My Scars Tell a Story: Self-Mutilation in Young Adult Literature

Miskec, Jennifer.
McGee, Chris.

Children's Literature Association Quarterly, Volume 32, Number 2, Summer 2007, pp. 163-178 (Article)

Published by The Johns Hopkins University Press
DOI: 10.1353/chq.2007.0031

For additional information about this article
http://muse.jhu.edu/journals/chq/summary/v032/32.2miskec.html
The problem novel has long been a staple of young adult literature, so it is no surprise that the issue of “cutting,” a primarily adolescent affliction, is addressed in this literature. Adolescents who purposely cut themselves with sharp objects in order to feel pleasure, to deal with pain, or to feel release have appeared in young adult fiction since the early 1990s, when clinical conversations about self-injurious behavior (SIB) entered popular culture. At that time, novels about cutting indicated just how widespread these conversations had become and how a certain image of the teenage cutter had been formed in the public consciousness. As one might expect, the first novels to deal with cutting recast many of the assumptions of a medical community that was itself wrestling with what seemed like an increasingly visible problem. Indeed, the overall image of the cutter changed as the medical conversations changed. In this article we offer a brief history of this subgenre by exploring the changing trends as they appear in a variety of young adult texts. We do so in order to call attention to a more recent and provocative trend in “cutting” literature, which, over the past decade, has evolved beyond the problem novel format. By removing cutting from its pathological and melodramatic roots, these texts portray the act in much less stereotypical ways. Some novels, we suggest, strive less for accuracy or realism and instead employ cutting as a metaphor for something much broader. In the case of some recent fantasy fiction, adolescents are granted a degree of agency over their lives via cutting into their own body.

While we cannot explore every novel that employs cutting as a central device or even as a passing metaphor, the novels we explore here do suggest the following pattern. Many of these texts, particularly the earliest ones, dramatize a set of typical preconditions—including neglectful homes, absent parents, and long-term traumas—that lead to cutting. The first novels to deal with cutting

Jennifer Miskec teaches children’s and young adult literature, as well as youth culture, at Christopher Newport University in Newport News, Virginia. Chris McGee teaches children’s and young adult literature, as well as film, at Longwood University in Farmville, Virginia. Both Jennifer and Chris have an ongoing interest in the relationship between ideology and the body.

identify no specific cause for the act; it is merely a part of a larger pattern of
self-destructive behavior that is the first step toward wanting to die. The next
identifiable set of novels explores similar causes as do their earlier counterparts,
but these later novels draw upon specific traumas that trigger the act of cutting,
which happens for more complex reasons. These cutters react to overwhelm-
ing emotions and self-mutilate to gain a sense of a relief. They want to live,
but, counterintuitively, they cut with the goal of having less pain in their lives.
These “second stage” books exist in order to stop the reader’s self-destructive
behaviors or to comfort those who know cutters in their lives. The reader
becomes the object of a lesson that overshadows the story itself. Later fantasy
and sci-fi novels resort to less heavy-handedness; they do not exist simply to
stop the cutter’s behavior, and, in turn, they explore more complex reasons why
the cutter cuts. We suggest that when a narrative deals with the issue of cutting
but manages to avoid the trappings of the problem novel, it may appear less
realistic, or even less well-intentioned, but it does provide a more nuanced,
sophisticated representation of the act. In this way, young adult literature as a
whole has managed to deal with cutting in increasingly productive ways.

There are few absolutes and many misunderstandings about the triggers for
and solutions to SIB, as the medical community itself is willing to admit. Due
to the often secretive and thus unreported nature of cutting, the actual number
of teens who purposely inflict self-harm is difficult to record. Studies in the
United States show that (in adolescent community samples) the number of
teens who cut can range anywhere from 4 to 38 percent (Whitlock 408). This
surprisingly wide range reveals how difficult it is to pinpoint who cuts and why,
although almost every study we examined implies that the act is widespread.
In fact, “large studies in Britain estimate approximately 10 percent of youth
11 to 25 years of age self-injure” and report a 65 percent increase of disclosure
over the last two years of the study (Whitlock 409). Combined with increased
mainstream and popular media coverage of the issue, many consider self-injury
“the next teen disorder” (Welsh, qtd. in Whitlock 408), an “epidemic” that is
today’s equivalent to anorexia and bulimia (Walsh 29).

Despite these very timely concerns that cutting is the malady du jour among
contemporary adolescents, the medical community has worked for years to
produce a profile of the typical cutter. In 1967, for example, psychiatrists H.
Graff and R. Mallin establish just such a profile in their “The Syndrome of the
Wrist Cutter,” noting:

[She is] an attractive, intelligent, unmarried young woman who is either
promiscuous or overly afraid of sex, easily addicted, and unable to relate
successfully to others . . . She slashes her wrists indiscriminately and repeatedly
at the slightest provocation, but she does not commit suicide. She feels relief with
the commission of her act. (qtd. in Lester 123)

Though Graff and Mallin indicate that the typical cutter “does not commit
suicide,” the profile nevertheless portrays cutting as a para-suicidal act that is
connected with other destructive behaviors. In a 1972 article in the *Psychological Bulletin*, David Lester draws on the words of K. Menninger, who, as far back as 1938, described this behavior as a type of “focal suicide,” suggesting that “self-mutilation is a suicidal act in which the suicidal impulse is concentrated upon part of the self as a substitute for the whole” (Lester 119).

Although these early studies recognized that cutting itself was not a direct way of committing suicide, cutting was considered a suicidal act. This understanding of cutting was potent enough to make its way in to Shelly Stoehr’s *Crosses*, written in the 1980s and published in 1991, and considered by most to be the first young adult novel to deal with characters who self-injure by cutting. *Crosses* elaborates on nearly every one of the assumptions mentioned above, and, not surprisingly, fits nearly every stereotype of the problem novel as well. *Crosses* tells the story of fifteen-year-old Nancy, a good student who responds to her parents’ alcoholism and domestic turmoil by dressing punk. She also cuts. In an early scene following a drunken fight between her parents, Nancy relates, “I found a big piece of glass left from when I broke a vase of flowers over my head a few months before. Flipping off the light, I bit my lip and pressed the glass hard into my wrist. I kept saying to myself as I dragged it up and down, fuck you, fuck you, fuck you” (Stoehr 33). Alone, Nancy has begun smoking, spiking her hair and dressing in a punk style, cutting her body, and sneaking alcohol to school in a shampoo bottle. When Nancy meets Katie, a fellow cutter, she begins using drugs as well. For both Nancy and Katie, cutting serves as a means to prevent becoming “overwhelmed by all the shit around [them]” (13), including violent and neglectful home lives.

For Nancy, cutting herself acts as a punishment for all that she gets away with despite the various “messes” she finds herself in (Stoehr 128). She cuts for both the primary gains of being punished (when her neglectful parents and easily fooled teachers fail to punish her) and of escaping from unbearable situations. A secondary gain for her is hurting others. In these ways, Nancy, especially, is a classic representation of a cutter—a wrist cutter, specifically—whose cutting acts as a gateway to riskier behavior. Both Nancy and Katie practice a variety of self-destructive behaviors that seem to be about punishing both others and themselves. Nancy and Katie smoke pot daily, and Nancy supplies enough alcohol for both girls to stay drunk throughout the school day. Together they try uppers, sniffing aspirin, cocaine, and anything else that might keep them high. Nancy even maintains a relationship with a boyfriend with whom she participates in rough sex, despite a relative lack of interest in either her boyfriend or the sex (31). In fact, Nancy and Katie both participate in risky behaviors at one time considered by some in the medical community to be “counterintentioned suicidal acts,” in which “self-destruction is threatened but not carried out” (Lester 125, emphasis in original). By the end of the novel both girls’ lives have spiraled so far out of control that Nancy is hospitalized for a suicide attempt (after purposely deeply cutting her wrist on a rusty nail [Stoehr 129]) and Katie is found dead after ingesting mushrooms and jumping out of
a window. Although cutting is only a small part of the story itself, it acts as a clear marker of suicidal tendencies, physical proof the girls keep hidden from parents and teachers who could have predicted and prevented their imminent self-destruction. In a scene late in the novel, immediately preceding her suicide attempt, Nancy reflects on the progression that began with cutting, remarking, “I was sick of fake suicides, and stupid grasps for pity. . . . I was an idiot. But no more, I thought—from now on, it’s all for real” (129). Nancy contends, as she will throughout the novel, that nothing matters anymore because there is no hope left and there is no reason to continue living. These are indeed some of the psychological reasons that Nancy and Katie cut, but they are, in the end, the same reasons they attempt suicide.

In many ways, Stoehr’s Crosses marks a turning point in young adult literature in that it begins a lengthy discussion of cutting, its potential effects on teens, and the need to help teens fight their disease, despite presenting what we now know to be a rather short-sighted depiction of typical cutters’ behaviors. Early speculation in the medical community did suggest that cutting was emblematic of suicidal tendencies and often coincided with other self-destructive behaviors such as drug abuse and depression. Interestingly, during the time that Stoehr would have been writing Crosses, A. R. Favazza published Bodies Under Siege: Self-Mutilation and Body Modification in Culture and Psychiatry, the first comprehensive exploration of body modification and self-mutilation. In Bodies Favazza constructed what remains an often-repeated definition of self-mutilation: “the deliberate, direct destruction or alteration of one’s body tissue without conscious suicidal intent” (xviii–xix). This complicated the earlier understanding of self-mutilation as an indication of mental illness. Instead, Favazza suggested that self-mutilation might be read as therapeutic and more thoughtfully considered with the help of available psychological, biological, and social data (xii).

Most significantly, Favazza’s work reinforced the need to separate the acts of suicide and cutting. In his introduction to the second edition of his text, Favazza notes that Bodies was well received by professionals and laypersons alike and worked to open a dialogue about the issue of SIB among adolescents. What followed was an influx of conversations about SIB in various formats. Crosses now seems melodramatic at best because it was published at the end of an impending paradigmatic shift. The still-present discomfort with the issue was too prevalent for Crosses to be anything except what it was. Since Crosses, however, less fatal, though often equally clinical, images of cutting have replaced the suicidal images of Stoehr’s watershed problem novel. Fictionalized accounts of cutting moved away from calling cutting a suicidal act, although it was still aligned with females and with a need to control interpersonal situations and emotions.

Narratives about cutters and the triggers of cutting had changed notably by the time Laurie Halse Anderson’s Speak was published in 1999. In the novel Melinda Sordino tries to cope with overwhelming emotions of anxiety after
Self-Mutilation in Young Adult Literature

being raped at a party. She becomes mute about the ordeal; she also, at one point, cuts herself. She narrates, “I open up a paper clip and scratch it across the inside of my wrist. Pitiful. If a suicide attempt is a cry for help, then what is this? A whimper, a peep?” (Anderson 87). Melinda’s quick and sole experience with cutting in the novel challenges the old clichés with a keen awareness and dismissal of the outdated medical language that connects cutting with suicide. Simultaneously, Anderson has addressed a more recent narrative pattern in “cutting” literature, a part of what Favazza would call “moderate/superficial” cutting, which “refers to episodic or repetitive acts of low lethality and little tissue damage” (233). This includes such behavior as nonsuicidal acts of “skin cutting and burning, skin carving (word designs and other symbols), interference with wound healing, bone breaking, self-punching, needle sticking, hair pulling, nail biting, and skin scratching” (233). Under this new trend, cutting is still characterized as an issue that affects primarily females, but it is increasingly connected to the cutter’s need for control over interpersonal situations and emotions, “to own the body, to perceive it as self (not other), known (not uncharted and unpredictable), and impenetrable (not invaded or controlled from the outside)” after a specific trauma (Cross, qtd. in Favazza 51). Although the urge to cut is often seen as emerging from a “psychological chasm between the body and self,” cutting as a result of trauma is not considered here to forecast suicidal tendencies or psychosis (Favazza 51). In fact, in more recent studies the trauma-linked developmental model is a commonly held explanation for cutting among medical professionals: “The cumulative impact of stressful life events trigger self-injurious episodes, the subsequent shame associated with the self-injurious response, and the secrecy surrounding the behavior create fertile ground for the development of marginalized perceptions of the self” (Whitlock 409).

Patricia McCormick’s *Cut* (2000) is an example of literature connecting cutting to trauma. Like Melinda in *Speak*, Cut’s focalizer Callie has suffered from a specific trauma and also suffers from selective-mutism, along with a tendency to cut herself. We get to know Callie alongside girls with a host of other problems, such as eating disorders, in the treatment facility called Sea Pines. For Callie, cutting herself offers relief from the chaos and guilt she feels in a neglectful and anxiety-filled home with a nervous mother, a seriously ill younger brother, and an alcoholic father. After almost losing her brother to a severe asthma attack when she was left alone to care for him, Callie begins to cut herself as a way to compartmentalize her fears and deal specifically with the overwhelming and negative feelings she has about her self and family. Cutting offers Callie a form of relief; particularly in the following passage, in which she describes the act of cutting from an almost god-like perspective:

I placed the blade next to the skin on my palm. A tingle arched across my scalp. The floor tipped up at me and my body spiraled away. Then I was on the ceiling looking down, waiting to see what would happen next. What happened next was that a perfect, straight line of blood bloomed from under the edge of the blade.
The line grew into a long, fat bubble, a lush crimson bubble that got bigger and bigger. I watched from above, waiting to see how big it would get before it burst. When it did, I felt awesome. Satisfied, finally. Then exhausted. (3)

As Favazza suggests in *Bodies Under Siege*, Callie’s cut is a deliberate rather than symbolic move. She does not cut to warn others of larger psychoses; instead, the cut itself provides therapy, allowing Callie to focus on the cut, on her physical response to the pain, and on the biological response that follows, all of which engender a sense of relief.

As we suggest, later narratives such as this begin to move discussions of cutting beyond a simple indicator of suicidal tendencies. Sadly, the profile of the typical cutter has largely stayed the same. Much of the medical literature that discusses the acts tends to link cutting with the emotional and physical facts of simply being an adolescent, such as in the following example: “It is probably weak ego and diffuse identity that make both adolescents and psychiatric patients susceptible to various forms of identification” (Sacks, qtd. in Taiminen 212). In many ways this image of the teen cutter reiterates what Thomas Hine calls the “teen mystique, a seductive but damaging way of understanding young people [that] encourages adults to see teenagers (and young people to see themselves) not as individuals but as potential problems” (11). It is no surprise, then, that early young adult novels that deal with cutting employ such a framework. Many set out to talk frankly about cutting and offer direct solutions that “cure” teens of the need to cut, with such advice typically voiced by adult characters or shared by fellow teen patients. But these earlier novels also strive to “cure” teens of the angst of being an adolescent.

This approach certainly seems laudable. However, as Roberta Trites argues in *Disturbing the Universe: Power and Repression in Adolescent Literature*, young adult literature typically functions in order to situate adolescents in proper response to authority and dominant ideology: “(A)dolescent literature,” she writes, “seems to deligitimize adolescents, insisting that adolescentness, especially immaturity, is unacceptable, even though the surface intention of most YA novels is ostensibly to legitimize adolescence” (83). What is particularly interesting about young adult literature that deals with psychiatric issues such as cutting is that while most novels strive for accuracy (by carefully researching the subject), many tie the psychological affliction to exaggerated teen behavior. While many of these narratives set out to help the teen cutter, they more often portray SIB as something arising from the teen’s own behavior, all while suggesting that the teen has little ability to fight the urge to cut without adult help. Finally, then, even the most innovative cutting novel turns didactic in the end, despite the subgenre’s heavily evolved shape since its earliest incarnations. While the medical discussions of cutting may have changed, and the literary depictions have followed suit, the deeper ideological values of adolescent literature still inform the genre.

For all of its intentions, *Cut* still limits Callie’s agency, depicting her as victim of a disease she cannot control. After undergoing therapy with a caring doctor,
she seems dangerously distant from her disease, aware only of its causes. When the doctor diagnoses why she cuts, Callie’s words reiterate the kind of medical language these novels grow from, a language that could also easily be ascribed to simply being an adolescent. The doctor offers, “I think you’ve come up with a way to deal with feelings you find overwhelming. Overwhelmingly bad, overwhelmingly frightening,” to which Callie responds, “Really?” (McCormick 77). Could Callie, in fact, be this unaware of what seems like a common-sense diagnosis? As a character, Callie is seemingly bright. During an eating period she clandestinely rips a small piece of metal from the edge of the table so that she can cut herself later in solitude, and she even learns how to effectively avoid the prying eyes of nurses. Yet, when it comes to her own disease, Callie is oblivious, aware of it only because of what the doctor tells her, which becomes a truth she eventually accepts. The doctor character is indeed a significant one in the book. From the first line (“You say it’s up to me to do the talking,” Callie narrates [1]), we discover that the entire novel is constructed as an elaborate letter to the doctor. Trites notes that “the discursive practice of employing a wise adult to guide a confused adolescent is so commonplace in adolescent literature that it is practically invisible to trained readers” (80). In Cut the discursive practice of employing the doctor as narratee achieves multiple purposes: affording the book a medical language, providing a target for Callie’s eventual transformation, reinscribing adult authority by depicting adults as caring, and, in turn, robbing Callie of any power over her own disease.

Perhaps no novel more thoroughly reiterates these themes than Melody Carlson’s Blade Silver: Color Me Scarred (2005). Ruth begins cutting herself after her mother attempts suicide and her father becomes increasingly abusive. In a narrative similar to that of Cut, Ruth is left in charge of her household because her parents cannot maintain order. Concepts such as control, escape, and relief are repeated conceits for teens cutting themselves in the medical literature, and, true to form, the protagonists in these novels turn to sharp edges to help them deal with issues of control they lack in other aspects of their lives. In one of Ruth’s first descriptions of cutting herself, her language is almost identical to Callie’s: “I lower the blade to the pale skin on the inside of my arm, and using a sharp corner of the blade, I quickly make a two inch slash. I know not to go too deep. And when I’m in control, like now, I can do it just right. And just like that I’m done. I hardly feel the pain of the cut at all. It’s like it doesn’t even hurt” (Carlson 10–11). She describes the experience as one of relief, how there is “something reassuring about seeing my bright-red blood exposed like this. It’s like this sign that I’m still alive and, weird as it sounds, that someday everything will be okay” (11). She goes on: “For the moment, this cut absorbs all my attention and emotional energy. It blocks out what I am unable to deal with. And for a while I am convinced that I will actually survive my life. And, hey, this isn’t as bad as doing drugs, like some kids do” (11).

As much as these novels evoke cutting through compelling imagery early on, they go on to list the deceptive lengths cutters go to in order to hide their
activities, plot points that seem clearly geared toward worrying the adult reader as much as warning the teen. Just as Cassie in *Cut* hides the broken piece of table with which she will cut herself later, Ruth tapes a blade to the bottom of her Altoids box in order to pass it through the metal detectors at school. She confides that she “started cutting last winter when everyone was wearing long-sleeved sweaters and sweatshirts and jackets. It wasn’t any big deal to cover up the scars back then” (Carlson 13). Ruth does reflect in what we consider a mature way about her SIB. She mentions, “One of the benefits of my Native American heritage is that my legs have enough color to pass for a tan even when they haven’t been in the sun for months. I promise myself, not for the first time, I will *never* cut on my legs” (46, emphasis in original). Still, *Blade Silver* is one of the books in the True Colors series, a collection of Christian-themed books that addresses a range of issues facing teens (sex, suicide, drugs, etc.) in order to guide teens to Christianity. Just as Cassie in *Cut* is led to face her disease through the support of a caring doctor, Ruth finally faces the disease via a caring guidance counselor (who forces Ruth to reveal her arms) and caring friends Abby and Nicole. Nichole eventually leads Ruth to the greatest of all authority figures, God:

“This is the deal,” Nicole finally says. “No one can do this all at once. And no one can do this without God’s help. He’s the expert on forgiving, and he’s the only one who can give you what you need to forgive—either yourself or others. So all you need to do is to go to him and tell him that you need his help. Pretty simple, huh?” (179)

Both *Cut* and *Blade Silver* construct characters who attempt to manage their overwhelming emotions, caused by trauma, with private, controlled cutting, without abusing substances or engaging in promiscuous behaviors, and without attempting suicide. In that sense, these two books are something of a progression from *Crosses*, a progression that was in step with an evolving medical conversation. Nevertheless, in each of these examples, cutting is a problem that is eventually solved with adult (or divine) intervention from an outside authority, with the root cause of the act uncovered, thereby allowing healing to begin. These novels present cutting in evocative terms only to demonstrate its destructive effects.

As a contrast, we might look to Francesca Lia Block’s 1999 novel *Violet and Claire*, a novel that moves cutting out of the central plot of the story to the periphery, where it functions only as character development. In Block’s typical style, *Violet and Claire* is realistic only superficially. It is the story of Violet, a teen filmmaker, and her light-as-air muse Claire, as oblivious about her beauty as Violet is intense about her art. The tale begins when the two meet and Violet, the social outcast, sees in Claire, the new student, the star of her movie. Cutting appears only when Violet reflects back in her narration on being thirteen, when she went through a Goth phase:
Death rock. Skulls and crossbones. That’s when I first dyed my hair black . . . and started smoking cigarettes. I called myself Vile. That was when I cut my arms with a razor blade as a means of creative expression. I only did it lightly, just grazing the skin, to see the way the blood would bleed out, to make myself look tougher. Not like some of those kids who keep going deeper and deeper, wondering what they look like down to the bone. (Block 31)

As far as the reader knows, Violet has stopped cutting, and not because the root of some problem was uncovered or a trauma was resolved. We are, instead, presented with a character who, as opposed to the girls previously mentioned, cuts herself because she desires to feel rather than to escape emotion and does not again, as far as the reader knows, cut in response to any particular trauma. Violet contends that she feels alienated and depressed for no specific reason, just bored by her privileged suburban life with parents who do not care enough about her to even give her “standard sitcom parent/teen conflict” (23). Unlike the truly neglectful homes mentioned above, Violet’s home is simply uninteresting. She also admits, however, that she got “pretty bad,” growing paranoid, having trouble breathing, and talking to herself in homeroom (32). If anything, puberty is the referent for Violet’s cutting. Where she was once proud of her boyish body and her toughness, growing breasts made her simultaneously powerful and endangered (34), and that is when she started calling herself “Vile.” By the time we meet Violet, filmmaking has given her an alternative to cutting, another place to channel her conflict (26).

In many ways, Violet and Claire presents a quite distinct version of cutting by suggesting that it coincides with the onset of puberty and with Violet’s growing awareness of how the female body is viewed in contemporary culture. The book does not condemn Violet or even try to equate her cutting with the dangers of being a teenager. Violet and Claire, instead, represents a different logic altogether, perhaps even further removed from reality than earlier novels depicting SIB, but representative of a shift in young adult literature nonetheless. For Violet, at least, cutting is a phase that is eventually replaced with more productive outlets and creative expression. This less-pathological depiction of cutting suggests that acts of cutting do not necessarily begin in response to specific traumas (such as rape in Speak), or even to traumatic situations, such as an unhealthy home life (for instance, being the daughter of an alcoholic in Cut). Indeed, cutting does not necessarily begin in response to trauma at all and cutters can be—and usually are—high-functioning overachievers both concurrently and later in life.

Violet and Claire represents an even further break from the previous novels. Based upon their studies, psychologists Karen L. Suyemoto and Marian L. MacDonald propose eight dominant theoretical models that address why adolescents might engage in SIB. They find that Expression Theory, where “cutting stems from the need to express or externalize overwhelming anger, anxiety, or pain that is seen as unable to be expressed more directly,” and Control Theory, where “cutting is an attempt to control affect or need,” received the most en-
dorsements from therapists as theories explaining why their adolescent patients self-mutilate (164). While both Expression and Control Theory can broadly explain the motivations behind Nancy’s, Callie’s, and Ruth’s cutting, all three seem to be reacting to trauma related to a dysfunctional family environment, what Suyemoto and MacDonald call the Systemic Theory: “cutting is a way to express the systemic dysfunction of the family or environment. The cutter protects the system by expressing the inexpressible and taking responsibility for it” (164). While Systemic Theory ranks fifth in frequency out of the eight theories in the Suyemoto and MacDonald study, the least reported, Sexual Theory, where “cutting stems from conflicts over sexuality and menarche,” seems to best explain Violet’s reason for cutting (164). For Violet, who has complex responses to her boyish body, cutting happened when she got increasingly frustrated, when a friend moved away, when her body changed, and when she felt lonely and confused. Cutting, like adolescence, was something she eventually grew out of.

It is worth saying here that novels about SIB walk a fine line. It is naturally difficult for any novel about this subject to in any way condone cutting as proper behavior, nor could any novel in any way suggest that adults are wrong to try to help teens come to terms with behaviors that are unhealthy at best. And we are certainly not suggesting that novels about cutting can be judged on their accuracy, since, after all, one of the few certainties of more recent cutting research is that the causes for cutting are varied and diverse. Clearly, teens who cut need help. What Violet and Claire does imply, however, is that there exists the potential for such texts to escape melodrama and prosthelytizing. There is the potential for young adult fiction to imagine complex reasons for cutting, to expand the profile of the typical cutter, and to give teens agency in the process. Most of these characteristics appear when fiction escapes the problem novel format. Meg Rosoff’s how i live now (2004), for instance, challenges the traditional young adult depictions of cutting in two provocative ways: first by presenting a male as the one who cuts, and second by indicating that his choices to cut have more to do with his supernatural empathy for others than it does personal trauma. The novel is set in the very near future and is the story of Daisy, a fifteen-year-old American girl sent to live with her family in England while her father and stepmother prepare for their child to be born. Daisy immediately makes a connection with her four cousins, especially the youngest, nine-year-old Piper, and fourteen-year-old Edmond. Soon after Daisy arrives, her Aunt Penn leaves for Oslo to give a lecture on the “Imminent Threat of War” (Rosoff 15); immediately after Aunt Penn arrives in Norway, “a bomb goes off in the middle of a big train station in London” (24), and World War III has commenced.

The death and destruction of the war affects all of the cousins, especially Edmond, the telepath, who spends much of the occupation in hiding. He is a prisoner of war and is finally a witness to a terrible massacre where people and animals are killed in cold blood (191). Months later, when he finally makes it
back to the family farm, “sick and starving and silent” (Rosoff 189), only to discover that Daisy has left, Edmond is overwhelmed by the visions he still sees and by the pain he cannot help feeling. When Daisy is finally allowed to return to England, six years have passed, and Edmond remains both emotionally and physically scarred. Daisy finds Edmond sitting in the garden behind the house, expressionless, “eyes the color of unsettled weather” (180). Daisy notices that Edmond’s arms “were covered in scars—some new, some healing over, some disappearing into thin white lines . . . [Edmond had] developed a nervous habit of running his fingers along the ridges over and over again” (180). Edmond cannot help but feel everything and everyone around him, everyone’s pain and confusion. And so he isolates and cuts himself to help manage the pain that only he feels so intensely and to punish himself for being alive (190).

As in *Violet and Claire*, cutting is a small part of the overall story, but its inclusion is significant. It is not used to provide dire warnings about the dangers of adolescence, nor does it, in a novel so bereft of adult figures, train teens to see the ultimate value of a caring adult. Unlike *Crosses, Cut, Blade Silver*, and to a lesser degree *Speak*, the novels *Violet and Claire* and *how i live now* are not problem novels, and so there seems to be fewer rules governing the formula for how a cutter should behave. To be fair, these latter novels do reiterate some of the medical ideologies described above. Edmund, for instance, cuts in order to express himself and to deal with overwhelming pain; he is acting in response to trauma, and cutting is linked to other behaviors such as elective mutism. But Rosoff’s novel runs counter to the deeper ideologies of most problem novels. We only discover that he cuts, in fact, 180 pages into a 194-page book. Neither novel condemns cutters’ behavior or sets up knowing authorities to help them; *how i live now* even goes so far as to encourage empathy with Edmund.

*Violet and Claire* is also different from the previous novels discussed in that it draws less from psychological models and more from what we might call culture-bound models that see the body as text. For example, Carolyn Sargent writes, in response to a longer discussion of body commodification by Nancy Nyquist Potter, “One might speculate that . . . self-injury occurs in the context of particular gender ideologies, perhaps in class-based, industrialized societies where the body is highly commodified” (26). Violet, and in particular how her cutting is portrayed, offers a fairly reasonable example of this commodification, especially in the ways her cutting grew from a frustration over her own body. As Susan Bordo notes, “We find the body of the sufferer deeply inscribed with an ideological construction of femininity” (qtd. in Sargent 26). Even Mary Pipher, in *Reviving Ophelia: Saving the Selves of Adolescent Girls*, admits to culturally bound explanations of these acts. She writes:

Self mutilation can be seen as a concrete interpretation of our culture’s injunction to young women to carve themselves into culturally acceptable pieces. As a metaphorical statement, self mutilation can be seen as an act of submission: “I do what the culture tells me to do”; an act of protest: “I will go to even greater extremes than the culture asks me to”; a cry for help: “Stop me from hurting
myself in the ways that the culture directs me”; or an effort to regain control: “I will hurt myself more than the culture can hurt me.” (159)

Such a reading of cutting connects to recent young adult fantasy and science fiction novels that have incorporated cutting into their stories without defaulting to prosthelytizing or melodrama. They instead turn their gaze toward social constructions of gender and in particular toward what the body means in a given culture, who owns it, and what one can do to her own body. These novels are not limited by accuracy, nor are they explicitly grounded in medical research. While more traditional problem novels can be psychoanalyzed in order to make logical sense of the characters’ behaviors, particularly in terms of what the medical community knows about SIB, these more recent novels employ cutting for more complex ends. They are not necessarily more progressive; in fact, they still draw on stereotypical medical “truths.” For instance, many of them still reiterate the assumption that cutting is linked to problems of contagion in large adolescent groups, as we will discuss below. However, these futuristic novels do suggest a provocative and intriguing trend worth noting—namely, cutting extends beyond the merely personal to the broadly social. Furthermore, what makes these novels so interesting is that none of the characters who cuts uses self-mutilation as punishment.

Scott Westerfeld’s *Uglies* trilogy (2005–6) tells the story of a dystopic future in which much of civilization has collapsed because of an oil-transforming bacteria that brings the world to a halt. Those who survive create safe cities, and, in an attempt to create a perfect world, begin processes by which human beings could be perfected biologically. The adolescent world is split between the world of the “uglies,” those who have not undergone the procedure when they turn sixteen, and “pretties,” pampered youth who have been made perfect by science but dulled intellectually. The novel begins before the protagonist Tally has turned sixteen. As she eagerly awaits her transformation, she encounters a fellow ugly named Shay who is reluctant to undergo the procedure. Eventually, both Tally and Shay are turned pretty, both voluntarily and involuntarily, and become temporarily vacuous. That is, until a cure reaches Tally. Shay, however, joins a group that has developed other means to think, called “staying bubbly” in the book. This group is appropriately called “The Cutters.” Tally accidentally stumbles upon one of their cutting ceremonies and sees what the group members do to themselves:

Shay took the knife with her left hand and placed its edge against her right forearm, the wet metal gleaming. She raised both arms, turning slowly, fixing each of the others with her burning gaze. Then she looked up into the rain. The movement was so slight that Tally hardly saw it from her hiding place, but she knew what happened from the reactions of others. (Westerfeld, *Pretties* 174–75)

In the most immediate sense, Westerfeld’s books reiterate many of the common tropes of cutting fiction: although cutting is not done in private, it is still
a behavior owing much to contagion; it is portrayed in frightening terms, yet not described directly; and the teens seem to do it for the worst reasons. But on deeper levels teen cutters are portrayed as implementing a source of power; cutting is a way to gain strength and clarity about the world around them. Even Tally understands this as she watches. "With every cut," the book continues, "Tally felt something hollowing out inside her. She couldn't forget that there was more to this ritual than madness" (Westerfeld, *Pretties* 176). She remembers that her own "fear and panic" earlier in the book gave her a sort of clearheadedness that she had come to value (176), and she sees this clearheadedness in the cutters. Cutting becomes a way to be freed from the vapidity of being a pretty—that is, to stay bubbly, to remain focused, and to resist. Later, when Tally becomes a cutter herself, she realizes, "Power came from icy clarity, from knowing exactly what you were, from cutting" (Westerfield, *Specials* 10).

Westerfeld’s grim depiction of the future brings to mind M. T. Anderson’s 2002 dystopic novel *Feed*, in which the environment has become so polluted that people start developing strange lesions on their bodies. The book describes the lesions as “kind of red and wet-looking” (11), like a disgusting kind of acne or a gaping wound appearing even on the face and arms. Because of the “feed” of the book’s title, which is little more than the Internet implanted in the limbic system, most teenagers tend to pay little attention to anything in the world around them other than shopping. But the lesions become increasingly hard to ignore. Just as they change their hairstyles instantly in response to new trends, some teens start drawing attention to their lesions, even enhancing them, or, as one character, Quendy, calls it, “birching.” She impresses her friends by showing up at school one day with her whole body “cut up with these artificial lesions . . . They were all over her . . . The cuts were like eyes. They got bigger and redder when she moved” (191–92). The lesions, in fact, become fashion trends; they become, in the book’s lingo, “brag” or “the spit” (183).

One might read this so-called birching simply as a kind of body modification, a sort of premeditated alteration of the body in connection with a social statement, much like tattooing. This is certainly not to suggest that body modification like tattoos and body piercings are the same as deliberate self-mutilation; these types of body modifications are usually public forms of “self-expression,” the pain of which is endured for the benefits of the “anticipated goal” (Onacki 400). Quendy’s lesions are shown off rather than hidden, purposeful and public rather than impulsive and personal, which is indicative of most SIB. Her lesions do, however, comment on the overlapping nature of the body, of power, and of corporate culture. Corporate culture so rigidly controls thought in Anderson’s book that even rebellion is co-opted into fashion trends, such as the humorous retro *Riot Gear* line featuring, among other products, the “Watts Riot top” (163). Acts of self-mutilation like birching reveal complex critiques of how individuals respond to power, especially when corporate power itself is so difficult to rebel against. As Don Latham describes it when speaking of Michele Foucault’s theories of power, “If the body is a site acted upon by the
power structures of the community, it can also be used by the individual as a means of undermining those power structures. Destroying the body is the ultimate way for the individual to undermine society’s ability to exert control over the body” (143). Quendi ingests her culture’s values to such a degree that it is written deep into her skin, as a pair of eyes that look back on a ubiquitous and panoptic corporate culture. In Westerfeld’s trilogy, moreover, teenagers become literal products, perfected by surgery and carefully monitored to ensure against wear and tear. To hurt the body is to hurt this product, to use what little power one has.

There is a great deal more to be said about how the body operates within structures of power, particularly in a commodity culture. Our point here is simply that these science fiction novels reflect a shift away from depictions of cutting that are personal, internal, tied to a specific trauma, and involve self-punishment. Those depictions portray the protagonist as a victim, and as such call out for prototypical psychoanalytic interpretations of the act. To understand why Callie or Ruth or Nancy cut, one need only understand the victim. The latter novels mentioned here, however, portray characters who are trying to communicate more than just an internal struggle. In order to understand their acts, one must understand these novels’ cutters in a larger cultural context. We cannot use simple psychoanalytic diagnoses in order to read the purposes behind cutting. These acts are indicative of what Potter calls “cultural rather than individual pathologies” (7). These novels suggest that cutters cut for different reasons, and it is misleading to think of any of the protagonists simply as victim or as dangerous teenagers. Potter writes, “When interpreting another’s signs, then, we need to keep skeptical about cultural imperatives to appeal to conventions that close off alternative meanings or that impose meaning in ways that rob the speaker of her voice” (4). Early problem novels that portray cutting with such exaggerated strokes as we see happening in Crosses, Blade Silver, or even in Cut do just that.

Brian K. Vaughan’s graphic novel series Runaways offers a striking final example. The series tells the story of six affluent adolescents from Malibu who slowly discover that their parents are, in the trappings of the comic mold, super villains, while they themselves have powers they gradually discover and learn to control. Among these powers are the ability to transform into an alien, the ability to control a ravenous dinosaur, and super-strength. The most provocative of the powers, however, belongs to Nico, a Goth-like witch character with jet black hair and dressed in a long, flowing dress. During an early skirmish with one of the adults, Nico is accidentally cut. Upon seeing the blood, she inexplicably recites, “When blood is shed, let the staff of one emerge” (n.p.), after which a long staff emerges from the center of her body. The staff becomes Nico’s weapon with which she summons witch-like powers, yet its emergence is naturally a surprise to Nico. She confesses to a fellow teen, “I don’t know how to describe it. It’s almost like my soul puked it up. Thing seems to work me more than I work it” (n.p.).
The staff disappears into her body after several uses, so Nico concludes that she can summon the staff herself if she cuts herself at appropriate times. Calling herself “Sister Grimm,” Nico takes to carrying around a pocketknife to do just that. The first time she cuts herself and her staff emerges, Nico giggles, “Sorta tickled that time.” In other variations, Nico allows herself to be cut in order to use her staff against attackers, such as in one scene in which she is about to be killed by a teen vampire. Nico allows the boy to bite her neck so that the staff will emerge from her body and pierce the vampire through the heart. For the teens in the *Runaways* series, their superpowers provide them with metaphorical capacity to do something against their parents and about the things they see around them. For Nico, this means cutting herself so her powers can emerge.

Naturally, there are limits to how positively cutting is portrayed in any of the texts mentioned here. When Shay is cured of her prettiness she remarks: “Everything’s less intense now, less extreme. I don’t have to cut myself just to make sense of it all; none of us do” (Westerfeld, *Specials* 292). Tally even learns that the best cure for being “pretty” is to *think* your way out of ideology. Even in the final battle in *Runaways*, Nico decides to use her blade to cut the power cord of a machine that is attacking her rather than to cut herself, a possibly irrelevant gesture (either one would have stopped the machine) that nevertheless hints at the limits to how far these texts are willing to go. By the end of many of these texts, scars that come from cutting stand merely as souvenirs. At the end of Westerfeld’s third book, Tally realizes, “Even the cutting scars on her arm would disappear, and [she] realized she didn’t want to lose them. They were a reminder of everything she’d been through, of what she’d managed to overcome” (*Specials* 345). This conclusion reminds us of Callie’s doctor’s reassurances at the end of *Cut*, that many people who cut can go on to be beautiful people. Callie remarks, “I may not want to get rid of my scars. . . . They tell a story” (McCormick 125). While many later young adult novels remove cutting from its melodramatic roots and feature teens cutting themselves for more intriguing, less personal purposes, these novels cannot help but implicitly reproduce the ideological trends of young adult literature itself, showing that cutting is a temporary and unfortunate act. Even the best fiction understandably gives in to these impulses. With regard to self-injurious behavior, these later novels do maintain many of these core agendas, demonstrating that cutting is ultimately wrong and pathological. But there is certainly something intriguing about those novels that approach SIB from a cultural rather than a psychological perspective. Such novels imply that there is more to cutting than just a simple cry for help.

**Works Cited**


