questions, have positive interactions with individuals suffering from mental illness, and learn about local mental health initiatives and advocacy groups. Matteo and You found that after these interventions, “students became significantly more comfortable with individuals with mental illness” (123). If teachers are not able to arrange for advocates to come into the classroom, they can bring in school counselors with mental health experience or include videos of mental illness sufferers. Teachers can include easily accessible videos of the authors of the literature circle texts discussing their experience with mental illness sufferers. Students should have the resources to analyze, critique, and deconstruct depictions of mental illness (Thaller 60).

This unit is designed for long block class periods, so teachers may have to adapt the content to adjust for time. While these topics are important for a high school English

class, controversial content may incur administrative and parental pushback. To avoid potential complications, a letter of rationale should be sent home at the beginning of the unit. NCTE provides instructions on how to create a rationale letter for classroom texts and sample letters at <http://www.ncte.org/action/anti-censorship/rationales>. The appendix contains all necessary handouts to implement the unit.

Unit Plan Outline

<u>Unit Title</u> : Take a Peek: Exploring Diversity in Minds	
<u>Essential Question</u> : How can I create awareness of mental illness in my school and community through literature and through action?	
<u>Unit Objective</u> : Students will conduct a sustained investigation into creating awareness of mental illness through literature and action, synthesizing and evaluating multiple sources of information to answer this essential question.	
Day 1	<u>Objective</u> : Students will identify the impact of word choice on meaning and tone, paying special attention to connotative meaning. Students will select their literature circle text.
	<u>Materials</u> : Pre-assessment, sticky notes, <i>The Impossible Knife of Memory</i> , <i>Turtles All the Way Down</i> , <i>All the Bright Places</i> , <i>Challenger Deep</i>

	<p><u>Procedures:</u></p> <ul style="list-style-type: none"> • Students complete an individual pre-assessment, in which they are given 15 minutes to brainstorm answers to the essential question and define the word “stigma.” • Students play a game of word association, in which the teacher will call out keywords, such as “mental illness,” “insanity,” “crazy,” “OCD,” and students will write the first word that comes to mind on a sticky note. The class will then compile these onto poster boards and hang them up throughout the classroom. • The teacher leads a discussion about which words are harmful to mental illness sufferers and the power that words carry because of connotative meanings. • The teacher provides an overview of the unit, explaining the literature circles (LC), the choice board, and the summative assessment. • The teacher provides an introduction for each LC novel, reading a summary and an excerpt from each of the four texts: Laurie Halse Anderson’s <i>The Impossible Knife of Memory</i>, John Green’s <i>Turtles All the Way Down</i>, Jennifer Niven’s <i>All the Bright Places</i>, and Neal Shusterman’s <i>Challenger Deep</i>. • The books are set up at stations, and students rotate to each station to explore each of the books physically. Students record their first and second choices for LC on a slip of paper.
Day 2	<p><u>Objective:</u> Students will understand the stigma surrounding mental illnesses. Students will understand the impact of stigma and discrimination on individual and societal attitudes about mental illness.</p> <hr/> <p><u>Materials:</u> <i>The Impossible Knife of Memory</i>, <i>Turtles All the Way Down</i>, <i>All the Bright Places</i>, <i>Challenger Deep</i>, Quote Tracker handout (Appendix B), Defining Stigma handout, personal aptitude survey, Best Answers handout, Reducing Stigma - What Works? handout. Handouts 2-5 can be found at http://canwetalk.ca/wp-content/uploads/2016/03/COOR-791-2016-03-CWT-lesson-plans.pdf, published by the Canadian Mental Health Association</p>

	<p><u>Procedures:</u></p> <ul style="list-style-type: none"> • Students receive their first or second choice LC text and are seated according to their LC groups. • Students read their LC text quietly for 20 minutes. • Students receive the Quote Tracker handout and record at least three quotes from their text into the appropriate boxes. • The teacher asks students if they know what the word “stigma” means and hands out the activity 1 handout, Defining Stigma. • The teacher leads a whole-class discussion about the relationships between stigma, stereotyping, and discrimination. • Students complete the Personal Attitudes Survey. • The teacher compiles the survey results on the board and conducts a class-wide discussion about trends in the survey. • The teacher shares the Best Answers resource, encouraging students to discuss the interesting responses. • Students read Reducing Stigma- What Works? Handout. • In small groups, students brainstorm news, movies, and TV shows that ridicule mental illness and portray mental illness sufferers in a negative light. Students write these on sticky notes to be shared with the class and posted on the stigma wall.
Day 3	<p><u>Objective:</u> Students will understand the meaning behind figurative language used in a text, including similes, metaphors, and personification. Students will be able to explain how figurative language helps the author to convey meaning.</p> <p><u>Materials:</u> <i>The Impossible Knife of Memory</i>, <i>Turtles All the Way Down</i>, <i>All the Bright Places</i>, <i>Challenger Deep</i>, Quote Tracker handout (Appendix B), “I Felt a Funeral, in my Brain” (https://www.poetryfoundation.org/poems/45706/i-felt-a-funeral-in-my-brain-340), Figurative Language handout (Appendix C)</p>

	<p><u>Procedures:</u></p> <ul style="list-style-type: none"> • Students read their LC texts quietly for 20 minutes. • Students record at least three quotes from their text into the Quote Tracker handout. • The teacher conducts a mini-lesson on figurative language, looking specifically at the functions of metaphors, similes, and personification in literature. The teacher draws examples from classic literature. • Students read Emily Dickinson’s “I Felt a Funeral, in my Brain.” • Students create a side-by-side comparison of figurative language used to describe mental illness in their LC text and in Dickinson’s poem on the Figurative Language handout. • In small LC groups, students answer the following questions: how do both narrators use figurative language to explain their mental illness? How does the use of figurative language help the reader to better understand the narrators’ struggles? • The teacher conducts a whole class discussion around these questions, asking for contributions from each group.
Day 4	<p><u>Objective:</u> Students will analyze the development of the main character over the course of the text.</p> <hr/> <p><u>Materials:</u> <i>The Impossible Knife of Memory</i>, <i>Turtles All the Way Down</i>, <i>All the Bright Places</i>, <i>Challenger Deep</i>, Quote Tracker handout (Appendix B), “The Yellow Wall-Paper” (https://www.nlm.nih.gov/theliteratureofprescription/exhibitionAssets/digitalDocs/The-Yellow-Wall-Paper.pdf), Blank paper and art supplies for comic strips, Rest Cure informational text (http://broughttolife.sciencemuseum.org.uk/broughttolife/techniques/restcure), discussion board post</p>

	<p><u>Procedures:</u></p> <ul style="list-style-type: none"> • Students read their LC texts quietly for 20 minutes. • Students record at least three quotes from their text into the Quote Tracker handout. Students must have at least one quote in each box. • Students will read Charlotte Perkins Gilman’s “The Yellow Wall-Paper.” • Each student creates a comic strip, or a series of at least three pictures with captions, to represent the development of the main character in “The Yellow Wall-Paper” and her journey into mental instability. • In small LC groups, students draw connections between the character development of the main character in “The Yellow Wall-Paper” and the main character in their LC novel. • Students read the Rest Cure informational text and annotate in the margins. • Students conduct brief research on the modern treatment for the illness suffered by the main character in their LC novel. • Students respond to this question on a discussion board post (or a sheet of paper if no internet access): “How far has medicine come in treating mental illness? Is there still more work that needs to be done in mental illness treatment?”
Day 5	<p><u>Objective:</u> Students will identify key information in multiple sources of information and compare these points of view to address a question.</p> <hr/> <p><u>Materials:</u> <i>The Impossible Knife of Memory</i>, <i>Turtles All the Way Down</i>, <i>All the Bright Places</i>, <i>Challenger Deep</i>, Quote Tracker handout (Appendix B), Source Organizer handout (Appendix C), “What’s So Funny about Mental Illness” by Ruby Wax (https://www.ted.com/speakers/ruby_wax), “Why We Choose Suicide” by Mark Henick (https://www.youtube.com/watch?v=D1QoyTmeAYw), “Teen Suicide Rates Rise Dramatically; Searching for Answers to Halt Trend” article (https://newsela.com/read/teen-suicide-rate-rising/id/41568/)</p> <hr/> <p><u>Procedures:</u></p> <ul style="list-style-type: none"> • Students read their LC texts quietly for 20 minutes. • Students record at least three quotes from their text into the Quote Tracker handout. • Students watch the TED Talk, “What’s So Funny About Mental Illness?” by Ruby Wax. • Students fill in the Source Organizer by including key quotes and facts. • Students watch “Why We Choose Suicide” by Mark Henick.

	<ul style="list-style-type: none"> • Students fill in the Source Organizer with key quotes and facts. • Students read the informational text, “Teen Suicide Rates Rise Dramatically; Searching for Answers to Halt Trend” on Newsela (1220 Lexile: teacher and/or aide provides support as needed). • Students fill in the Source Organizer with key quotes and facts. • Teacher leads a whole-class discussion on the overall trends seen throughout these three sources.
Day 6	<p><u>Objective:</u> Students will analyze a sequence of events to explain how certain ideas or treatments developed over a time period.</p> <p><u>Materials:</u> <i>The Impossible Knife of Memory</i>, <i>Turtles All the Way Down</i>, <i>All the Bright Places</i>, <i>Challenger Deep</i>, Quote Tracker handout (Appendix B), posters/butcher paper</p> <p><u>Procedures:</u></p> <ul style="list-style-type: none"> • Students read their LC texts quietly for 20 minutes. • Students record at least three quotes from their texts into the Quote Tracker handout. Students should have at least three quotes in each box. • In small LC groups, students are assigned a time period in which to explore the treatment of mental illness. Students use web sources and explore treatments in different parts of the world during their time period. • Each group receives one of the following time periods: 5th Century BCE to 14th Century CE (ancient treatments), 15th Century CE, Mid-to-late 19th Century CE, 20th Century CE, 21st Century CE (contemporary treatments). • Each group presents their information on poster boards or pieces of butcher paper. • The whole class brainstorms where treatment will likely go next and what resources are necessary to get there.
Day 7	<p><u>Objective:</u> Students will craft detailed and thought-provoking open-ended and closed-ended questions informed by research material.</p> <p><u>Materials:</u> <i>The Impossible Knife of Memory</i>, <i>Turtles All the Way Down</i>, <i>All the Bright Places</i>, <i>Challenger Deep</i>, Quote Tracker handout (Appendix B)</p>

	<p><u>Procedures:</u></p> <ul style="list-style-type: none"> • Students read their LC texts quietly for 20 minutes. • Students record at least three quotes from their texts into the Quote Tracker handout. • Students prepare for interviews with a member of a mental illness alliance or a member of a community who has a mental illness explored in their LC texts (pre-arranged by the teacher). • Students create questions with LC group members, forming at least two questions per group member. • Students think about how mental illness is depicted in their novels and let those questions inform thinking. • Students review soft skills, such as shaking hands, introductions, respectful discourse, and respectful listening. • Students review interview skills, including strategies for asking follow-up questions.
Day 8	<p><u>Objective:</u> Students will pose thoughtful questions in their interviews and propel conversation by asking follow-up questions. Students will synthesize information from their interview.</p> <hr/> <p><u>Materials:</u> Speakers from the community (4 minimum), Question sets for interviews, recording device (if consent is obtained)</p> <hr/> <p><u>Procedures:</u></p> <ul style="list-style-type: none"> • Small groups interview a mental illness alliance member/mental illness sufferer, using question sets created on day 7 and asking follow-up questions. Each student asks at least one question. • Groups record their interview (if permitted) to have evidence to cite. Depending on class size and period time, each group receives 8-15 minutes for their interviews. • Students make notes from their interviews, recording key information and quotes. If recordings are not obtained, students compare notes and edit for accuracy and consistency.
Day 9	<p><u>Objective:</u> Students will be able to synthesize information to create a concise summary. Students will analyze multiple interpretations of a topic through the use of textual evidence.</p>

	<p><u>Materials:</u> <i>The Impossible Knife of Memory</i>, <i>Turtles All the Way Down</i>, <i>All the Bright Places</i>, <i>Challenger Deep</i>, Quote Tracker handout (Appendix B), Virginia Woolf’s essay, “On Being Ill” (http://www.woolfonline.com/?node=content/contextual/transcriptions&project=1&parent=56&taxa=45&content=6225&pos=13), poster board/butcher paper</p> <p><u>Procedures:</u></p> <ul style="list-style-type: none"> • Students read their LC texts quietly for 20 minutes. • Students record at least three quotes from their texts into the Quote Tracker handout. • Students read Virginia Woolf’s Essay, “On Being Ill.” • Students independently summarize the text in 20 words or less. • In small LC groups, students create a Venn Diagram on a poster board or large piece of butcher paper. Using quotes and paraphrasing, students compare/contrast thoughts and depictions of mental illness in Woolf’s essay and their LC texts in the Venn Diagram to create a visual organizer of the comparison/contrast.
Day 10	<p><u>Objective:</u> Students will write a narrative in the voice and tone of their novel. Students will integrate three uses of figurative language into their narrative.</p> <p><u>Materials:</u> <i>The Impossible Knife of Memory</i>, <i>Turtles All the Way Down</i>, <i>All the Bright Places</i>, <i>Challenger Deep</i>, Quote Tracker handout (Appendix B)</p> <p><u>Procedures:</u></p> <ul style="list-style-type: none"> • Students read their LC texts quietly for 20 minutes. • Students record at least three quotes from their texts into the Quote Tracker handout. • The teacher returns to the sticky note word-associations on the wall created on the first day of the unit. Using quotes and facts from all their readings and sources, students identify which sticky notes are correct and which are incorrect. • Students either write an alternative ending to their LC novels or include a new chapter somewhere in the novel. Students aim to emulate the voice of the main character, especially when speaking about mental illness. Students employ figurative language at least three times in their compositions.
Day 11	<p><u>Objective:</u> Students will engage in planning for their choice board assignment.</p>

	<p><u>Materials:</u> <i>The Impossible Knife of Memory</i>, <i>Turtles All the Way Down</i>, <i>All the Bright Places</i>, <i>Challenger Deep</i>, Quote Tracker handout (Appendix B), Choice Board handout (Appendix A), Choice Board Planner (Appendix E)</p>
	<p><u>Procedures:</u></p> <ul style="list-style-type: none"> • Students read their LC texts quietly for 20 minutes. • Students record at least three quotes from their text into the Quote Tracker handout. • The teacher hands out the Choice Board handout. • Using the Choice Board Planner handout, students write a plan for how they will execute each section, what they intend to include, and what sources they will integrate. • Once they have gotten this plan approved by the teacher, students begin to work on their choice boards. Students only work on the far left and far right choice columns in class; they will complete the summative assessment in the middle column later.
Day 12	<p><u>Objective:</u> Students will produce and develop clear writing through planning, revising, and editing. Students will draw evidence from texts to support analysis and reflection.</p>
	<p><u>Materials:</u> <i>The Impossible Knife of Memory</i>, <i>Turtles All the Way Down</i>, <i>All the Bright Places</i>, <i>Challenger Deep</i>, all handouts and materials from unit</p>
	<p><u>Procedures:</u></p> <ul style="list-style-type: none"> • Students read their LC texts quietly for 20 minutes. • Students record at least three quotes from their text into the Quote Tracker handout. • Students work on their choice boards.
Day 13	<p><u>Objective:</u> Students will produce and develop clear writing through planning, revising, and editing. Students will draw evidence from texts to support analysis and reflection.</p>
	<p><u>Materials:</u> <i>The Impossible Knife of Memory</i>, <i>Turtles All the Way Down</i>, <i>All the Bright Places</i>, <i>Challenger Deep</i>, all handouts and materials from unit</p>
	<p><u>Procedures:</u></p> <ul style="list-style-type: none"> • Students work on their choice boards.
Day 14	<p><u>Objective:</u> Students will gather and integrate information from multiple sources to answer the essential question.</p>

	<p><u>Materials:</u> <i>The Impossible Knife of Memory</i>, <i>Turtles All the Way Down</i>, <i>All the Bright Places</i>, <i>Challenger Deep</i>, all handouts and materials from unit</p>
	<p><u>Procedures:</u></p> <ul style="list-style-type: none"> • Students complete their extended response summative assessment outlined in the middle column of the Choice Board. Students are permitted to use all notes, created materials, texts, and videos they have employed throughout the unit. • Students receive approximately 15 minutes of planning time and 45 minutes of writing time. • Students complete a reflective self-assessment. This response should include how they did, what grade they should receive on their overall portfolio, and whether they answered the essential question fully. Students use the Portfolio Rubric (Appendix F) for reference.
Day 15	<p><u>Objective:</u> Students will display their portfolios for their classmates. Students will present information and findings from a range of sources in a clear and coherent manner.</p>
	<p><u>Materials:</u> Student Portfolios (completed choice board activity)</p>
	<p><u>Procedures:</u></p> <ul style="list-style-type: none"> • All students will set up their choice board products around the room. • Half of the class will stand by their products while the other half circulates around the room. Those presenting their portfolios will explain their projects and answer any questions. • Students will rotate, and those circulating will stand by their choice board portfolios, explaining their projects and answering any questions.

Conclusion

Although there is a lack of scholarship on the representation of literature dealing with mental illness in the classroom, there is no lack of research into the need for conversations about mental illness for adolescents. Approximately one-fifth of all adolescents battle with a mental illness, which suggests that every individual in a classroom is impacted by mental illness in some way, be it through peers, family members, or themselves (“Mental Health Facts: Children and Teens”). Mental illness affects individuals regardless of gender, social class, or culture, so it is an issue applicable to adolescents in any district, school, and classroom. Discussions about mental illness are just as or more crucial as discussions about other forms of diversity, such as gender and multiculturalism. Despite many criticisms, YAL is engaging and complex, and it presents mature and serious themes to adolescents in a relatable and accessible manner. *The Impossible Knife of Memory*, *Turtles All the Way Down*, *All the Bright Places*, and *Challenger Deep* all succeed in depicting the emotions, daily struggles, and thought processes of adolescents dealing with mental illness. These texts are appropriate for the high school English classroom, as they present complex characters, plots, and language, while presenting engaging images of mental illness. By pairing these texts with canonical literature, teachers can employ scaffolding so their students are able to engage with and understand classic literature. Researchers have identified stigma as the leading barrier to individuals seeking mental health help: these texts, presented with appropriate context, can reduce stigma in students and increase empathy. By exposing students to narratives of mental illness sufferers, teachers will increase contact and education, which are the key determiners to reducing stigma. The need for greater awareness of mental health issues among teens has been established, and it is time for teachers to integrate

meaningful, accessible literature that addresses mental health topics into the classroom that will contribute to their students' developing skills as conscientious, empathetic citizens.

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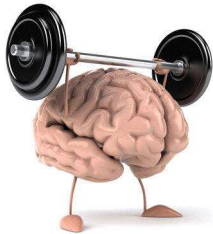

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Appendix

Appendix A: Unit Choice Board

<p style="text-align: center;">Blog</p> <p>Create a website and write a series of blog posts about your LC text. Blog posts should deal with theme, character development, and increasing mental illness awareness for your age group. Each blog post should have a different theme and contain 250 words minimum. You can write a blog post from the point of view of a character in your LC novel. You should have at least 5 blog posts. Provide a one page rationale that explains the target audience of your blog and what you hope it will achieve.</p>		<p style="text-align: center;">TED Talk</p> <p>Create a videoed TED Talk to be posted online that explores the need for mental illness education in schools. Follow the models we watched in class and reference information from at least three sources. This video should be at least 10 minutes long. Show this video to at least one person and interview them on what they learned from the video. Turn in a recording of the interview and a written reflection about whether you succeeded in creating an engaging yet informative TED talk.</p>
<p style="text-align: center;">Art</p> <p>Create a piece of art to be displayed in the hallway that tracks the mental health journey of a character in your LC text. This piece of art should be the size of a poster board. Also, provide a one-page rationale that describes your reasoning behind the medium used, images depicted, and how this piece of art can help to reduce stigma and provide hope for mental illness sufferers.</p>	<p style="text-align: center;">Extended Response</p> <p>Respond to the question below in a well-developed essay that incorporates your literature circles book, canonical texts, your interview, and at least three other sources: <i>How can I create an awareness of mental illness in my school and community through literature and through action?</i></p>	<p style="text-align: center;">Game</p> <p>Create a video or board game that educates players on mental illness and the dangers of stigma. The game must include information from three different sources and a set of rules. Have two other students (not from this class) play the game and interview them about their experience. Include a recording of the interview and a written reflection about the process and whether you succeeded in creating a fun yet informative game.</p>
<p style="text-align: center;">Book Bag</p> <p>Find 10 items that represent people, places, events, and other parts of the book. Place them in a brown bag (provided by teacher). Decorate the outside of the bag with quotes from your LC text that inspired the items. For each item, write a 150-word blurb that describes the item and explains the significance of the item to the story. Also, explain how this item either contributed to or hindered the healing of the main character in your LC novel.</p>		<p style="text-align: center;">Picture Book</p> <p>Create a picture book for young readers that helps them to better understand mental illness and stigma. Include text with accompanying images. At the end of the book, include a “note from the author” that explains to parents why it is important to talk about mental illness and stigma from a young age. Once you have completed this, your teacher will arrange for you to read your picture book to a group of children in your intended age group. After this, write a written reflection about how your audience received the book and whether you succeeded in creating an engaging yet informative picture book.</p>

Appendix B: Literature Circles Quote Tracker (with page #)

Main character development	Figurative language in reference to mental illness	Character's feelings of autonomy/control	Depictions of medications/treatments/therapy	Evidence of stigma in other characters

Appendix C: Figurative Language Exploration

Find examples of figurative language that deal with mental illness in both texts.

"The Yellow Wall-Paper"	LC text

Appendix D: Source Organizer

Source #1: TED Talk: “What’s So Funny about Mental Illness?,” Ruby Wax	
Facts	Key Quotes
<ul style="list-style-type: none"> • • • 	<ul style="list-style-type: none"> • • •

Source #2: TED Talk: “Why We Choose Suicide,” Mark Henick	
Facts	Key Quotes
<ul style="list-style-type: none"> • • • 	<ul style="list-style-type: none"> • • •

Source #3: Article: “Teen Suicide Rates Rise Dramatically; Searching for Answers to Halt Trend,” Newsela	
Facts	Key Quotes
<ul style="list-style-type: none"> • • • 	<ul style="list-style-type: none"> • • •

Appendix E: Choice Board Planner

One choice from each column

Choice #1:

Sources: 1.

2.

3.

Plan:

Choice #2:

Sources: 1.

2.

3.

Plan:

Choice #3:

Sources: 1.

2.

3.

Plan:

Appendix F: Rubric for Unit Choice Board

CATEGORY	4	3	2	1
Quality of Information	Information clearly relates to the main topic in complex, informed, and original thought patterns. Includes extensive supporting details and/or examples.	Information clearly relates to the main topic in original and informed thought patterns. Provides adequate supporting details and/or examples.	Information somewhat relates to the main topic, but thought patterns are not original or informed. Few details and/or examples are given.	Information has little or nothing to do with the main topic, and there are little to no examples given.
Use of Sources	All sources (information and graphics) are accurately documented and meet the required limit for each activity.	All sources (information and graphics) are accurately documented, but 1-2 sources are lacking from the activities.	All sources (information and graphics) are accurately documented, but 3-4 sources are lacking from the activities.	Some sources are not accurately documented, and most sources are lacking from the activities.
Amount of Information	All topics are addressed and all activities meet the requirements.	Most topics are addressed and all activities come close to the requirements, although 1 of the activities may not completely fulfill the requirements.	Some topics are addressed, and some activities come close to the requirements.	One or more topics was not addressed, and one or more activities is incomplete/missing.
Reflection	All reflective components are complete, original, and show extensive thought.	Most reflective components are complete, original, and show extensive thought. Some components may be repetitive, or some may show basic thought.	Some reflective components are complete, original, and show extensive thought. Most of the components are repetitive or show basic thought.	Reflective components are missing, or components are entirely repetitive, underdeveloped, and show no reflection.
Mechanics	Little to no grammatical, spelling, or punctuation errors.	A few grammatical, spelling, or punctuation errors	Common grammatical, spelling, or punctuation errors.	Many grammatical, spelling, or punctuation errors (impedes understanding).