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## psychiatry in literature

## Am I Normal Yet: insights into the teenage agenda

## Nigethan Sathiyalingam and Paul O. Wilkinson

Am I Normal Yet is a young adult fiction novel written by Holly Bourne, published in 2015. It tells the story of 16-year-old Evie, as she recovers from an episode of obsessive—compulsive disorder (OCD) severe enough to require compulsory psychiatric admission.

The explicit definition of the protagonist's psychiatric diagnosis, and the frank, realistic portrayals of her interactions with mental health services and pharmacological therapy, made *Am I Normal Yet* stand out among other contemporary young adult fiction upon publication, especially in the UK. Focusing on recovery and relapse, the latter manifesting in the text as increasingly frequent 'BAD THOUGHTS', provides an immersive insight into the challenges of everyday life and ongoing management for a teenager with OCD. The book shines a spotlight on the problematic dissonance between common cultural perceptions of OCD and the reality of patient experiences. This book's success has been at the forefront of a recent trend in contemporary UK young adult fiction, with an influx of more realistic and inclusive portrayals of mental illness in teenagers.

OCD commonly presents in adolescence and early adulthood. The novel's target demographic covers both those individuals who are most at risk of developing the illness, as well as their peers, with a particular focus on the perceived stigma of mental illness in the high school environment. However, the educational value of *Am I Normal Yet* is not limited solely to the layperson.

As stated in Tate's paper 'Ideas, concerns and expectations':

'No one goes to a doctor with just a symptom – they go with a complex belief system that frames the way they both understand and respond to medical advice. When the advice is 'congruent' with their beliefs, people are more likely to adhere to medical treatment.' (Reprinted with permission from Elsevier.)

Exploration of ideas, concerns and expectations is a means of elucidating this 'belief system'. Evie's first recovery diary entry crystallises her priorities for and expectations of the coming months. Evie believes that to be happy, she needs to be 'normal', which requires keeping her illness secret, while engaging in everything that she believes normal 16-year-olds do: college, friends, parties and romantic relationships. These deep-set beliefs play a significant part in Evie's decline throughout the book. They underlie her inability to talk to her friends, family or therapist about her worsening symptoms. These beliefs also lead her to persist with an emotionally abusive relationship that only hastens her deterioration.

The book highlights the importance of doctors trying to understand the expectations that patients have about recovery from mental illness. Finding out the agendas of our patients helps us to realise when these agendas are causing them problems, as happens for Evie. Doing this sympathetically helps us to form shared treatment and recovery goals with our patients that make it more likely that they will stay healthy and thrive.

Am I Normal Yet provides us with invaluable insights into the belief systems, social environments and cultural expectations that influence how teenagers interact with healthcare services and manage their conditions; insights that can help improve how we manage some of our youngest and most vulnerable patients.

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