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# Representing Mental Health Struggles in YA Literature: The Case of *Vampire Academy* and *Neferet's Curse*

# La representación de las batallas contra la salud mental en la literatura juvenil: El caso de *Vampire Academy* y *Neferet's Curse*

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**Abstract:** This article examines the representation of mental health in YA vampire fiction, analyzing *Vampire Academy* and *Neferet's Curse* through the lenses of bibliotherapy and scriptotherapy. It argues that while YA literature can offer therapeutic benefits, such as encouraging empathy and prompting readers to seek adult help, it may also be triggering or foster copycat behaviors on vulnerable readers. While *Vampire Academy* portrays recovery as attainable through emotional support, therapy, and personal responsibility—in spite of including some potentially problematic elements—*Neferet's Curse* ultimately silences and revictimizes a sexual assault victim in ways that might hinder the therapeutic potential of trauma narratives. Adopting a theoretical approach, this article considers both the positive aspects and limitations of these novels while offering possibilities for future reader-response research.
**Keywords:** Medical humanities; YA vampire fiction; bibliotherapy; healing process; mental health.
**Summary:** Introduction. The Therapeutic Potential of YA Literature. Lissa Dragomir's Mental Health Recovery. Neferet's Revenge Plot as a Cautionary Tale. Conclusions.

**Resumen:** Este artículo examina la representación de la salud mental en la ficción juvenil sobre vampiros, analizando *Vampire Academy* y *Neferet's Curse* desde la perspectiva de la biblioterapia y la scriptoterapia. Sostiene que, si bien la literatura juvenil puede ofrecer beneficios terapéuticos—como fomentar la empatía e incitar a los lectores a buscar la ayuda de un adulto—también puede ser un detonante o fomentar comportamientos de imitación en lectores vulnerables. Mientras que *Vampire Academy* presenta la recuperación como algo alcanzable

mediante el apoyo emocional, la terapia y la responsabilidad personal—a pesar de incluir algunos elementos potencialmente problemáticos—*Neferet's Curse* acaba silenciando y revictimizando a una víctima de agresión sexual de formas que podrían obstaculizar el potencial terapéutico de las narrativas sobre el trauma. Adoptando un enfoque teórico, este artículo analiza tanto los aspectos positivos como las limitaciones de estas novelas, al tiempo que ofrece posibilidades para futuras investigaciones sobre la respuesta de los lectores.
**Palabras clave:** Humanidades médicas; ficción juvenil de vampiros; biblioterapia; proceso de curación; salud mental.
**Sumario:** Introducción. El potencial terapéutico de la literatura juvenil. La recuperación de la salud mental de Lissa Dragomir. La trama de la venganza de Neferet como cuento con moraleja. Conclusión.

## INTRODUCTION

Mental health has traditionally been misrepresented in popular culture, with fictional narratives either demonizing or romanticizing mental disorders, self-harm and even suicide attempts (Packer xi–xvii). This is the case of young adult (YA) vampire fiction, most notably Stephenie Meyer's *Twilight* series. However, there are also other YA vampire novels that seemingly try to challenge these misguided representations and offer a potentially safer platform for emerging adults who suffer from these mental health issues. In fact, Michael Cart claims that some of the positive traits of YAL include its capacity to reflect teen real-life experiences and worries, as well as encouraging "understanding, empathy and compassion," and revealing hard truths, even when they are difficult to accept.

However, Riestra-Camacho et al. contend that the apparently positive traits that some works of literature might have in mental health struggles need empirical testing to be claimed so. They conducted a reading experiment with a large group of participants to test the claim that bibliotherapy may have a positive therapeutic effect on patients suffering from eating disorders (ED). This experiment followed a creative bibliotherapy approach, which "involves reading literary texts (e.g., poetry or narrative fiction) for therapeutic purposes, especially in the context of mental health conditions" (305). Riestra-Camacho et al. concluded that while it may be useful to include creative bibliotherapy in the therapeutic treatment of ED patients, we must also acknowledge "the potential for damaging as well as beneficial reader responses to textual material" (327). This is the case of Richelle Mead's *Vampire Academy* series and P. C. Cast and K. Cast's *Neferet's Curse*, two YA vampire literary series. The focus

on vampire fiction in the present study is due to the allure that this supernatural creature has on young readers, who "may internalize and project their identities through narratives that blend both real-life struggles and fictional elements" (Riestra-Camacho 19). Indeed, the vampire, a literary figure traditionally associated with death, transformation and anxiety is a particularly suitable character to explore questions of mental health and recovery (Riestra-Camacho 20) in YA fiction.

Mead's *Vampire Academy* is a series of six novels that follow Rose Hathaway, a teenage girl who shares a psychic bond with her best friend, Lissa Dragomir, while they are both students at St. Vladimir's Academy, a boarding school for vampires. The novels have a spin-off series called *Bloodlines* which revolve around Sydney Sage, a human teenager who is part of a clandestine group known as the Alchemists, who keep the existence of vampires secret from humans. By 2021, the franchise had surpassed 15 million copies sold internationally (Radulescu).

The *Vampire Academy* series (Mead) feature several characters who suffer from a number of mental health issues—i.e., addiction, depression, suicidal ideation and anxiety disorders. However, in this article, I only focus on Lissa Dragomir's struggle with depression and self-harm in the aftermath of her family's death. Mead's groundbreaking portrayal of mental health problems in young characters stresses the importance of verbalizing and normalizing them to start their recovery (Darragh 257).

*Neferet's Curse* is the third spin-off novella in Cast and Cast's New York Times bestselling YA fantasy series *House of Night*. The main novels of this literary franchise follow Zoey Redbird, a 16-year-old vampire fledging and her adventures in the House of Night, a boarding school for young vampires in Oklahoma. *Neferet's Curse*, on the other hand, is a neo-Victorian YA novella set in Chicago in 1893 that follows Emily Wheiler—later reborn as Neferet, the High Priestess of the House of Night. It explores her transformation from a victim of incest and domestic violence to an empowered vampress who violently gets back at her abuser. In this article, I explore how *Neferet's Curse* could encourage YA readers to develop empathy and understanding towards Emily and her psychological distress. Yet, the morally ambiguous end might also make readers question the healing potential of revenge plots as well as its appropriateness for a YA audience.

In this article, I first offer an overview of the therapeutic potential of literature, particularly in the case of YA literature through bibliotherapy or scriptotherapy. Then, I compare the representation of mental health

struggles in *Vampire Academy* and *Neferet's Curse* and the heroines' recovery journeys. First, I argue that Lissa Dragomir's path to recovery is arguably portrayed in a positive and encouraging light for YA readers in *Vampire Academy*, although some aspects of her journey may be triggering for vulnerable readers and potentially prompt copycat behaviors. By contrast, Emily/Neferet's revenge plot and forced silence in *Neferet's Curse* lead her to a violent and destructive journey that could be a negative influence on impressionable YA readers. Her ultimate revictimization and vilification could also be discouraging for these readers, who might feel hopeless due to the heroine's tragic evolution. Nonetheless, the story may also have a positive impact on them, as it could make them develop empathy and feel identified with her traumatic experience. This study offers a theoretical analysis of the potential responses of readers experiencing similar difficulties after engaging with these novels, taking into consideration both the possible positive and negative effects they might have on them.

## 1. The Therapeutic Potential of YA Literature

Regarding the therapeutic and healing potential of literature, bibliotherapy emerges as a key concept in the field. According to Zipora Shechtman, the term is made up of the word biblio, whose origin is the Greek word *biblus* ("book,") and therapy, which refers to "*psychological help*" (1). This term could be defined as "the guided reading of written materials in gaining understanding or solving problems relevant to a person's therapeutic needs" (Riordan and Wilson 506). Bibliotherapy sometimes overlaps with Narrative therapy, a collaborative, psychotherapeutic approach developed in the 1980s by Michael White and David Epston. This latter approach focuses on how people construct meaning through stories about their lives, whilst bibliotherapy is the intentional use of literature, books, poetry, or reading materials for therapeutic purposes. Bibliotherapy can be used within many frameworks, such as cognitive behavioural therapy and narrative therapy. These theoretical approaches provide a useful framework for analyzing *Vampire Academy* (Mead) and *Neferet's Curse* (Cast and Cast). Rather than asking whether the novels are simply "positive" or "negative" representations of mental illness, they allow us to examine how particular narrative strategies may encourage—or discourage—therapeutic responses in readers.

Moreover, (non-)fictional narratives portraying mental illnesses may work as a "healing tool" that could be used in medical settings (Artacho-Martín 141), offering emotional support to patients during their medical treatment. At the same time, it is important to stress that one of the main controversies of bibliotherapeutic approaches is that scholars sometimes uncritically take for granted the supposed positive effects that literature might have without empirically testing them on patients.

Consequently, what could be naively deemed potentially therapeutic could actually be detrimental for a reader's vulnerable mental health. This is called 'iatrogenic effects' in medicine and psychology: harmful and unintended health problems derived from a medical treatment. Bibliotherapeutic scholars like Rosen contend that one of the main issues with unevaluated studies is not just that there is no guarantee that the treatments are actually effective, but also that they are not harmful to patients. For example, Troscianko et al. contend that, reading self-help books and narratives non-related to ED appears to have positive effects on patients with an ED, whereas reading (non-)fictional texts connected to their EDs is usually regarded as having negative ones. These effects may include "exacerbation of ED-relevant behaviours (e.g., by gaining tips from protagonists), an increase in obsessive ED-related thoughts, comparisons between oneself and a character . . ., and changes in physical sensations or attitudes towards them" (2).

Likewise, Suzanne Keen (136) contends that literature is often assumed to generate empathy between readers and literary characters, yet empirical evidence for this conjecture remains limited. Rather than automatically producing sympathetic readers, fictional stories create opportunities for developing empathy whose effects depend on contextual factors, including the readers' own experiences and the discussions that surround their reading experience.

Another key term in narrative therapy is "scriptotherapy," coined by Suzette Henke, which she defined as "the process of writing out or writing through traumatic experience in the mode of therapeutic re-enactment" (xii–xiii). Scriptotherapy became very common in survivor narratives and women's autobiographies in the twentieth century, and builds on theories of trauma verbalization. According to these, the victim needs to articulate their trauma and share it with an empathetic audience—in this case, potential readers—to start their recovery (Laub 78). Nevertheless, it is also worth noting that, like any other kind of psychotherapeutic practice, scriptotherapy might lead to the patient's revictimization. According to

Schippert et al., revictimization could be defined as "the reactivation of trauma symptoms via thoughts, memories, or feelings related to the past" traumatic experience. Revictimization stems "from events or interactions in healthcare settings that remind survivors of their previous traumatic experiences" (2).

According to Kimberly Reynolds, the most commonly explored mental health problems in YA novels are self-harm, suicide, depression and cutting—suicide being the least tackled of the four, whereas cutting is the most salient one (103). In these novels, the characters embark on a healing journey, and that they share three key characteristics. First, they usually end on a hopeful note. Second, they target an audience who engage in self-harming behaviors and who seek "solace and guidance." And third, they are also intended for readers who are not experiencing mental health problems. For these latter readers, such novels may be informative and educative, but "discourage copycat behavior" (Kokkola 36). However, studies have shown that literature connected to EDs—particularly anorexia memoirs—is deliberately employed by patients to amplify their risky behaviors (Troscianko 185), although they do not seem to be a trigger for healthy patients (Seaber 485).

In this article, I focus on *Vampire Academy* (Mead) and *Neferet's Curse* (Cast and Cast), two literary works that utilize the vampire to explore mental illness and distress. These include self-cutting and PTSD as a result of sexual assault, respectively. As stated above, vampire fiction is one of the preferred fantasy genres among YA readers, particularly for patients suffering from mental health issues, as in the case of anorexia nervosa (Riestra-Camacho). However, despite the commonly held belief that literature always has a positive effect on susceptible readers and patients, vampire fiction may actually be used to learn about risky behaviors and even "model themselves after the protagonist" (Riestra-Camacho 32). In the next sections I analyze *Vampire Academy* (Mead) and *Neferet's Curse* (Cast and Cast) to examine how these novels may affect prospective readers.

## 2. Lissa Dragomir's Mental Health Recovery

In this section, I examine how *Vampire Academy*'s (Mead) narrative strategies may foster—or hinder—the bibliotherapeutic responses discussed above. The *Vampire Academy* series (Mead) are fantasy novels that explore the lives of teenage vampires, particularly its two female

protagonists: Rose Hathaway and Lissa Dragomir. In Mead's universe, vampires fall into one of the following categories: Moroi—or living vampires—, dhampirs—half-human, half-vampire and the Moroi's designated bodyguards—and Strigoi—undead and soulless vampires. The novels are set in St. Vladimir's academy, a boarding school for vampires, and they are narrated from Rose's perspective.

Nevertheless, these vampiric categories are not Mead's invention, as they are rooted in Romanian folklore. The Moroi (from the Slavic *mora*) are "creatures born out of babies who were not baptized, who were stillborn or miscarried and buried, [and] who come out of their graves after seven years to haunt the living" (Balinisteanu 157). The Moroi are likely a later addition to Romanian vampire folklore, whereas the strigoi presumably date back to the Roman conquest, as some Romanian philologists have traced its etymology back "to the Latin *striga* ('evil spirit, sorcerer')" (Balinisteanu 155). Even though strigoi are not vampires in the Western sense of the term, they share some common traits, such as the fact that they are neither alive nor dead, and that they can be killed by driving a wooden stake through their hearts (Gerard).

Even though understanding Mead's vampire taxonomy is necessary because Lissa's condition is inseparable from the magical system of spirit, the representation of her mental health also depends on how readers access her experience. However, Lissa is not the narrator of the series. The novels present her emotional suffering through her friend Rose's perspective, making narrative voice just as important as the supernatural world-building for understanding the depiction of her trauma.

There is a preference for first-person narrators in YA fiction (Schuhmann 314). One of the reasons behind this choice is that it gives the narrative voice a sense of authenticity and proximity, while third-person narrators are perceived as more distant and detached. However, Barber and Hodges underscore the irony of such preference in YA literature, since adolescent readers will hear "an *authentic* voice that continues to illuminate their experiences and emotions, giving insight into their lives" (123, emphasis added), but this voice is actually constructed by an adult writer in most cases. Therefore, "the so-called adolescent voice is never—and can never be—truly authentic" (Cadden 146).

Regarding readers' empathy, first-person narratives are thought to foster a particularly close relation between reader and narrator and to have a "strong effect on readers" (Keen 144–45). However, empirical results for such assumption remain limited. While some readers seem to prefer a

first-person point of view, studies show that "enhancement of sympathy for protagonists through positive internal focalization actually weakened as teenagers matured" (Keen 146).

Nonetheless, there is no traditional first-person narrator in *Vampire Academy* (Mead), but rather a peripheral one, as the novels are told from the perspective of Rose Hathaway, Lissa Dragomir's best friend and protector. In first-person narrations there is usually a correspondence between the "narrating self" and the "experiencing self," with a "restriction of . . . knowledge and perception" (Edmiston 735). In the case of the peripheral narrator, they are "embodied" in the story, but are not the main character. They usually are "a close friend or admirer" and thus their perspective is external, yet limited—as they are also part of the story, not an external entity with an outsider perspective and "omniscience" (Edmiston 735). In the case of *Vampire Academy* (Mead), Lissa's mental health problems are mainly described from Rose's point of view, with the aforementioned limitations in her external perspective. However, the two girls share a unique psychic bond that allows Rose to connect with Lissa's mind, forcing her to feel the latter's emotions and thoughts, as well as seeing the world through her eyes—in other words, making her perceive reality as if she were inside Lissa's mind and body. From Keen's perspective, *Vampire Academy* (Mead) may invite empathetic engagement with Lissa through Rose's narration, but this does not necessarily mean every reader will respond therapeutically, as discussed above.

Princess Lissa Dragomir is a royal Moroi who suffers from Post-Traumatic Stress Disorder (PTSD) after a car accident where her whole family died. She experiences common symptoms of PTSD, including nightmares, anxiety and panic attacks, as well as survivor's guilt. These experiences are so overwhelming and painful that where she needs to find a physical "release" so as to attenuate them. As a result, she occasionally cuts herself, although she does not seem to have any suicidal ideations, as Rose explains:

> I didn't get her cutting at all. She'd done it sporadically, ever since the accident, and it scared me each time. She'd try to explain it to me, how she didn't want to die—she just needed to get it out somehow. She felt so much emotionally, she would say, that a physical outlet—physical pain—was the only way to make the internal pain go away. It was the only way she could control it. (Mead, *Vampire Academy* 162)

As explained above, there are three different kinds of vampires in Mead's universe: the Moroi, the strigoi and the dhampirs. The Moroi are not humans who have been turned, but they are born as vampires. They are living and mortal creatures who need the protection of their bodyguards, the dhampirs—creatures that are half-human and half-Moroi—from the strigoi—evil vampires who can either be former humans or Moroi who have been turned into undead and immortal creatures.

The Moroi have the ability to wield magic in one of the four elements—fire, water, earth or air—but are physically weak. There is, however, a less known fifth element that Moroi can specialize in: spirit. This is the case of Lissa Dragomir. Moroi who wield spirit have healing abilities and enhanced compulsion or mind control. Other powers include dream walking, telekinesis and sensing auras. They can also resurrect the dead, which establishes a magical and psychic bond between them and the person they have brought back. This person is called "shadow kissed." This is what happened to Lissa and Rose before the events narrated in the series. It is implied in the first book that what "awoke" the spirit abilities in Lissa was seeing her best friend, Rose, die in the same car accident as her parents. When Lissa brought Rose back from the dead, she forged the magical bond between them. This supernatural device is significant for the present argument because it shapes how readers engage emotionally and empathetically with Lissa's psychological suffering.

However, spirit is a dangerous element, as it takes a lot of mental energy and strength to wield it. Framing depression as the cost of magical power externalizes psychological suffering, allowing the novels to explore mental illness through the conventions of fantasy while still inviting readers to recognize familiar emotional experiences. The continued use of spirit has some detrimental side effects on its users, including depression, outbursts of rage, paranoia and, eventually, insanity. This is why spirit users tend to engage in self-harm and many of them attempt to commit suicide. In the case of Lissa, she keeps a razor blade in her purse and uses it to cut herself to release the pain. According to Rose, "[t]he cutting stung horribly, yet in doing it, she was able to focus on the physical pain, distract herself from the mental anguish so that she could feel like she was in control" (Mead, *Vampire Academy* 260). In presenting depression as a supernatural metaphor through spirit magic, Mead's novels externalize psychological suffering without trivializing it. This narrative strategy may make mental distress more accessible to YA readers while simultaneously

constructing professional and adult intervention as necessary, thus reinforcing the bibliotherapeutic model discussed above.

At the end of the first book of the series, Lissa gets adult help, as she tells her teachers and a therapist what she is going through. She is prescribed antidepressants that numb the magic associated with spirit and, therefore, keep her depression and anxiety at bay. However, in the following books of the series it is revealed that spirit users who have brought someone back from the dead can use this "shadow kissed" person to absorb their "darkness"—i.e., the rage, depression and anxiety derived from spirit. This is the case of Rose, who is told by Adrian—another spirit user who can read her aura—that "[e]veryone has light around them, except for you. You have shadows. You take them from Lissa" (Mead, *Frostbite* 275). Shadow-kissed bond mates who absorb this darkness may eventually develop the same mental health issues as spirit users, to the point where they may even commit suicide.

In the third book of the series, *Shadow Kiss*, Lissa decides to stop taking her medication in order to keep practicing her magic with Adrian. She believes that she needs to learn to control her power without any chemical aid. That way she will be able to help others with her healing magic. Yet, it is worth noting that quitting their medication without consulting a doctor first is a dangerous behavior that some patients may incur in, which could have detrimental effects on their overall health and recovery process. Thus, this positive representation of such a risky health decision might actually trigger copycat behavior in readers who could be suffering from similar mental health issues, endangering their own therapeutic journey. Therefore, ironically, the same empathetic engagement that may encourage readers to seek adult help could also make vulnerable readers identify too strongly with Lissa's risky behaviors. Hence, empathy itself is neither inherently beneficial nor harmful; its effects would depend on how readers interpret the narrative.

As a result of Lissa's decision, Rose starts to experience the side effects of spirit, including rage outbursts and depression, as she absorbs Lissa's "darkness." This literal and magical absorption of Lissa's anxiety and depression seems to be a metaphor and a warning of what may happen if you do not seek help to cope with your psychological distress: they might affect others around you. Eventually, Rose also seeks adult help and she is assigned a school counselor who helps her deal with her mental health problems.

According to Artacho-Martín, the relationship between readers and writers in illness narratives is characterized by the concept of mutual care (134). The connection between reader and writer—or narrator, in the case of fiction—emerges from sharing similar traumatic experiences "supported by a caring structure" (Artacho-Martín 134) whereby both readers and writers aim at the same goal: starting their recovery. The manner in which these novels could prompt healing among YA readers is by becoming a positive example for them. Stasiewicz-Bienkowska underscores sharing one's problems with another person, as well as the positive depiction of therapy and counseling sessions as two of the main positive representations of mental health problems in *Vampire Academy* (Mead) ("Suicide" 224). These could encourage readers who are experiencing similar problems to seek adult help, emulating the actions of the protagonists in the novels. Consequently, Mead's vampire series could encourage the former to begin both their healing and identity formation. According to Richmond, said processes usually include "learn[ing] something about themselves, experienc[ing] therapeutic release, feel[ing] less isolated and more connected to others, and develop[ing] new methods of dealing with their problems" (3).

At the end of the last novel of the series, *Last Sacrifice*, the psychic bond between Rose and Lissa is broken when the latter becomes queen, so Rose can no longer tap into her friend's mind to read her thoughts or keep an eye on her. She cannot absorb Lissa's darkness anymore either, and she is afraid that spirit madness will consume her and she will commit suicide. However, as Lissa tells her, "[i]t's my problem now, Rose. Like it always should have been . . . And . . . there's always the antidepressants. I don't like them, but I'm queen now. I have responsibilities. I'll do what I have to . . . I'll protect my mind. Your job's to protect my body, right?" (Mead, *Last Sacrifice* 556). According to Stasiewicz-Bienkowska, it is not until the bond between the two friends is broken that they can establish a healthy relationship in terms of safety and equality ("Suicide" 225). This is a turning point in their lives, as Lissa takes full control and responsibility for her own recovery, and Rose is allowed to make her own choices and put her needs first. Thus, both girls become more mature and independent in the process.

Consequently, I contend that the end of the series seemingly offers a positive message for YA readers, as they are encouraged to take control of their own lives and become independent and empowered agents in their own recovery. This also seems to show the therapeutic potential of

bibliotherapy in helping adolescent patients suffering from mental health issues to recover. However, presenting Lissa's recovery in such positive terms might also have the opposite effect: readers struggling with similar experiences may idealize her recovery and see it as unattainable for them. This, in turn, could discourage them from attempting to initiate their recovery.

It is also worth mentioning that, even if no empirical studies are carried out, fictional narratives still have value for readers. Literature has worked throughout history as stories that have helped humans understand our complex lives and experiences, including our psychological distress. As Raymond A. Mar and Keith Oatley point out, fiction functions as a simulation of social experience that allows readers to rehearse emotions, relationships and moral dilemmas. Thus, reading stories that directly explore mental health problems—such as the ones analyzed in this article—may support potential readers in their recovery through literature's social simulation.

All in all, *Vampire Academy* (Mead) illustrates how narrative perspective, fantasy conventions and the positive representation of therapy may encourage empathy among readers while simultaneously exposing them to potentially risky behaviors. This ambivalent duality reflects the need to carry out experiential studies based on readers' response. This would help us test the actual effects of bibliotherapy that were proposed above.

## 3. NEFERET'S REVENGE PLOT AS A CAUTIONARY TALE

This section scrutinizes how the novella *Neferet's Curse* (Cast and Cast) employs scriptotherapy to represent the female protagonist's psychological distress and sexual trauma. Unlike the *Vampire Academy* series, this novella questions whether trauma narratives necessarily foster the readers' recovery. The novella is written in the form of a personal diary through a first-person narrator. As explained in the previous section, young readers seem to have a preference for this type of focalization. However, there is limited empirical evidence that supports its presumed ability to foster empathy between readers and narrator (Keen 145). Yet, David Lodge argues that first-person narrator "creates an illusion of reality, it commands the willing suspension of the reader's disbelief, by modeling itself on the discourses of personal witness: the confession, the diary, autobiography, the memoir, the deposition" (qtd. in Keen 146). This

is arguably the case of *Neferet's Curse* (Cast and Cast). The diary format is particularly relevant for this analysis because it illustrates both the possibilities and the limitations that scriptotherapy may have in fostering readers' empathy discussed above.

Personal diaries can be used as "unsolicited" illness narratives "which conceptualize suffering within a personal biography" (Alaszewski 43). In *Neferet's Curse*, Cast and Cast fictionalize this therapeutic strategy by presenting Emily/Neferet's traumatic story in the form of a diary. Verbalizing one's trauma through storytelling or by "keeping a diary" may help the victim/survivor to understand, come to terms with and eventually overcome their traumatic experience. As Aaszewski contends, telling one's story "may be an important mechanism by which an individuals [*sic*] makes sense of and manage adverse events, for example by constructing accounts in which they are the active rational agents not the passive victims of events" (44). However, as stated above, another problem that may arise when applying scriptotherapy as a therapeutic practice is that it could lead to the patient's revictimization. In the case of Emily/Neferet, she experiences it throughout her life, as can be seen in other novels in the *House of Night* series (Cast and Cast). Indeed, it is arguably this revictimization that eventually pushes her to become the villain of Cast and Cast's novels.

The diary is a narrative genre that is perceived by readers as "an honest and authentic account by 'telling it as it is' or was," and also allows them to access the narrator's feelings associated with that experience, "whether they are guilt, anxiety or elation" (Aaszewski 44). In the following fragment, Emily starts her diary by stating that she believes she is going mad. Thus, she has decided to keep a written record of her daily life in an attempt to rationalize and come to grips with her mental struggles and to, eventually, find a cure:

> I have begun to suspect my thoughts are quite mad.
> That is why I feel compelled to record them. It could be that in the re-reading, sometime in the future, I will discover why these horrible things have befallen me.
> Or, I will discover that I have, indeed, lost my mind.
> If that be the case, then this will serve as a record of the onset of my paranoia and madness so as to lay the foundation to discover a cure. (Cast and Cast 1)

Following her mother's death in childbirth, Emily becomes increasingly isolated within a patriarchal household where grief, coercive control and incestuous abuse are systematically ignored. These circumstances establish the conditions under which scriptotherapy ultimately fails, since every attempt to verbalize trauma is silenced.

At first, Emily feels flattered by her father's attentions, but his behavior soon starts to morph into a controlling and possessive grasp over every aspect of her life. She also starts noticing that he is sexually attracted to her, probably due to her uncanny resemblance to her late mother. Just like in the *Vampire Academy* series, Emily tries to seek her friends' help by telling them about her father's control and abuse. She confides in her best friend Camille, but rather than empathizing with Emily, she awkwardly tries to change the topic right away. This reaction leads Emily to believe that her experience is too horrifying to share with her social circle, and that she should have kept quiet about it:

> I had begun to say more than Camille could bear to hear and I should have ended the subject and kept my thoughts to myself and to this, my silent, nonjudgmental, journal. But then all I had wanted was someone to talk with—to share my growing fears and frustrations with. (Cast and Cast 36)

This latter statement echoes Laub's argument that the traumatized victim needs to verbalize their experience and share it with an empathetic listener to start the process of recovery (78). In this case, however, Camille cannot bear to listen to and process Emily's account. Thus, an empathetic bond between the two cannot be established, so the protagonist is forced into silence.

Moreover, survivors of (attempted) sexual abuse who are blamed or not believed after speaking out may experience a "second assault," a phenomenon also known as "secondary victimization" (Ahrens 264). In these cases, verbalizing the assault may "have detrimental consequences for rape survivors as they are subjected to further trauma at the hands of the very people they turn to for help. Negative reactions can thereby serve a silencing function" (Ahrens 264). Thus, survivors who at first try to articulate their traumatic experience and seek help may eventually resort to silence so as to avoid public shame and revictimization. This is exactly what happens to Emily in the novella. As a consequence, Emily learns that her father's coercive control and abuse cannot be made public, and that the

only way to escape his prison is by seducing her suitor, Mr. Arthur Simpton, into marrying her.

In the *House of Night* series (Cast and Cast), vampires "come into being through a biological reaction that triggers a recessive vampire gene in certain human teenagers" (Stasiewicz-Bieńkowska, *Girls* 26), with symptoms that include fever, rapid pulse, colds and coughs. Shortly before her transformation into a vampire, Emily's distress is dismissed as female hysteria by both her father and the physician who examines her. This misdiagnosis reflects nineteenth-century medical tendencies to ignore domestic and sexual abuse (Sacco). Since the doctor prescribes her rest and quiet, Emily leaves her father's party and returns home early, where he later finds her and sexually assaults her.

Soon after, Emily is marked as a vampire and enrolls as a student in the Chicago House of Night, leaving her human life behind. Here, her new vampire mentor, Cordelia, offers her some advice to start her recovery. Instead, she breaks into her father's house one night and strangles him with her mother's pearl necklace. This is a turning point for her, since she also decides to adopt a new name as a vampress, Neferet, which represents "female power and freedom from patriarchal oppression" (Stasiewicz-Bieńkowska, *Girls* 196).

At the end of the novella, Neferet is forced to leave Chicago by the Vampyre School council and is sent to the Oklahoma Territory, where she will later become the High Priestess of the House of Night. There, she decides to bury her journal, where she recounted all her story of domestic and sexual abuse, but also, her transformation and ultimate vengeance.

Consequently, the therapeutic value that her journal may have had to help her—and, potentially, to readers—understand her psychological struggles and overcome them is obliterated in the end. This is so because her journal is hidden and buried, rather than being publicly shared with other prospective victims. Thus, Emily's past is to remain silenced and forgotten, so no lesson can be learnt from her experience. In fact, she claims that she does not regret any of her actions, and that she only wants to move forward, leaving all her past behind:

> No one will ever know my secrets for they will be entombed in the land, safely hidden, silent as death. I regret none of my actions and if that curses me, then my final prayer is to let that curse be entombed with this journal, to be imprisoned eternally in sacred ground. (Cast and Cast 146)

This forced silence is problematic for potential readers of the novella who may also be victims of sexual assault. As Laub contends, trauma survivors who are forced to remain silent do not usually find peace and "become victims of a distorted memory" (79). Remaining silent perpetuates the power these memories hold over them, which "pervasively invade and contaminate the survivor's daily life" (Laub 79). This is arguably what happens to Neferet in the *House of Night* novels (Cast and Cast), as her untold memories suffocate her and pollute her existence to the point where she is no longer able to lead a normal life and she eventually becomes the archvillainess of the series.

In an afterword to the novella, the author P. C. Cast addresses her readers in relation to the content of the story and acknowledges that the protagonist's violent revenge against her father is not the right path to recovery. She also claims that this decision did not give Neferet "true empowerment," and advises her readers to seek adult and professional help if they find themselves in a similar experience, as this is the only way to "regain personal power" (Cast and Cast 149). However, the story depicted in the novella could mislead a young and impressionable audience who, as stated above, often regard the protagonists of YA novels as role models and their journeys as a guide to their own recovery. As Stasiewicz-Bienkowska contends, "Neferet's rape-revenge ultimately serves as a cautionary tale and is far from celebratory" (*Girls* 196), but this message might be misinterpreted by young readers.

Therefore, unlike the case of the *Vampire Academy* series (Mead), where the main protagonists have a positive evolution, as they seek adult and professional help and eventually take control of their own recovery, *Neferet's Curse* (Cast and Cast) features a protagonist who is forced to choose a violent path, since she was ignored and turned away when she tried to seek help from her father's abuse. In the main novels of the *House of Night* series (Cast and Cast)—set in Tulsa in the 2000s—Neferet is the High Priestess of the House of Night, still marked by her traumatic experience of sexual assault. Here, she is progressively portrayed as a *femme fatale*, embodying the monstrous feminine. She is a vampire "causing harm to others and using men" through her "powerful allure of darkness" (Etain 14). This seems to prove that in some trauma narratives the protagonist might experience revictimization and, as in this case, vilification.

As Moreno contends, many survivors of sexual assault are revictimized by society, the public, media or even the government, since

their stories are neglected or invalidated. They will likely be criticized if their behavior does not correspond to that of the "*good survivor*" (Moreno 24) and portrayed as the villains of their own assault. This is arguably what happens to Neferet in Cast and Cast's novels, as rather than being allowed to come to terms with her traumatic experience of sexual assault, she is portrayed as an evil temptress.

However, the fact that this novella does not present an empowered or morally righteous character does not necessarily mean that Neferet's experience could not potentially help readers through their mental health struggles. Bibliotherapy was originally thought to have three distinct phases: identification, catharsis and insight, to which universalization or recognition and projection were added (Lutovac and Kaasila 486). When readers start approaching a text, they may first experience an identification phase, where they identify with elements in a story, particularly with the main characters. This could engage readers emotionally, leading them to the catharsis stage, which can be followed by insight. Here, individuals could "see their problem in a new light," coming to terms with how to solve them. In the universalization or recognition phase, they see that they are not alone, or they are not the only ones who have these problems, which ultimately leads them to the projection phase. Here, they are able to imagine for themselves "a different kind of identity" (Lutovac and Kaasila 486). This is what could arguably happen in the case of *Neferet's Curse* (Cast and Cast). Even if the novel does not present an empowered character as in Mead's novels, readers might still empathize or relate to her psychological suffering, which could have a life-changing effect on them.

Overall, in contrast to *Vampire Academy* (Mead), *Neferet's Curse* (Cast and Cast) demonstrates that scriptotherapy and trauma narratives do not necessarily conclude in recovery. Instead, the novella questions assumptions about literature's therapeutic potential by portraying the consequences of silencing and revictimizing victims of sexual assault.

## CONCLUSIONS

Mental health has often been misrepresented in YAL, most notably in fantasy novels such as Meyers's *Twilight* saga, where suicide attempts and self-harm are romanticized (Kokkola). Bibliotherapy explores the therapeutic potential of literature and how it might help readers experiencing the same difficulties through their recovery. This article

adopts a deliberately theoretical approach and therefore does not attempt to empirically measure readers' therapeutic responses.

YAL arguably allows teenage readers to see themselves and their real-life experiences represented in fiction, including emotional suffering and psychological distress. These novels could encourage readers to seek adult help and counseling to overcome them. As a consequence, readers might learn to take control and responsibility for their own recovery, becoming more mature, independent and confident in the process. However, they might also have the opposite effect, as they might prompt copycat behaviors or enable patients to amplify their mental health problems. This is the case of Mead's *Vampire Academy*. The series end on a hopeful note, as Lissa finally learns to control her anxiety and overcomes her depression, becoming an independent and empowered woman. Thus, her experience and healing process can be informative and educational for teenage readers to understand and accept their own mental health issues. However, there are also some aspects of these novels—such as Lissa's decision to stop taking her medication—that might encourage readers experiencing the same difficulties to engage in risky behaviors related to their therapy. Likewise, Lissa's path to recovery could set unattainable therapy goals or standards for young patients, who might feel frustrated for not being able to meet them.

On the other hand, *Neferet's Curse* (Cast and Cast) depicts a protagonist whose forced silence and violent revenge seemingly set her as a negative example for YA readers. Neferet never fully overcomes her sexual assault—as can be seen in the main novels of the *House of Night* series, where her inability to let go of her painful past eventually leads her to become the archvillainess of the story. Thus, she never fully embraces her healing process, as she does not have any adult or healthcare professional to guide her, and she is blinded by her thirst for revenge. However, the fact that Neferet is not portrayed in the series as an empowered survivor, but rather as a villain and a *femme fatale* who preys on innocent men, does not necessarily mean that readers cannot empathize with her traumatic story, or that it cannot positively affect readers. Prospective readers may still feel identified with her through universalization and projection in bibliotherapy, which might prompt them to share their story with empathetic adults or healthcare professionals.

Although this article is intentionally theoretical, future research could examine whether discussing these novels in classrooms, reading groups or therapeutic contexts could produce different responses from solitary

reading. The mediating presence of a teacher or fellow readers when discussing one's experience and connection with a particular book seems —according to Keen—to be pivotal in the development of readers' empathy. However, while Keen stresses the valuable nature of conducting this kind of research in a public setting, she also warns researchers that these readers might feel self-conscious or fall silent in the presence of authoritative teachers or critics, so we need to be cautious and not merely assume the reliability of this type of empirical research (122).

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