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Title: Curing cancer fiction: The significance of abjection within young adult novels about cancer

Date: October 2013

Originally published as: University of Chester MA dissertation


Version of item: Submitted version

Available at: http://hdl.handle.net/10034/311994
Curing Cancer Fiction: The Significance of Abjection within Young Adult Novels about Cancer

H10987

October, 2013
Acknowledgments

I would like to thank Jenny Munroe, whose help, advice and support has been invaluable to over the last three months. The support given by my parents, my fiancé Christian and good friends Char and Becky, has been instrumental to this dissertation. I should like to express my appreciation to the English Department at the University of Chester, in particular to my supervisors Dr Francesca Haig and Dr Peter Blair. Finally, thank you to Annabel, who introduced me to John Green’s *The Fault in Our Stars* and who has supported me from the beginning of this project.
<table>
<thead>
<tr>
<th>Contents</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Introduction</strong></td>
<td>p.5</td>
</tr>
<tr>
<td>The Most Sickening of Wastes: An Introduction to Death, Illness, Sex and Abjection within Seven Young Adult Texts Written about Cancer</td>
<td></td>
</tr>
<tr>
<td><strong>Chapter One</strong></td>
<td>p.15</td>
</tr>
<tr>
<td>The Abject Sick, Agency and Cancer-as-Character</td>
<td></td>
</tr>
<tr>
<td><strong>Chapter Two</strong></td>
<td>p.29</td>
</tr>
<tr>
<td>The Problem with Repressing the Abject: Problem Novels and Progressive and Conservative Approaches to the Abject</td>
<td></td>
</tr>
<tr>
<td><strong>Chapter Three</strong></td>
<td>p.42</td>
</tr>
<tr>
<td>Hope’s Relationship to the Abject, Examined Through Sexual Relationships</td>
<td></td>
</tr>
<tr>
<td><strong>Conclusion</strong></td>
<td>p.61</td>
</tr>
<tr>
<td>Contesting the Sick Body as Irrefutably Abject</td>
<td></td>
</tr>
<tr>
<td><strong>Bibliography</strong></td>
<td>p.65</td>
</tr>
</tbody>
</table>
The Most Sickening of Wastes: An Introduction to Death, Illness, Sex and Abjection within Seven Young Adult Texts Written about Cancer

This dissertation explores the representations of death, illness and sexual relationships within seven young adult novels, in which the texts main thematic interest surrounds the protagonist’s experience of cancer. ¹ The text’s chosen for analysis are: John Green’s *The Fault in Our Stars* (2012), Jenny Downham’s *Now is Good* (2012),² Wendy Wunder’s *The Probability of Miracles* (2011), Lois Lowry’s *A Summer to Die* (1977), Lurlene McDaniel’s *Too Young to Die* (1989), McDaniel’s *Six Months to Live* (1985) and McDaniel’s *Till Death Do Us Part* (1997). This dissertation argues that the extent to which a text could be seen to engage with Julia Kristeva’s theory of abjection, as described within her seminal text *The Powers of Horror An Essay on Abjection* (1982), has a specific correlation to how the portrayal of death, illness and romantic relationships read. Moreover texts which fail to engage consistently with the abject, by ignoring or minimising the realities of cancer and subjectivity of the protagonists, are likely to propagate problematic stereotypes about death, illness and sexual intimacy.

Chapter One of this work explores the depiction of characters within Lowry’s *A Summer to Die*, McDaniel’s *Too Young to Die*, Green’s *The Fault in Our Stars*, Downham’s *Now is Good* and Wunder’s *The Probability of Miracles*, specifically linking a sustained engagement with the abject directly to the agency the given protagonist displays. Chapter Two expands on this discussion, highlighting important differences between progressive and conservative approaches to the abject, and linking this with Canadian critic, Shelia Egoff’s, influential essay, ‘The Problem Novel’ (1980). Chapter Three expands on the argument presented within Chapter’s One and Two;

¹ Young Adult will henceforth be referred to as YA
² Downham’s *Now is Good* was first published as *Before I Die* (London: David Fickling Books, 2007). The title changed to link in with the title of the film, produced by Ol Parker, released in 2012.
namely that relationships play a central role within these narratives about cancer.

Arguing that, within some of these texts, sexual intimacy for a cancerous protagonist is depicted in order to contest accepted stereotypes concerning the sick body as abject and repellent. This final chapter connects romantic relationships with hope; assessing how abjection links with how hope is portrayed.

That three McDaniel’s texts are included for analysis for this dissertation is purposeful and highly pertinent; McDaniel is the author of over fifty YA texts, of which nearly all have plots focusing around illness and death. Within these three texts, the portrayal of death and illness is notable for its sanitized, stereotypical portrayal of the ‘good’ sufferer. Death is depicted as a heavenly reprieve from suffering. McDaniel’s texts are relatively short (averaging one hundred and fifty pages) and thus focusing on a separate text by McDaniel within each chapter of this work allows for a more fruitful discussion than would be possible if one text was analysed over the three chapters. Due to this, similar themes and questions arise in the analysis of McDaniel’s various texts; for instance the aforementioned ‘good’ sufferer can be located in Too Young to Die, Six Months to Live and Till Death Do us Part. However, this dissertation will demonstrate that this repeated motif lends itself to an analysis of the way in which McDaniel’s texts engage with, or refuse to engage with, the abject, presenting adolescence as an abject space, and female protagonists as passive and inherently good.

As mentioned above, this dissertation analyses these seven YA texts in relation to their engagement with abjection. Bulgarian-French literary critic and psychoanalyst, Julia Kristeva’s influential text The Powers of Horror An Essay on Abjection, provides an in-depth exploration into abjection and its role in society. In simplified terms the process of abjection is the experience of a deep, reactionary feeling.

of horror or disgust that protects the subject from abject wastes that threaten the self-identity, or life, of the subject. Crucially however, the abject both repels and attracts, ‘simultaneously beseeches and pulverizes’; abjection is necessary, for the subject to maintain the borders of their healthy, clean self, yet it demands the subject acknowledge or come in contact with whatever is dirty or disgusting in order to expel it. Abjection, then, is complex psychological and often physiological process affecting all living subjects. Kristeva’s text refers to psychoanalysis, drawing and expanding on the work of eminent French psychoanalyst, Jacques Lacan in order to explore the different processes and instances of abjection at work in society. Kristeva terms abjection as: ‘What does not respect borders, positions, rules. The in-between, the ambiguous, the composite’, as that which is ‘immoral, sinister, scheming’. Kristeva theorizes that the subject’s primary experience of abjection occurs when the child attempts to define their identity as separate from the mother. Through making the mother the Other, the child attempts to define their ‘I’ meaning that the child must abject the mother, who gave life, in order to create their own stable self-identity. This state, of abjecting the mother, allows entry into the Symbolic Order, by accepting the laws according to the Name-of-the-Father thus rejecting the mother as the matriarch. All further experiences of abjection, such as being in contact with types of food that provoke revulsion, the sight of blood or other bodily wastes remind us of our primary abjection of the mother. The abject, then, is both recognisable to the subject, and feared, because it signifies a time where the subject had no mastery of language, and had no self-identity outside of his/her mother. The important process of the subject’s ‘mapping of the self’ clean and

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proper body’\textsuperscript{8} relies on the subject rejecting wastes, such as faeces, pus, blood, sperm and vomit in order to adhere to socially accepted behaviour. Following on from bodily wastes, such as vomit and blood, which may signify illness (which is in itself abject), a dead body, the corpse, is a site of abjection in the extreme: ‘the most sickening of wastes’.\textsuperscript{9}

This dissertation is interested mainly with the threat that confronting, repressing and repelling the abject has on a subject’s identity, and how the established borders are altered in order to deal with what is deemed abject. Moreover this work analyses how texts conform to, or negate the notion that the sick body is abject.

Borders created by the individual, or society’s, conception of a unified, useful self or group, are disturbed by the abject. Thus this dissertation explores the abject in relation to a protagonist who has cancer, whose illnesses may mean they are no longer deemed to be ‘useful’ or productive in society, and who represents the abject because they symbolise the threat of early death. As mentioned, Kristeva is concerned with abject wastes, such as blood, vomit and urine, which all (especially blood) feature within the texts discussed. That all seven central protagonists (or the protagonist’s sister, in the case of \textit{A Summer to Die}) are female is also of significant interest because Kristeva is interested in the female body’s relation to the abject. As Barbara Creed explains in her text on abjection in horror films, \textit{The Monstrous-Feminine} (1993): ‘woman is specifically related to polluting objects which fall into two categories: excremental and menstrual. This in turn gives woman a special relationship to the abject.’\textsuperscript{10}

Kristeva’s discussion of abjection is extensive, finding examples

\textsuperscript{8} Kristeva, \textit{The Powers of Horror}, p. 72.
\textsuperscript{9} Kristeva, \textit{The Powers of Horror}, p. 3.
\textsuperscript{10} Barbara Creed \textit{The Monstrous Feminine Film, Feminism Psychoanalysis} (London: Routledge, 1993) p. 10.
within psychoanalysis, religion and literature. A full examination of Kristeva’s theory is beyond the remit of this dissertation, thus this work shall mostly draw on Kristeva’s phenomenological examples of the abject, and is primarily interested in the female body, blood, and bodily abjection. This dissertation regularly refers to Creed’s *The Monstrous-Feminine* as her study of the abject within horror films is relevant to the argument presented. In terms of critical theory it is noticeable that this dissertation refrains from acknowledging the importance of Susan Sontag’s text *Illness as Metaphor, and AIDS and its Metaphors* (1978). Whilst Sontag’s discussion of illness and cancer are important and influential, including her writings in this dissertation would have oversaturated the analysis presented with theory. 11 In terms of similar critical material it is important to acknowledge Marta Westwater’s *Giant Despair meets Hopeful, Kristevan readings in Adolescent Fiction* (2000), which applies Kristevan readings to seven young adult novels in order to illustrate: ‘the power of fiction to sustain and preserve the ethical and social values of community life’.12 Thus, insights from this text are applied when appropriate, although this dissertation is more specific, applying abjection (rather than all of Kristeva’s texts) to narrative concerned with cancer (opposed to a wider range of topics from the YA category).

When discussing YA texts, it is helpful to briefly outline some key points within the development and growth of this relatively new category.13 This brief

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11 It is, however, important to note that John Green acknowledges Sontag’s influence on *The Fault in Our Stars*, accounting for the preponderance of military and war metaphors within the text. On a Question and Answer page on his website Green states that: ‘I reread “Illness as Metaphor” and also her brilliant *Regarding the Suffering of Others* while writing *The Fault in Our Stars*. In fact, there were a couple Sontag quotes as epigraphs in earlier drafts.’ [http://johngreenbooks.com/questions-about-the-fault-in-our-stars-spoilers/#symbols](http://johngreenbooks.com/questions-about-the-fault-in-our-stars-spoilers/#symbols) [accessed 1 June 2013]


13 It is important to note the use of the word category, rather than genre. The YA category, like adult category books, incorporates a wide range of genres such as Science Fiction, Fantasy etc. but it is not a genre itself, the proposed age ranges refer to an overall demographic. However, many within the media, as well as critics, erroneously term it as such. For example, Roberta Seelinger Trites refers to the ‘genre’ in *Disturbing the Universe: Power and Repression in Adolescent Literature* (Iowa: University of Iowa
introduction, however, due to relevance and brevity, only addresses the growth and changes of the realistic sub-genre of the YA category. This dissertation defines YA texts as those written directly for young adults, as distinct from adult and children, about issues that concern them with a young adult protagonist being the central focus within the narrative. However, Michael Cart correctly points out that any agreed definition of YA literature is ‘inherently slippery and amorphous’, 14 which is partly due to arguments surrounding age ranges and audience, and partly because the term young adult is such a recent conception, much like the category of literature itself. Indeed, as Roberta Seelinger Trites asserts: ‘Adolescence as such did not become institutionalized in America until the twentieth century, so it stands to reason that books marketed specifically to this demographic arose as a product of the twentieth century’. 15 A canon of YA is as contested as an exact definition, although the majority of critics, including Cart and Trites, present S. E Hinton’s The Outsiders (1967) as a primary example of a YA text. Trites also cites Maureen Daly’s Seventeenth Summer (1951), and J.D Salinger’s The Catcher in the Rye (1951) as canonical texts, however, both were written for an adult audience. So, whilst arguably texts that have been important to the YA audience, as not written specifically for them, they are not texts that meet the definition imposed within this work.

Alongside The Outsiders, Robert Cormier’s The Chocolate War

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14 Micheal Cart, Young Adult Literature From Romance to Realism (Chicago: American Library Association, 2010)
16 Paul Zindel’s *The Pigman* (1968) and Judy Blume’s *Forever* (1975) are also widely accepted to be pivotal texts. *Forever* is regarded as one of the first YA texts to attempt to deal with teenage sexuality, portraying intercourse, but the portrayal of Katherine and Michael’s sexual relationship has been criticised. In his article ‘The Novel of Crisis: Contemporary Adolescent Fiction’, Steve Roxborough writes of *Forever*: ‘it is an information book and stands, or falls, finally, on the accuracy of the information it attempts to present’. 17 *Go Ask Alice* (1971), 18 is another notable example of an early YA text, criticised for its didactic, patronising message. The text portrays the drug addiction and death of a fifteen year old middle class diarist. *Go Ask Alice* is rooted in the social concerns of the era in which it is written, graphically although not particularly realistically, depicting the drug use, counter culture and sexual revolution of the late sixties and early seventies. Kin Platt’s *Hey Dummy* (1971), in which protagonist Neil befriends a boy with brain damage, is a differing example of a didactic take on social issues. Such similarity in tropes and themes found within such texts led to a sub-grouping of realistic texts being referred to as ‘problem novels’, which were highly prevalent during the sixties and seventies, perhaps because of the preponderance of social unrest, combined with the fact adolescents were embracing, and establishing their identity as a social group entirely distinct from children or adults. Of the decade following *Forever*, Patty Campell gives reasoning for at least some of this unrest:

16 It is interesting to note that as well as being a text discussed by Westwater within *Giant Despair meets Hopeful*, Karen Coats writes about the prevalence of abjection within *The Chocolate War* within her text *Looking Glasses and Neverlands* in which she argues that abjection can be connected to a lack of parental influence during adolescence, and a wish for the protagonist to express his/herself as independent subject. Karen Coats, *Looking Glasses and Neverlands; Lacan Desire and Subjectivity in Children’s Literature* (Iowa: Iowa University Press, 2004)


18 At its publication, *Go Ask Alice* was touted as a diary written by a ‘real’ teenager, found by her parents after she had died from a drug overdose. However it is largely accepted that the text was at very least heavily edited, if not written, by Beatrice Sparks, a Mormon youth counsellor. Aileen Pace Nilson interviewed Sparks about the text: Aileen Pace Nilson. “The House that Alice Built: An Interview With the Author That Brought You ‘Go Ask Alice’” School Library Journal (1979): 109-112.
The sexual novel morphed into the AIDS novel, with M. E. Kerr’s *Night Kites* (1986) and other books that showed us young people trying to make sense of the age of AIDS. Only recently […] have YA authors begun to explore sexuality again in gritty novels like *Doing It* by Melvin Burgess (2004).

Sexuality and sex, like death, have become taboo issues that some feel YA need to be protected from. That YA literature, particularly realistic fiction, has a tendency to deal with controversial issues cannot be denied, and like all literature, the texts produced are variable in success and skill. There is a long standing and hotly contested debate, within both critical spheres and within the media; about how realistically realistic issues should be presented to a young adult audience. *The Bridge to Terabithia* (1977), which won the Newberry Medal in 1978, is regarded as a classic text that deals with accidental death, wherein protagonist Jessie’s best-friend, Leslie, dies after falling into a swollen creek. It is notable that *The Bridge to Terabithia* appears as number eight on American Library Association’s list of ‘Most Frequently Challenged Books’ for 1990 – 1999 and remains on the list, at number twenty eight, for the decade spanning 2000 - 2009.19 Death, suicide, sexual relationships and illness (including mental illness) have become more evident in YA literature as the category has become more accepted, and as stigma surrounding such issues has been confronted. In recent years, realistic texts have moved away from the didactic messages propagated within problem novels, and texts dealing with similar issues, produce plots that more complex and innovative.

Examples of recent, popular texts which deal with controversial issues, with innovative complexity, include Jay Asher’s *13 Reasons Why* (2007), which details a school girls thirteen reasons for committing suicide, and Cheryl Rainfield’s *Scars* (2010), which deals with topics including self-harm and sexual abuse. Laurie

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19 [http://www.ala.org/bbooks/100-most-frequently-challenged-books-1990%E2%80%931999](http://www.ala.org/bbooks/100-most-frequently-challenged-books-1990%E2%80%931999) [accessed 20 September 2013]. It is pertinent that Cormier’s *The Chocolate War* and Blume’s *Forever* are also found within the top ten for the years spanning 1990 – 1999, and both appear within the top twenty of the ALA’s list for 2000 - 2009.
Halse Anderson is also well regarded, having written *Speak* (1999), which deals with sexual abuse and *Wintergirls* (2009), which deals with eating disorders. Recently, these explicit and controversial themes that populate many YA texts have received media interest. In an article titled ‘Darkness too Visible,’ written for the *Wall Street Journal*, Meghan Cox Gurdon argued that:

> The book business exists to sell books; parents exist to rear children, and oughtn't be daunted by cries of censorship. No family is obliged to acquiesce when publishers use the vehicle of fundamental free-expression principles to try to bulldoze coarseness or misery into their children's lives.  

This dissertation, however, argues that when engaging with abjection, texts such as *The Fault in Our Stars* and *Now is Good* are able to generate hope rather than being narratives which ‘bulldoze coarseness’. In a similar article published by *The Daily Mail*, Tanith Carey deems Green’s *The Fault in Our Stars* as: ‘mawkish at best, exploitive at worst’. However, such appraisals appear to overlook the fact that many YA texts, such as *The Fault in Our Stars* interrogate such issues in a way which give thoughtful consideration to other, more universal, aspects of adolescence.

This dissertation focuses on a specific sub-genre of realistic fiction, texts written about cancer, and focuses on the portrayal of illness, death and sexual relationships. That some of the changes in these portrayals can perhaps be attributed to changing trends within YA literature will be discussed further within Chapter Two and explains the need for a brief, selective, history of YA literature to be included within this introduction. This dissertation seeks to apply Kristeva’s theory of abjection to texts of varying skill and success, with varying publication dates, in order to demonstrate that


a text which confronts the abject, opposed to repressing illness, death and sexual relationships, is able to refute the notion of the sick body as inherently abject, and furthermore, propagates hope.
Chapter One
The Abject Sick, Agency and Cancer-as-Character

Within *Powers of Horror* Kristeva describes the abject as: ‘that which does not respect borders, positions, rules’. Abjection is a societal and personal rejection of that which is deemed sickening, dangerous or unproductive. Abjection abounds, then, in texts about the adolescent female with cancer, partially because Kristeva links the abject with the feminine. This is pertinent within McDaniel’s *Too Young to Die* and Lowry’s *A Summer to Die*, discussed within this chapter, where blood links with menstruation as well as being a by-product of the cancer within the text. Further, adolescence is socially considered as time of vitality and health. Therefore within these texts ‘the sick self’ becomes bound with notions of differentiation from the ‘healthy’ body of society as a whole, and the boundary between life and death becomes more fluid.

This chapter will highlight the differing representations of abjection within Green’s *The Fault in Our Stars*, McDaniel’s *Too Young to Die* Lowry’s *A Summer to Die*, and Wunder’s *The Probability of Miracles*. This chapter will argue that Green’s text is able to refute the notion that the sick or dying is inherently abject through a consistent engagement with abjection. This engagement allows protagonist Hazel to express her emotions and fears surrounding her situation which positions her on the periphery of society as abject. Through her expression of emotions Hazel is able gain agency, presenting as a relatable, fully dimensional character. McDaniel’s text, on the other hand, presents protagonist, Melissa, whose character is fully eclipsed by her illness. Melissa is portrayed as emblematic of female innocence and purity due to her cancer, thus the notion of the sick body as abject may not seem appropriate, yet

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McDaniel’s reversal of this concept remains interesting. This chapter will then demonstrates that Lowry’s extreme sanitisation of Molly’s illness within *A Summer to Die* is disadvantageous to the depiction of Meg, Molly’s sister, narrator and main protagonist, however, there is one instance of valuable interaction with the abject within this text. Finally, Wunder’s text abjects the ‘sick self’ to such an extent that those around protagonist, Cam, believe she may be healthy. This extreme repression of the abject does not allow Cam space to address her illness and thus it is portrayed unrealistically. However, compared to McDaniel’s Melissa and Lowry’s Meg, Cam remains an engaging character.

Green’s *The Fault in Our Stars* is written in first person, immediately allowing central protagonist and narrator, Hazel, agency over how the narrative is communicated at a time when cancer has control, to an extent, over her body. Symbolically if not physically Hazel has lost control over her body which has been besieged by ‘Thyroid [cancer] […] with an impressive and long-settled satellite colony in my lungs’. Kristeva describes the abject as something: ‘beyond the scope of […] the tolerable’ and in this way it is not dissimilar to Hazel’s experience of terminal cancer, which, much like the abject, must become tolerable in order for Hazel to survive emotionally at a time when her body’s ability to survive physically is constantly endangered.

As the narrative opens Hazel is struggling with the terminal nature of her illness. She deems her ‘paralyzing and totally clinical depression’ (p.4) as a ‘side effect of dying’ (p.3), she states that: ‘Depression is not a side effect of cancer. Depression is a side effect of dying. (Cancer is also a side effect of dying. Almost everything is, really)’ (p.3). Hazel’s linking of dying to ‘almost everything’ signifies the central position the abject inhabits. Kristeva’s theory of abjection is based around a subject’s inherent

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23 John Green, *The Fault in Our Stars* (London: Penguin, 2012) p.5. All further references will be given in the body of the text.

fragility and the universal, encompassing, fear of death. Bodily fluids, spoilt food, sickness, crime, and all that ‘does not respect borders, positions, rules’ serve to remind the subject that the body is vulnerable and uncontrolled, and that borders positioned to withhold the abject can easily be breached. Because Hazel is terminally ill, the borders that Kristeva refers to, ‘How can I be without border?’ are rendered obsolete in protecting her from her fear of death. Hazel has to re-arrange and re-create these borders to protect herself from the abject. An absence of such borders, Kristeva argues, can lead to psychosis; for Hazel, it has led to her depression and isolation.

Green’s text is a romance just as much as it is a ‘cancer text’ and Hazel's relationship with Augustus marks the primary means by which Hazel is able to protect herself from the abject. Her relationship with Augustus creates a distraction from the encompassing, abject nature of her cancer. Struggling with the restrictions her illness imposes she reminds herself that: ‘I was living with cancer not dying of it, […] I musn’t let it kill me before it kills me’ (p.121). Hazel meets Augustus through a support group which she initially rejects as ‘depressing as hell’ (p.4). Even at a time when her illness and fear inhabit a central position in her life, Hazel does not want to be defined by her illness, as illustrated by sarcastic rebuttal of the support group leader who she describes as: ‘eking out a meagre living by exploiting his cancertastic past […] cancer took both his nuts but spared what only the most generous soul would call his life’ (p.5). This unforgiving statement exemplifies Hazel’s wish for agency, she will not be able to ‘exploit [her] cancertastic past’ (p.5) because her illness is terminal but Hazel fervently wishes for normalcy. In many way her character is presented as such, concerned with ‘twelve hour marathon[s] of America’s Next Top Model’ (p.6) and ‘conscious of my myriad of insufficiencies’ (p.9).

In a conversation with Augustus in which he definitively states “Everybody wishes to live an extraordinary life’’ (p.169) Hazel emphatically counters this view: “‘It’s really mean of you to say that the only lives that matter are the ones that are lived for something or die for something’’ (p.169). The notion of the sick self as inherently abject is challenged here, due to the texts consistent portrayal of Hazel’s eloquency, and elegance, in voicing her emotions. The text succeeds in presenting Hazel and Augustus as adolescents in a relationship, and as adolescents with cancer, without one state cancelling the other or becoming eclipsed. As mentioned, Hazel’s relationship with Augustus allows her to experience elements of teenage normalcy, such as loaded, romantic pauses the phone: ‘The line was quiet but not dead. I almost felt like he was there in my room with me […] but instead we were together in some invisible third space that could only be visited on the phone’ (p.72). Their relationship accommodates their respective limitations, therefore presenting what is societal abject (their cancers) as something which can be accepted and tolerated. The scene in which they first kiss explicitly demonstrates this, and rather than being linked only to the abject Hazel feels appreciation her body, which becomes tolerable:

And then we were kissing. My hands let go of the oxygen cart and I reached up for his neck […] The space around us evaporated, and for a weird moment I really liked my body; this cancer ruined thing I’d spent years dragging around suddenly seemed worth the struggle, worth the chest tubes and the PICC lines and the ceaseless bodily betrayal of the tumours (p.203)

That the above scene takes place in Anne Frank’s house is even more interesting in terms of abjection, as it occurs in a space heralded as special, meditative, and sacred. It is a space thoroughly linked to death, and is therefore significantly symbolically abject. Hazel and Augustus’s kiss challenges the societal understanding of what is allowable as abject subjects (that kiss in public challenges this; that they kiss in public in a memorial for a dead teenager more so).
Abjection within *The Fault in Our Stars* allows illness and death to be portrayed realistically. Suffering from an ‘apocalyptic finger of pain fingering out from an unreachable centre of my head’, (p. 104) Hazel laments that despite attempting to convince herself that: ‘consciousness is temporary’ (p.105) she was unable to extract herself from the reality of her situation: ‘But just like always, I didn’t slip away. I was left on the shore with waves washing over me, unable to drown’ (p.105). Here, the familiar trope of the sanitised, passive cancer sufferer (as depicted in McDaniel’s texts, as will be demonstrated) is rejected as unrealistic. Hazel does not ‘slip away’, instead she suffers. Abject waste products and medical procedures are realistically confronted:

> My headache was caused by poor oxygenation, which was caused by my lungs swimming in fluid, a litre and a half (!!!) of which had been successfully drained from my chest […] where there was, *hey look at that*, a tube that went from my chest into a plastic bladder half full of liquid that for all the world resembled my dad’s favourite amber ale. (p.107)

Hazel’s association of chest liquid with amber ale is discomforting because it evokes the abject, the waste of the chest liquid signifies illness and is a reminder of death. In Hazel’s case this reminder of death is steeped more fully in the abject because her cancer is terminal, and each relapse may indicate her condition is worsening. However, in direct contrast to that which is abject, Hazel then relates the abject waste of fluid from her lungs with the familiar and the day-to-day: ‘my dad’s favourite amber ale’ (p.107). Creed writes that ‘although the subject must exclude the abject, the abject must, nevertheless, be tolerated for that which threatens life helps define life’. 27 Hazel’s description of amber ale can be read as another method of tolerating, and familiarising her illness. Moreover, Hazel’s humour, evidenced here and throughout the text, works to make her narrative voice accessible and approachable.

Karen Coats in *Looking Glasses and Neverlands* states that: ‘adolescence, like

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abjection, breaches and challenges boundaries’.\(^{28}\) Therefore, when a subject has cancer the already-existing search for, and confusion over, identity that occurs in ‘normal’ adolescence is intensified because illness deems that the subject is considered societally as abject, the body is not clean, nor proper. *The Fault in Our Stars* is sensitive to this need for subjective identity, and works to refute notions of illness as intrinsically abject. However, McDaniel’s *Too Young to Die* appears to make use of this separation, instead positioning society as dangerous and abject. Illness, within this text, symbolises a safe space of protection.\(^{29}\)

Within *Too Young to Die*, Melissa is diagnosed with leukaemia after being admitted to hospital for tests: ‘Dr Rowan’s unswerving gaze trapped hers and held it. “The diagnosis is lymphocytic leukaemia, Melissa.” […] “It’s a form of cancer”.’\(^{30}\) It is key to note that the text expends approximately the first third of the narrative positioning Melissa as fundamentally ‘good’ before the onset of her cancer (her tests begin on page 46 of the 166 page text). However, this energy expended on the development of character delivers a didactic message rather than a relatable protagonist.

Melissa wishes for a career in Law: ‘probably’ (p.6) and is ‘“pretty but intellectual”’ (p.6). The latter is a positive trait, masquerading as a negative in the eyes of ‘the most popular kids a Lincoln high’ (p.6) who are implicitly situated as comparatively lesser for believing ‘intellectual’ and ‘“bookish”’ (p.6) to have negative connotations. This heralding of academic ability as positive is not in itself a negative viewpoint to circulate, but, as stated, the texts tone is frequently didactic and thus Melissa is denied the agency Green affords Hazel.

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\(^{29}\) This is a theme continued throughout all three of McDaniel’s texts that are discussed in this work, as is the protagonist as emblematic of purity and ‘goodness’, these themes will be referred to in all three chapters, because such themes construct the base of McDaniel’s texts.

\(^{30}\) Lurlene McDaniel, *Too Young to Die* (New York: Bantam books, 1989) p. 57. All further references will be given in the body of the text.
Melissa and Jory represent opposing symbols of what is ‘good’ and that which is considered, for McDaniel, abject. Jory is concerned with ‘boys and partying’ (p.6). Jory’s identity is defined by (what McDaniel surmises to be) her unwise, unproductive choices relating to boys and parties, on the other hand, Melissa’s future is assured to be productive in terms of her contribution to society and her personal success: ‘Jory would never understand […] she [Melissa] wanted things from life, things that college and hard work could bring her. Life was more than endless rounds of parties and days spent as the country club’ (p.16). Coats writes that: ‘the abject person; as an outsider […] has an intensely ambivalent relationship towards the walls that prevent him or her from fitting in’.

Too Young to Die displays a reversal of this social form of abjection which Coats describes. Melissa is discernibly different from her peers, firstly due to her academic abilities and aspirations and then later by her cancer, thus, she inhabits the ‘social rim’. However, this separation is depicted as a positive and, ultimately, a protective state.

McDaniel’s text is written in third person which does not allow Mellissa control over how her experiences and illness are related. This negatively affects the depiction of Melissa as a character, meaning she instead becomes symbolic moral ‘purity’ and conservative femininity.

Notably, McDaniel relies on a third-person perspective to establish each precarious situation. Rather than write first – or second narratives with shock endings, McDaniel creates an omniscient outsider who describes the heroine’s powerful feelings, creating the illusion of psychological intimacy while maintaining a safe physical distance from the abject body.

31 Coats, Looking Glasses and Neverlands, p. 138.
32 Coats, Looking Glasses and Neverlands, p. 138.
33 All three of McDaniel’s texts discussed throughout this dissertation are written in third person, and therefore this point, concerning the lack of agency extends to Dawn within Six Months to Live and April within Till Death Do Us Part.
This distance negatively impacts on the creation of character; Melissa’s character is lacking in the nuanced expression of emotions that Hazel, within *The Fault in Our Stars*, benefits from, and in this way cancer and illness eclipses the protagonist within this narrative. The text becomes more about the *tragedy* of cancer, befalling a near perfect protagonist, than about Melissa’s insights or emotions. Furthermore, the explicit foreshadowing of Melissa’s symptoms, which begin on the second page of the narrative, stipulates that the development of Melissa’s character is rivalled by the progression of her cancer: a shaving cut that doesn’t clot is the primary sign; the ‘blood that trickled down her tanned leg’ (p.6) is symbolic of the abject. Blood is an abject substance, as Creed explains: ‘All signs of bodily excretion – bile, urine, shit, mucus, spittle, blood – must be treated as abject – cleaned up and removed from sight’.\(^{35}\) Further to this, Melissa’s blood brings to mind the other type of female blood that is likely to trickle down her leg: menstrual blood. This depiction of the first symptom of cancer as thoroughly abject is one of the few places in which the abject is presented in a typical sense within *Too Young to Die*, rather than presenting adolescence and femininity as abject. Of the blood Jory mentions: ‘“You’d have thought it would have clotted by now”’ (p.2), thus making overt the significance of the cut *not* clotting, a relatively well understood symptom of leukaemia. Blood as simultaneously symbolic of cancer and menstruation adds to the sense that within this narrative typical adolescence is instead presented as abject.

Creed states that menstrual blood: ‘is the blood which flows from the inside to the outside of a woman’s body that is viewed as abject’.\(^{36}\) That *Too Young to Die* begins by aligning menstrual blood with the threat of death (in that the bleeding cut is

\(^{35}\) Creed, *The Monstrous-Feminine*, p. 38.

\(^{36}\) Creed, *The Monstrous- Feminine*, p. 66.
caused by the cancer cells in Melissa’s body, but it imitates menstruation therefore signifying the abject threat of menstruation and womanhood) is pertinent because reaching adolescence/womanhood is made abject. The link between blood which signifies illness and blood which signifies menstruation is also present in Lowry’s *A Summer to Die*, However, in this text adolescence and womanhood is not deemed a frightening, abject space. However, as mentioned *A Summer to Die* is still lacking in its depiction of character, because the text’s engagement with the abject is limited, and death remains highly sanitised. Thus, Meg is not able to voice or engage with her emotions.

The opening passage of Lowry’s *A Summer to Die* immediately presents the question of abjection:

It was Molly that drew the line. She did it with chalk – a fat piece of white chalk[...]she took the chalk and drew a line right down the rug[...] she kept on drawing the line up the wall, across the wallpaper with its blue flowers.[..] “There. Now be as much of a slob as you want, only keep your mess on our side. This side is mine”.

The chalk line is signifies Molly’s attempt to conceive her own identity, separate from Meg. Molly is creating a literal border between her “I” and what is ‘opposed to I’, the onset of cancer means that this theme of separation is made significant. Lowry’s text focuses on how Molly’s cancer affects Meg, and for large parts of the narrative Molly is in hospital, separated from Meg. Megs “I”, her conceived identity, is challenged by Molly’s illness and death.

Meg is fairly unconvincing as a narrator; despite the major upheaval in her family Meg remains somewhat emotionally disconnected from Molly’s illness, separating herself from the abject and not visiting her sister in the hospital: ‘I’m afraid

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37 Lois Lowry, *A Summer to Die* (New York: Ember, 2011) p. 2. All further references to be given in the body of the text.
to see my own sister, and grateful they don’t ask me to come’ (p.123). Meg remains measured and reasoned in her emotions throughout, and there is only one instance in which she cries. Meg notices ‘dark red spots’ (p.109) covering Molly’s legs, commenting “it sure looks weird”(p.109) Molly, not wanting to go back to hospital (perhaps knowing she will not return home) implores Meg not to “tell anyone” (p.109). Meg does tell her parents, and Molly returns to hospital. Meg meets with friends William, Ben and Maria: ‘Will Banks put his arm around me and rocked me back and forth as if I were a baby. I cried until his shirt collar was wet clear through’ (p.112). This passage reports that she has cried, and she acknowledges that she feels Molly’s return to hospital it, ‘my fault’ (p. 111) but the text, overall, lacks any exploration into such emotions.

Lowry’s text focuses on Meg’s friendships with Will, Ben and Maria, who, as adults, present stabilising influences at a time when Meg’s parents and sister are often absent, but Meg’s emotions are often overlooked, because the text is so sanitised in its discussion of illness. For instance, that Molly has cancer is not made explicit until near the end of the narrative: “it’s called ‘acute myelogenous leukaemia” (p.123), (although there are plenty of implicit signals, such as Molly’s hair loss and nose bleeds, commonly understood symptoms of cancer). That Meg has not asked the name of the illness her sister is suffering from earlier, or even suspected an illness as serious as cancer demonstrates, illustrates the extent to which illness is sanitised within this text. Meg does not confront her sister’s illness, and therefore is unable to explore her reactions or emotions in any depth.

However, one point in the text does attempt to realistically depict Molly’s illness. Molly’s nosebleed is described realistically, evoking the abject. However, because at this point the cancer has not been named, it is less troubling to Meg than if
she had more of an understanding of the significance of Molly’s nosebleed. The knowledge that a nosebleed is a symptom of a worsening cancer, is more troubling and abject than seeing the nosebleed as a symptom of an unknown, unnamed illness:

Molly was covered with blood. Her pillow, her hair, her face was all wet with it. Her eyes were open, frightened, and her hands were at her face, trying to stop it, trying to hold it back, but it was still coming, pouring from her nose onto the sheet and blanket in moving streams, and spattering on the wall behind her bed (p.55)

Molly tries and fails to ‘hold back’ the blood that signifies her illness, and significantly Meg tries, and fails, to repress this scene that clearly represents the abject: ‘with my face buried, my eyes closed tight and tears starting, I could still see it’ (p.55). Later, when Meg has been rushed to hospital, Molly attempts again to repress what she has seen: ‘Had I really seen it? Now everything seemed like a nightmare’ (p.58), However, at this point Meg cannot deny Molly’s illness: ‘I knew that back in the blue-flowered bedroom the blood was still there, that it had not been a dream’ (p.58). Meg’s fear and the fact she tries to separate herself from the sight of her sister’s blood by toying with the idea that she may have dreamt the blood is a clear example of Meg abjecting what she deems frightening. Meg’s description of the spreading stain emphasises her fear of an encroaching contamination of her identity, and that of her family, by illness. By distancing herself from the bloody blankets in the absence of her parents, Meg hastily constructs a border between herself and Molly’s abject blood. Like Melissa’s blood in *Too Young to Die*, Molly’s blood is doubly abject as the: ‘stain spreading on the blanket’ (p58) can be read as symbolic of menstrual blood. Kristeva theorises menstrual blood as abject because not only is it a signifier of femininity, but it is a waste product, like faeces, and signifies: ‘danger issuing from within the identity’. 39 The blood that runs in streams leaving a stain on sheets signifies a corrupted adolescence for both

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Molly and Meg. The blood becomes doubly abject because it is something that the body has expelled but unlike menstrual blood, which would also stain, it does not signify an adolescent body changing, it signifies sickness and death.

In *A Summer to Die* engagement with abjection is sporadic and fleeting, but the depiction of the blood on the bed marks the strongest place within the narrative, due to its discomforting, and graphic description. Meg’s fear and emotion within this scene makes her, like Hazel in Green’s text, relatable and humanised. However, overall Meg presents as naïve and young, unable to explore her emotions.

Kristeva states that the abject: ‘has only one quality of the object – that of being opposed to *I*’. 40 The abject, therefore, is that which the subject is not. This definition, and the subjects understanding of this, allows a border to be drawn around the subject and the abject. Borders, and methods of repressing and repelling that which is abject is crucial to plot and character in Wunder’s *The Probability of Miracles*. As the narrative opens Cam has discovered her cancer has become terminal, her comment that: ‘things would be black and white. The good ol’ grey times were over’ (p. 2) highlights how her borders, protecting her from the abject, need to be rearranged to accommodate the enforced alteration in worldview, where death has become a certainty rather than chance. Abjection is clearly portrayed as Cam watches a family in Children’s Hospital car park: ‘The mother tried to hold the hand of a healthy four year old as he skipped wildly and gawkily […] A sick, bald-headed two-year-old in a pink dress slept on the shoulder of her father, who walked in a daze’ (p. 3). The juxtapositioning of the healthy and sick children effectively evokes the abject. The first child who ‘skipped wildly’ adheres to the symbolic order, whereas the sick child evokes reminders of death, the death of a young child, which is considered far more societally abject than the death of

an adult. This image reminds Cam of her own abject sickness, now becoming healthy and therefore re-joining society as a non-abject subject is denied to her, as Kristeva writes: ‘It is death infecting life’.  

Cam wishes to repress and avoid this implicit knowledge: ‘She needed to do something – binge and purge, get drunk, smoke a cigarette, something – to get rid of this feeling’ (p. 3). This theme of avoidance takes on central significance to the text when Cam’s mum, Alicia, move the family (which comprises of Alicia, Cam and younger sister Perry) to Promise: ‘a mystical town in Maine that has been known to have healing powers’ (p. 47).

Coats states that: ‘the subject must […] subdue the abject’ but Wunder’s text deems Cam’s cancer as so thoroughly abject that rather than being merely ‘subdued’ her mother and her sister attempt to repress and ignore her sickness. After arriving in Promise some of Cam’s symptom’s such as blueberry spots, ‘ugly raised purple bubbles the size of dimes’ (p. 105) simply disappear: ‘There was no trace of them – not even a scab or a scar’ (p. 121), this marks the first ‘miracle’ that occurs within the town. Perry is convinced that Promise is healing her sister: “But you’re getting better. Don’t you see that?”’ (p. 182). Cam is aware that: ‘People often go through a wellness phase, a remission, biologically constructed so that that can say good-bye’ (p. 182). Wishing to continue repressing what is abject, Perry replies: “‘You could at least let some of us believe’” (p. 182). Compared to Hazel within The Fault in Our Stars Cam’s family and relationships allow her little chance to come to terms with her illness and death because of Perry and Alicia’s refusal to confront the abject. Perry’s insistence that Cam is not sick, or at least not as sick, reinforces the notion that the sick are abject. In not accepting Cam’s sick self, the abject becomes increasingly powerful in its hold, it is an:

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42 Coats, Looking Glasses and Neverlands, p. 141.
‘inescapable boomerang, a vortex of summons and repulsion’. Death is something that Alicia and Perry do not want to face, their repression and refusal to consistently confront Cam’s illness denies her of her own emotional agency, as does the fact that (like McDaniel’s text) the narrative is written in third person.

Cam, to an extent, presents as a convincing adolescent who wishes to: ‘Have my heart broken by an asshole’ (p.3) and is refreshingly matter of fact, and informed, about her death: “the so called ‘near death experience’ is a neurological event. A big dream set off by massive amounts of hormones released by the pituitary gland” (p. 7). However, these elements are not thoroughly explored within Wunder’s text because the text’s continued inference that Promises’ miracles might benefit Cam, which work to reinforce the sick and abject and therefore is restrictive, Cam is denied any sustained exploration and expression of her emotions.

Moreover Cam’s death, when it does come, is presented superficially and stereotypically; a heartfelt conversation between Cam and boyfriend Asher releases Cam from her mortal life as resolution has been achieved: ‘The courtyard was flooded by a bright white light. Cam felt her entire soul become imbued with love. How about that, Cam thought. Death did not mean being without love’ (p. 357). This sanitised depiction of death adds to the sense that although Wunder’s text does attempt to explore the abject, this engagement is overpowered by the effort to provide a message relating to hope, relationships and love. This is a topic expanded upon within Chapter Two and Three of this dissertation, wherein it is demonstrated that Wunder also display’s romantic relationships in a problematic way. In relation to the depiction of character it can be seen that Wunder’s insistence in attempting to repress the abject attenuates Cam’s emotional eloquence and therefore has overall negative implications for the text.

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This chapter creates a launch pad for further discussion, having ascertained that a lack of engagement with the abject can have a negative impact on the depiction of character within the texts discussed.
Chapter Two

The Problem with Repressing the Abject: Problem Novels and Progressive and Conservative Approaches to the Abject

This chapter discusses Lowry’s *A Summer to Die*, McDaniel’s *Six Months to Live*, Green’s *The Fault in Our Stars*, Downham’s *Now is Good* and Wunder’s *The Probability of Miracles*. It will be suggested that the discernible differences in the portrayal of illness, death and relationships within these texts can be linked with Kristeva’s theory of abjection, and furthermore, to Egoff’s essay, ‘The Problem Novel’. This analysis will demonstrate that Lowry and McDaniel’s texts are highly conservative in their approach to abjection, Downham and Green’s narratives, on the other hand, display progressive approaches to the abject. This chapter will reference Wunder’s *The Probability of Miracles* as a text that, although comparatively contemporary when compared to Lowry and McDaniel’s texts, can be seen to contain many elements unique to problem novels, due to its sanitised depiction of death.

Problem novels can be described as texts that deal with themes considered controversial or taboo. Death, illness and relationships, particularly sexual relationships, fall squarely into the category of social taboos that adult authors and publishers (as well as parents and librarians) felt, and continue to feel, that adolescents should be protected from.⁴⁴ Lowry and McDaniel’s texts deal with these taboos by creating a plot that revolves around the topic of cancer, but the texts lacking, conservative, engagement with abjection means that despite the issue based plot, death and illness remains sanitised. Moreover, that Wunder’s text creates Promise, a place in which Cam’s symptoms recede and magical realism abounds, death remains sanitised despite trends

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⁴⁴ Within of Chapter Three of *Young Adult Literature in the 21st Century*, Pam B Cole presents an excellent overview of censorship issues that have affected YA as a category. Pam B Cole *Young Adult Literature in the 21st Century* (New York: McGraw-Hill Education, 2008)
in realistic literature evolving.

In defining the problem novel, Cart quotes critic Robert Sutton in saying:

‘Instead of a character being the focus of the novel, a condition (or social concern) became the subject of examination’, 45 this paraphrases succinctly Egoff’s assertion that:

While the realistic novel may have conflict at its heart, this is integral to plot and characterization, its resolution has wide applications, and it grows out of the personal vision of the writer. In problem novels the conflict stems from the writers social conscience: it is specific rather than universal, and narrow in its significance rather than far reaching.46

Thus Egoff, crucially, immediately categorizes the problem novel as related to realistic fiction, but not as an interchangeable term. Whilst demonstrating that Lowry, McDaniel’s texts do largely fall into the categorisation of problem novels, because they deal with cancer (whilst also avoiding sustained descriptions of the illness, or the emotions, that the issue of cancer can cause), it will be illustrated that The Fault In Our Stars and Now Is Good transcend this restrictive label. These latter two texts meet Egoff’s description of realistic texts, as opposed to problem novels. 47

Lowry’s text meets several of Egoff’s classifications of a problem novel. It is written in the first person in a ‘confessional tone’ 48 and ‘paragraphs and sentences are short’, 49 the language is often bordering on being ‘without nuance, and often emotionally numb’. 50 Moreover, the title of Lowry’s text, A Summer to Die: ‘tell[s]

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45 Michael Cart, Young Adult Literature: From Romance to Realism, p. 32.
47 It is notable Egoff cites that a defining feature of problem novels is their hostility to adults and the rejection of family relationship. In Lowry’s, McDaniel’s and Wunder’s texts family relationships are strong and mutually supportive. However, it remains significant that in A Summer to Die Meg’s parents spend much of their time with Molly in hospital, and within Six Months to Live Dawn spends much of her time in hospital. Thus these two texts introduce the theme of separation from the family unit. Cam’s mother Alicia, in Wunder’s text, is divorced. Thus in each of these three texts some level of family dysfunction is evident, although not quite to the extent that Egoff indicates is true of some problem novels.
rather than show[s]” 51 in that it summarises the plot of the novel, and the subject of death is made explicit. It is significant that all three titles of McDaniel’s texts discussed within this dissertation also fit the above description. Green’s title A Fault in Our Stars is, however, immediately more ambiguous. Further the title is metafictional, referencing Shakespeare’s Julius Caesar. Green directly quotes from Julius Caesar, in Peter Van Houten’s (the fictional author whom Hazel and Augustus idolise) email to Augustus, Van Houten writes that:

> Never was Shakespeare more wrong than when he had Cassius note, “The Fault, dear Brutus, is not in our stars/ But in ourselves.” Easy enough to say […] but there is no shortage of fault to be found amid our stars (p. 112).

Thus the title of Green’s text refers to its thematic complexity. Van Houten, in this passage, also explicitly refers to illness: ‘she is so sick […] you are so well’ (p. 111). Therefore, rather than illness occurring due to human fault or flaw, which is implicitly implied within McDaniel’s text, illness is the product of a universe that indiscriminately labours some with more abjection to cope with than others. It is also significant to note that Wunder’s title, The Probability of Miracles links directly to the theme that restricts the text; the oscillation between realism and miracles and Cam’s awareness of the abject within herself, which nevertheless does not allow for illness to be described realistically. In Disturbing the Universe: Power and Repression in Adolescent Literature Trites refers to the Entwicklungsroman, wherein the protagonist grows and changes but has: ‘not reached adulthood by the end of the narrative’, 52 however within Lowry, McDaniel and Wunder’s texts this growth is relayed as didactic and contrived rather than convincing.

Death within A Summer to Die is relayed as highly sanitised therefore the abject

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is inhibited, Molly: ‘just closed her eyes one afternoon and didn’t ever open them again’ (p. 139). In this way the text subscribes to the stereotypical portrayal of a painless, ephemeral death which releases the passive patient from earthly sufferings. Indeed, when ill Molly is described as more passive, patient and less concerned with superficial things, such as her beauty, that when compared to her healthy self:

She’ll win a beauty contest, the specialist told her […] Molly just smiled, the casual, tolerant smile that most people give to small children who say foolish things. But there was a time when it would have meant something to Molly, to be told she was beautiful. (p. 94)

A similar description can be located in *Six Months to Live*. The effects of the chemotherapy take its toll on Dawn and Sandy and they begin to lose their hair. Sandy is immediately described as: ‘a cute girl, very blonde, with a tipped-up nose and a smothering of freckles sprinkled across it’ (p. 23). Later it is reported that Sandy: ‘Owned combs in almost every color imaginable […] beautiful colors that coordinated with all her clothes’ (p. 46). The implication, that it is sad and unfair that Sandy is losing her hair, is made explicit: ‘Now the combs would be useless […] How cruel it was to go bald at 13! How awful it was to be sick all the time from the effects of chemotherapy! (p. 46). Sandy, however, states that: “It’s just hair […] Everyone says it will grow back”’ (p. 46). Sandy’s stoic response is *probably* not representative of her inner emotions, but these emotions are not afforded any space, and thus Sandy is portrayed as tolerant, accepting and emblematic of a ‘good’ sufferer, bearing the trials of cancer. This also relates to conservative abjection, the boundary between the sick and well selves is made clear by the presence of the combs. Illness is repellant because the loss of the hair symbolically relates to a lack of femininity, to the cancerous body becoming increasingly ugly and abject, nearer death.

Within Lowry and McDaniel’s novels, such characteristics (beauty) are inflated
in order for death and illness to be more affecting and titillating. Premature death is naturally abject but Lowry and McDaniel’s text overly stress this. This is a negative, and adds to these texts’ classifications as problem novels, as it works to reduce the cancerous characters, Molly and Dawn, to tropes rather than relatable personas. It is also relevant that Molly is very much a secondary, periphery character whilst simultaneously being the object of the narrative. Molly’s emotions and reactions to her situation are occasionally reported, but do not relay much information. After Molly is home from her initial hospital stay Meg writes that she is: ‘being so obnoxious […] because she doesn’t look very good, and it was always so important to Molly to look pretty’ (p. 76) On her first meeting with Ben and Maria Molly is: ‘So interested in the baby’ (p. 85), asking: “‘When is the baby due?’ […] “I just love babies”’ (p. 85). The text uses stock tropes of the stereotypical ‘good’ female, who is beautiful and aspires to have children. That Lowry’s text, like McDaniel, portrays sanitised death, in conjunction with a patient who is accepting and ‘tolerant’, exemplars further conservative abjection, in which emotions are deemed abject, alongside death and illness, and are therefore distanced from the text. In Lowry and McDaniel’s texts, death is simplified and sanitised. Egoff writes that within problem novels: ‘death is treated as a ‘soft’ only moderately disturbing problem – the edge is taken off it: the child’s ego and self-absorption are hardly affected by the experience’, 53 a definition that which questions the validity of any emotions or life lessons Meg and Dawn gain from their experiences of cancer, moreover this comment exemplifies Egoff’s concern that problem novels treat death too conservatively. Within A Summer To Die and Six Months to Live Egoff’s claims maintain their credence, and this is achieved whilst illness, cancer, and the threat of death simultaneously preserves its place at the centre of the text, as the main plot focus.

Wunder’s text distances itself from the threat of death by the inclusion sporadic instances of magical realism which introduces the notion that Promise may be able to nullify the threat death poses. Of Promise, Cam’s friend Elaine states: ‘Many strange things have happened […] there was ladybug tide, when millions of ladybugs washed onto shore […] that time that girl walked away from the airplane crash. Or when my broken foot healed overnight…’ (p. 188). These instances, such as the snow in July: ‘fluffy flakes the size of sand dollars were falling softly’ (p. 275) and the fact that: ‘the sun literally rises and sets in the same place’ (p. 136) are used as a moralising stratagem, to teach sardonic and sarcastic Cam that life is worthwhile. Thus, the serious realistic themes that Wunder’s text attempts to attend to, such as Cam’s acceptance of her impending death, are constricted and overshadowed by the overwritten themes pertaining to miracles and hope. Wunder’s text does offer insights that attempt to transcend the portrayal of the ‘good’ sufferer in Lowry and McDaniel’s text, in that Cam shop-lifts: ‘she stuck some Burt’s Bees lip balm into her green canvas biker bag’ (p. 10), she uses the word: ‘bullshit’ (p. 14) and cares: ‘about things like stolen elections, freedom, human rights…’ (p. 11). However, due to the texts lack of engagement with the abject The Probability of Miracles presents a sanitised, restricted and thus conservative portrayal of illness and death, similar to the depiction of illness and death found in Lowry and McDaniel’s texts.

A crucial difference between Lowry and McDaniel’s texts when compared to Green and Downham’s is that within the latter two texts the abject is confronted, and is more complex, and ambiguous rather than becoming an issue which can be repressed, or circumvented. Now is Good deals with themes prevalent in problem novels, such as family dysfunction (Tessa’s father is the main carer giver), teenage pregnancy (Zoe, Tessa’s best friend, falls pregnant within the narrative) and drugs. However, this texts
engagement with abjection is progressive, and Tessa defies the restrictive stereotype of a passive or good sufferer: ‘People think if you are sick you become fearless and brave, but you don’t. Most of the time it is like being stalked by a psycho, like I might get shot any second. But sometimes I forget for hours’ (p. 116). Such insightful reactions are continuously denied the protagonists within Lowry’s and McDaniel’s problem novels because exploration into abjection is lacking.

In Lowry’s text, beyond Molly closing her eyes and slipping into death, as described above, no further details are given about Molly’s death. It is also notable that within Lowry’s text Molly’s funeral happens off the page and is described in retrospect, in accordance with a photograph of Meg that Will has taken. Thus, it relates something difficult and connected with abject death (the funeral), with something positive (as photography is a continual source of pleasure and positivity in this text, symbolic of Meg’s overall positive change and emotional growth). In viewing a photo William has taken of her, Meg says: ‘I knew, though I had not known it then, that Will had taken it […] in the village cemetery the day we buried Molly there and heaped her grave with goldenrod’ (p.150). That the abject is continually suppressed within this text is exemplified in this single sentence reference to the funeral, which also relates to the texts overall conservative portrayal of abjection which prevents the abject from being described in any detail.

In comparison, The Fault in Our Stars tackles Augustus’s funeral realistically, Hazel describes viewing Augustus’s dead body: ‘I could see him as I approached: His hair was parted neatly on the left side in a way he would have found absolutely horrifying, and his face was plasticized. But he was still Gus. My lanky, beautiful Gus (p.269). In facing the abject, Augustus’s dead body, Hazel is able to see beyond the abject, and thus a semblance of acceptance is reached because Hazel is able to still see
the person Augustus was in life. Westwater writes that: ‘When one confronts abjection, one faces a power so strong that in any contest with it, one wins not by being powerful but by exercising endurance’. Following Augustus’s death, Hazel reflects that: ‘I felt that I owed a debt to the universe that only my attention could repay, and also that I owed a debt to everyone who didn’t get to be a person anymore and everyone who hadn’t gotten to be a person yet’ (p. 295). Endurance, and her understanding of her own abject illness and Augustus’s death has not allowed Hazel to overpower the abject, rather she understands how she, and her life, are both insignificant, in terms of her overall impact on the universe as a whole, and yet hugely important, to her family and to Augustus (who, although dead, remains important to her overall worldview). When comparing Lowry’s conservative, fleeting reference to Molly’s funeral with Green’s progressive portrayal of Augustus’s funeral, the differences between these texts is readily apparent. Hazel gains and grows more emotionally than Meg’s does, due to the way in which Green does not simply banish or repress the abject.

Although Six Months to Live deviates from some of Egoff’s key points (it does not, for example, feature an adult outside the family, and family relationships are strong, rather than hostile, nor does the text contain any expletives or sexual references), it is more of a problem(atic) novel than Lowry’s A Summer to Die as it proffers the healthy as preferable partners to the sick whilst also being highly conservative in its portrayal of illness and death.

At a summer camp for cancer sufferers, Dawn shares a kiss with Greg who also suffers with Leukaemia. In its description their kiss reinforces notions of female passivity, shying away from realistic awkwardness, or any overtly sexual references: ‘Dawn rose on her tiptoes, held her breath and closed her eyes. He kissed her tenderly’

54 Martha Westwater, Great Despair meets Hopeful, p. 66.
Dawn does not kiss Greg, but submits to his kissing of her. It is in the subtle way that the semantics of *Six Months to Live* reinforces female passivity and thus encompasses a decidedly anti-feminist stance.

It is notable that once Dawn is home from camp and feeling more secure in her remission, her attention drifts back to healthy school friend Jake. She confides in Sandy, who had hoped that Dawn and Greg would become ‘special friends’ (p. 126); this terminology, which returns to a lexical field more appropriate in childhood, foregrounds McDaniel’s aversion to displaying romance as having any element of sexual discovery. Special friendships are allowed for the ‘good’ sufferer, but sexual experimentation is denied. Therefore female desire is positioned as wholly abject, Creed writes: ‘Abjection is constructed as a rebellion of filthy, lustful, carnal, female flesh’ and this is a notion proliferated due to McDaniel’s refusal to acknowledge desire, lust or any kind of sexual, bodily craving or experimentation. Significantly, Dawn rejects the nearly-cured Greg for the completely healthy Jake, therefore, as Julie Passanante Elman states within “Nothing Feels as Real”: Teen Sick-Lit, Sadness, and the Condition of Adolescence’: ‘aggressively re-establish[ing] the boundaries between the desirable “well” boys, and the undesirable sick ones’.

Not only does McDaniel portray desire as abject, illness is abject – Greg is discarded as an object of Dawns (sanitised) interest because he is sick, therefore further portraying Dawn’s own sickness as abject, as a subject for shame, to be repressed.

Like Dawn, Sandy finds a boyfriend at camp and is less constrained in voicing her desire, or acknowledging her body’s potential, developing sexuality. Sandy is the first to voice her feelings, ‘“I think I’m in love!”’ (p. 95), she is upset that her body ‘doesn’t have a curve left’ (p. 96) and flirts with a ‘teasing tone’ (p. 97). Perhaps, then, the boundary between the desirable “well” boys, and the undesirable sick ones’.

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56 Julia Passanante Elman, ““Nothing Feels as Real”: Teen Sick-Lit, Sadness and the Condition of Adolescence”, *Journal of Literary and Cultural Disability Studies* 6 (2012), 175 - 191
Sandy’s death, which happens shortly after their return from camp, can be read as a punishment for being sexually progressive (if only in comparison to Dawn who only ‘feels awed in the pleasure of his [Greg’s] presence’ (p. 98) and does not recognize her own potential as a sexual object). Desire and adolescence are therefore construed as highly abject and dangerous, which accentuates the texts already conservative approach to portraying death and illness as abject.

Downham’s text, with its progressive depiction of Tessa’s sexual identity, counters McDaniel’s conservative portrayal, and thus Downham’s text can be described as realistic, and as a text that engages with abjection in order to impart a positive message, without shying from realistic, even graphic, explorations of terminal cancer.

Kristeva writes that: ‘The body must bear no trace of its debt to nature: it must be clean and proper in order to be fully symbolic’. Cancer, then, is highly problematic as it marks the body as abject, but as Creed explains a female protagonist already finds her body to be a site of abjection: ‘Woman’s reproductive functions place her on the side of nature rather than the symbolic order. In this way woman is linked to the abject through her body’. Creed repeatedly links abjection with the monstrous female, exploring the abject womb, bleeding sores, the birthing of monsters and the menstrual blood of vampires. Six Months to Live confirms this repellent view of the abject. Dawn’s sick body is described as solely abject: ‘she looked like a victim of a concentration camp, gaunt and thin. Her skin was stretched across her bones. Its color pale and ashen, seemed transparent […] Her lips were chapped and cracked and what was left of her hair was dull and flat’ (p. 63). Thus, in this conservative portrayal, sickness is simple to reject to the place of the abject and the Other. However, within Now Is Good the abject is more progressive, ambiguous thus the sick body is less easily

banished as completely abject. Tessa is aware of her abject status, yet despite this the text contests the negative implications of the ‘monstrous’ female by providing a character who embraces her sexual identity despite her abject illness. Tessa’s discovery of her sexual abilities means that her body does not just symbolise abject sickness, and the threat of death.

In her essay ‘The Problem Novel’ Egoff implies that sex within YA fiction is a negative, including it in her list of characteristics particular to the problem novel, writing that: ‘Sex is discussed openly’. 59 Within Now is Good the inclusion of sex, and the frankness with which sexual acts are described, impact positively on the narrative, countering Egoff’s argument. However, it could be construed that Egoff is arguing only against conservative, rather than progressive, depictions of sexual acts. Alternatively, it cannot be overlooked that Egoff’s essay was written when YA was still gaining momentum as a clearly defined category and thus, explicit, realistic descriptions of sex aimed at teenagers – a social group previously only recognised as children – would perhaps be perceived as negative, even to a critic who champions realistic narratives and damns the conservative.

For Tessa sex within a committed relationship with her neighbour, Adam, allows her to redefine her body as capable of pleasure even though she is sick and dying: ‘I lie on the bed and buck my hips. I need my jeans off. I want to display myself to him, want him to see me’ (p. 211). Tessa wants Adam to ‘see her’ as a woman and as a sexual partner, rather than as a cancer patient. Now Is Good portrays Tessa as desirable, attractive both in personality and body. Adam’s continued, if occasionally wary, sexual attraction and relationship with Tessa means that the abject, cancerous body is harder to banish behind the border that protect a subject from the fear of the abject.

As mentioned, Kristeva primarily cites bodily functions as examples of the process of abjection and the abject creates a visceral reaction in a subject: ‘it beseeches a discharge, a convulsion, a crying out’. 60 Sex, which notably results in the expulsion of bodily fluids, is often seen to be denied to the sick subject. Because the ultimate object of sexual intercourse is reproduction, therefore the sick, cancerous, dying body partaking in sexual activity is abject in the extreme. In *Now is Good*, Tessa is conscious that she has lost any sensual femininity her body might have possessed to cancer: ‘‘Turn the light off first […] I’m a bag of bones. Please’’ (p. 277). Tessa finds herself surprised that her body, such an abject object, is still capable of sexual pleasure: ‘‘I thought my body wouldn’t feel heat again, not the kind of urgent heat I've felt with him before […] To feel this, when I thought it was over, when my body’s closing down and I thought I’d have no pleasure from it again. I am blessed’’ (p. 277-278). Tessa’s sexual experience with Adam, then, is important to the text because it connects the abject with hope and pleasure, in a way which is progressive, rather than revolting (a dying cancer patient receiving sexual pleasure has the potential to revolt, as it disturbs the symbolic order; the ultimate function of sex is procreation, and a cancerous, dying body is not fertile).

Experiencing sexual intimacy when she knows she is dying aids in Tessa’s acceptance of her death, and therefore death itself becomes less abject, less troubling. The abject is still of central importance in Tessa’s life but her acceptance of her looming death (aided by her ability to feel bodily pleasure and a profound emotional connection) is achieved by the rearranging of her borders, which, although ambiguous in nature, allow the survival of hope. Hope, therefore, is connected intrinsically to both the abject, and to relationships within *Now is Good* and this thematic link, between hope and

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relationships, will create the body of the argument within chapter three.

This chapter has demonstrated that within Green and Downham’s realistic texts wherein abjection is progressive, the abject is confronted rather than repressed. This allows for the characters to transcend reductive tropes of ‘good’ sufferers, and presents illness and abjection as overall ambiguous entities. Hazel and Augustus’s cancer is described, not as horrifying and repellent, which is true within McDaniel’s conservative text, but as an illness which affects Green’s protagonists because: ‘of the universe’s need to make and unmake all that is possible’ (p. 266). Thus cancer is presented as natural and random occurrence and therefore is incorporated into Hazel and Augustus’s lives as something they have to adapt too, rather than being explicitly repellent. McDaniel and Lowry and Wunder’s problem novels are problematic in their sanitised depiction of death and illness, as these texts do not adequately explore the themes of illness, relationships and death which they present.

Egoff concludes her essay, ‘The Problem Novel’ by noting that: in one and a half decades the world of children’s fiction has already changed fundamentally - and forever’. These changes have continued. YA is now, more often, accepted as a completely separate classification from children’s fiction. However, as mentioned at the time Egoff’s essay was written this divide was more permeable, supported by the fact Egoff’s essay appeared in a text devoted to criticism of children’s literature, and Egoff herself uses the term ‘children’s literature’ rather than YA. The fluidity of this distinction could explain why, within Lowry’s text, Meg presents as an incredibly young thirteen year old, and why death and illness remains so sanitised. However, this chapter makes clear that a difference in conservative and progressive approaches to abjection can be seen between the five texts discussed, and these differences remains are

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important to observe because these conservative texts propagate concerning messages relating to the abject sick. Finally, it has been shown that Wunder’s text contains a problematic sanitation of death that means the ‘problem novel’ label remains appropriate. As mentioned, the following chapter shall continue the exploration into relationships, begun in this chapter in relation to *Now is Good*, observing that texts which repress that abject appear less able to offer hope to the cancerous protagonists.
Chapter Three

Hope’s Relationship to the Abject, Examined Through Romantic Relationships

This chapter examines the significance of, and the important correlation between, hope and relationships within McDaniel’s *Till Death Do Us Part*, Green’s *The Fault in Our Stars*, Downham’s *Now Is Good*, and Wunder’s *The Probability of Miracles*, arguing that relationships within these texts can be the catalyst for hope. This can be the case even when death curtails such relationships, as portrayed in all four texts discussed. This chapter will demonstrate that within texts that evidence a strong engagement with abjection, hope is much more accessible than in texts that show a weak engagement with the abject, sanitising death and illness.

It is firstly important to define ‘hope’, as the term is central to the argument within this chapter. *The Oxford English Dictionary* defines hope as: ‘Expectation of something desired; desire combined with expectation.’ This dictionary definition is useful, as it highlights the personal subjectivity of hope, but is slightly dismissive of the complex nature hope holds. Within her article ‘Springs of Hope: Recovery of Primordial Time in "Mythic" Novels of Young Readers’ Sarah Smedman provides a fuller definition:

True hope is not a comforting illusion […] rather, hope is complex in its incentive and its object […] hope can aspire to a happy life in this temporal world, or it can aspire toward a blessed afterlife in an eternal, redeemed world.

Hope, therefore, is necessarily ambiguous and temporal (because hope relates to an expectation of the future, of what the future shall contain). When examined alongside

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62 Chapter Three does not discuss *A Summer to Die* because this text does not deal with adolescent romantic relationships, only relationships with adults, such as William, Ben and Maria.


Kristeva’s theory of abjection it is possible to see parallels between these two abstract concepts which work to illuminate the importance of relationships within these four texts.

For Kristeva, abjection is a necessary psychological process, one which works to protect the inherently fragile subject. Kristeva argues that abjection is connected to desire (in the context of these texts, a desire to live and a desire to experience close, meaningful romantic relationships): ‘There is nothing like the abjection of self to show that all abjection is in fact recognition of the want on which any being, meaning, language or desire is founded’. 65 Abjection, then, correlates with desire, and desire is similarly connected to hope, as illuminated by the OED’s definition which employs the term desire in defining hope. The abject, and the subject’s tolerance of the abject, relates strongly to the positioning of borders within their lives and how they conceptualise their own selfhood. Hope, too, functions in this way. The subject’s conceptualisations of hope alter as self-identity changes, the shifting borders of the abject alter the subject’s expectations of the future, and therefore what they are hoping for the future to be. It is key to note here, that the relationship between hope and abjection and hope and fear is largely similar.

A subject with cancer will hope to recover, and will fear (the abject state of) death. Hope allows a subject to envisage a brighter future whereas with abjection, the subject will catastrophise, imagining the worst possible outcome of a situation and then the subject will try and abject that outcome, by pushing it out of their minds. This chapter will show that Green’s *The Fault in Our Stars* and Downham’s *Now is Good* this dialogue between hope and abjection/fear is played out. However, in McDaniel’s *Till Death Do Us Part* conservative values overwhelm the text, highlighting the

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comparatively complex emotions that Hazel and Augustus, and Tessa and Adam, engage with within Green’s and Downham’s texts. Lastly, in Wunder’s *The Probability of Miracles* Cam’s emotions and her fears are repeatedly introduced, however because abjection is lacking in this text the presented emotions then do not have more than a superficial impact on the narrative. Cam, like McDaniel’s April, remains an emblem, rather than a fully developed character. Hope is evidenced in *The Probability of Miracles*, but not in a convincing way.

In McDaniel’s *Till Death Do Us Part* April’s relationship with Mark demonstrates a problematic relationship with hope, and this narrative persists in labelling the sick body as abject. At the conclusion of *Till Death Do Us Part*, Mark, who suffers from cystic fibrosis and has been in a car accident, has died. April is left a widow, having married Mark minutes before his demise. Mark’s premature death ensures that their marriage vows signify April’s ‘pure’ kindness and compassion rather than enduring love between two adults:

> She saw his eyelids flutter open, his brown eyes widen, and his mouth turn up in a smile. “Beautiful…” She smiled back, laid aside her bouquet, and took his unbandaged hand. “Until death do us part,” she whispered. “Until…paradise,” he answered. “I love you” But Mark was beyond hearing (p.196).

Through this sentimentalised death scene the text portrays April as a martyr, and as an inherently ‘good’, sweet, sacrificial victim who fulfils Mark’s dreams of marriage even though the marital bond is immediately severed by death. Beeck correctly highlights that the fact that Mark does not hear April’s final ‘I love you’ is pertinent, as it: ‘frees her to say those words to some other man’. Because Mark has died, and April’s long

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66 It is interesting to note April’s name in a text concerned with death and illness. ‘April’ can either be seen to signify a fixed month within a year, a month that will always return and marks the beginning of spring (which itself links to ideas of rebirth and regrowth). This links with the notion that April is inherently special, and able to fight her cancer due to her innate goodness and feminine spirit. On the other hand, the month of April can hold connotations of being highly temporal, a brief month, only thirty days, within a long year. April is fleeting and soon over, and this holds up a very different prediction regarding April’s ability to survive her brain cancer in the long term.

term health remains uncertain (the remission of her brain tumour is not assured, although dormant, she will see the doctor: “in three months” (p. 198), which implicitly implies the fragility of this good news, and the potential for relapse), hope therefore is not attainable in the corporeal world, only in the spiritual. This links with McDaniel’s conservative Christian views which this text implicitly, if not explicitly, outlines. 68

*Till Death Do Us Part* refers to ‘paradise’ (p. 196), inferring a Christian Heaven. However, it is more that McDaniel’s texts implicitly infer strong Christian beliefs through the text’s didactic portrayal of the chaste and good protagonist, for whom sex outside of marriage is carnal sin (one which they are protected from by cancer) than that this grounding in Christianity is explicitly stated. However, within *Till Death Do Us Part* that hope is not forthcoming either at the conclusion of the text, or indeed, throughout the narrative. This lack of hope is thoroughly enmeshed with the text’s depiction of the sick body as abject.

McDaniel’s text does not challenge the idea that the sick are ‘different’ and thus abject, instead qualifying the problematic view of the sick as synonymous with weakness in the portrayal of Mark, who suffers from cystic fibrosis. Mark’s illness marks him as Other, he has a body which is not clean and proper, which has ‘lost its

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68 Dawn, within *Six Months to Live*, comes to terms with Sandy’s death after reading a passage from the bible. Heaven is explicitly referred to, and Christian beliefs are presented as a salve to grief. Amongst a box of Sandy’s belongings, Dawn finds a ‘torn out and marked up’ (p.132) page from the bible, Ecclesiastes 3:1-8: ‘Dawn pondered the page for a long while. It was true. Sandy’s “season” was over. She’d gone home to God. The thought bought Dawn great comfort […] She shut the box and put it away on a shelf” (p.133). Placing the box on the shelf signifies that Dawn has taken what she needs from Sandy’s death; brief sadness (which can be released and dealt with through tears) is replaced by comfort and motivation to succeed where Sandy has failed, by remaining in remission. The safe border between Dawn’s self and the abject (death not surmounted by faith and determination) remains in place. Death is minimised, and grief is simplified and only superficially interacted with. Such themes would have been explored in depth within Chapter Two, had it not been for word count restrictions, but this brief passage highlights that McDaniel’s conservative views are influenced by a Christian polemic in both *Six Months to Live* and *Till Death Do Us Part.*
form and integrity’. 69 On their first meeting Mark: coughs ‘deeply into his hand’ (p.11) and admits he has been hospitalised for ‘only’ his ‘second time in eighteen months’ (p.12). He also states that: ‘it’s not easy for me to compete with guys who are healthy’ (p.14). Moreover, compared to April’s boyfriend Rick who “plays soccer” (p.14) Mark “plays chess” (p.14) but only “When I’m on top of my CF” (p.14) and, thus, even a sedentary activity which is cognitively based rather than physically based, is moderated by his illness. Mark’s hobby, re-building and racing cars, which is typically masculine, is similarly affected: “‘If I’d had a choice about my life, I would have been a race car driver […] I’d race as a career!’” (p.16). It is pertinent that this hobby, which goes someway to portraying Mark as traditionally masculine (when compared to healthy, soccer playing Rick who assumes the role of a traditionally typical male) is the cause of his death. As with many of McDaniel’s descriptions of trauma, the description of Mark’s accident is sparse, spanning only two sentences:

She [April] leaped up, watching in horror, as Mark’s car clipped the other car’s back fender. Mark’s car spun out of control, slammed into the retaining wall, flipped, and caught fire (p. 179)

Immediately following the accident, hope fleetingly seems attainable to April, who is at this time engaged to Mark, as the doctor reports that Mark is: “‘doing remarkably well’” (p. 182). However, Mark’s pre-existing illness complicates recovery, his doctor is: “‘concerned about his CF’” (p. 186). April remains passive, uninformed about her future husband’s medical condition: ‘April hadn’t even considered that Mark’s broken ribs could be a threat to his health’ (p. 186). As Mark’s decline progresses illness is connected with motivation and personal determination, April implores that Mark fights: “‘Mark, please, don’t give up.’” (p. 189). However, because Mark’s illness has been so linked with feebleness and weakness Mark is unable to draw on the personal strength

69 Creed, *The Monstrous-Feminine*, p. 11.
shown by April, which has allowed her to reach remission and re-enter the symbolic order. Mark replies to April, telling her: “I can’t help it. I know how I feel physically. I know that somehow, this time, it’s different” (p. 189). As highlighted at the beginning of this analysis, Mark’s death is portrayed superficially, without any involved engagement with abjection, demonstrated by the aforementioned compressed depiction of his accident. Illness is overall posited as abject, but this theme is not detailed in any depth, and thus Mark and April are characters overshadowed by their respective conditions, which is similar to the point made of Too Young to Die within Chapter One.

Mark, it can be argued, has been implicitly positioned as ‘lesser’ than April and as more deserving of death, perhaps because he is male. Males, stereotypically, are seen as less inherently ‘good’ than females, and furthermore males are often portrayed wanting to corrupt the sexual ‘purity’ of a female. McDaniel utilizes this stereotype – illness means April is introduced to Mark, and forgoes a relationship with Rick. Thus April’s cancer protects her from the various ‘sins’ to be found within a normative adolescent relationship. Marks death further protects April, as marriage would have introduced the idea of a consummation of vows, which the text avoids engaging in. Moreover, Mark may have succumbed to death because not only is he male, but he is a male who is unable to reproduce due to his abject illness: ‘April stepped closer to Mark, waiting for him to say something. When he looked at her, pain was etched into his face. “I can’t give you babies, April. Not ever”’ (p.169). Marks death, therefore, also serves to protect April from entering a childless marriage, in which she would become a carer for her sick husband.

Within Wunder’s The Probability of Miracles, before entering into a committed relationship with Asher, Cam loses her virginity at a beach party. At a ‘typically’ teenage party, Cam’s sickness marks her as abject and different and even though this is
not obvious to those around her Cam remains aware of her own sickness: ‘She didn’t know if the toxicity she felt was from the cancer or the chemicals and radiation used to treat it, but there were times when she felt poisoned, green, acidic’ (p. 149). Cam’s sexual experience stems directly from her awareness of abjection and her impending premature death, she reasons that: ‘It was too late to find true love, but it wasn’t too late for sex’ (p. 150). This sex scene, however, is highly problematic due to issues of consent. Cam remains unsure about her willingness to have sex, and as Alec, a stranger at the party, begins to kiss her, she says: ‘“Does no mean no in France or does no sometimes me oui?”’ (p. 151). Cam consents to sex, but then changes her mind: ‘“No. I mean yes. I am saying no”’ (p. 152). Alec, however: ‘looked into her eyes with confidence, as if he could decipher her thoughts better than she could and would be the final arbiter of the situation. “No. You are not saying no”’ (p. 152). This issue of consent, which is retracted, but then not afforded attention is worrying, especially as it is portrayed as Alec acting in a romantic, rather than predatory way: ‘He kissed her ear, her neck, the soft skin on the centre of her elbow […] Cam relaxed enough for it to feel good, and then it did not feel good, and then it was over’ (p. 152). This is concerning because Cam’s objections are overwhelmed by Alec, and she remains extremely passive throughout this sexual experience, which is only briefly described. 70 It is therefore

70 As stated, the message that this short passage generates is extremely concerning. Cam’s retracted consent is ignored by Alec and this is the presented as something romantic rather than the rape that it is. Wunder’s text does not correctly address the rape that occurs, instead normalising the experience: ‘But the first time was supposed to be terrible anyway, right?’ (p. 154.) The text therefore propagates the message that non-consensual sex is a normal teenager experience. Unfortunately there is not enough word count available to pay sufficient attention to this concerning topic, and moreover a full analysis of this topic would mean that reader response theory would need to be applied. It would be interesting to find other YA texts in which first sexual experiences are presented in this way. There appears not to be any reviews or critical essays that focus on this rape within Wunder’s text which also raises questions regarding how rape myths are presented within YA literature. Victor Malo-Juvera’s dissertation was written on ‘The Effect of Young Adult Literature On Adolescent’s Rape Myth Acceptance’ wherein Laurie Halse Anderson’s Speak was seen to affect the rape myth acceptance of adolescents. This study shows, therefore, that YA texts can have a positive influence on how rape myths are perceived (refuted rather than accepted) Malo-Juvera’s dissertation can be found here: http://digitalcommons.fiu.edu/cgi/viewcontent.cgi?article=1667&context=etd [accessed 28 September 2013]
relevant that Kristeva describes sex as an essentially passive experience for the female, writing that: ‘In a very maternal fashion, the desire for the abject that insures life (that is, the sexual life) of the man whose symbolic authority she accepts’. Cam is passive, submitting to Alec’s advances, and his masculine, symbolic authority. This act of extreme sexual passivity contradicts the headstrong, and factual, way in which Cam usually confronts the abject and her illness, as was described in Chapter One. In this way the abject, and the experience of sex, serves to alienate Cam further from her already abject body. It is also pertinent to acknowledge that Cam’s subsequent sexual experiences with Asher are also implied and sanitised rather than stated. Her first sexual experience with Asher is introduced in one sentence and then the act of sex occurs off the page, in between page breaks: ‘She pulled him toward her by the collar of his T-shirt’ (p. 274). Wunder’s sanitation of sex with Asher is confusing, as it follows a comparatively explicit account of rape (although, crucially, this is not portrayed as rape, as mentioned). Trites writes: ‘For many characters in YA novels, experiencing sexuality marks a rite of passage that helps them define themselves as having left childhood behind’. For a cancer sufferer this rite of passage should have an added potency, as it marks an act that their sickness has the potential to deny them from ever experiencing. Wunder’s text evokes this theme in addressing Cam’s rationale for losing her virginity to a stranger: ‘it wasn’t too late for sex’ (p. 150), the text lack of engagement with Cam’s emotions, and the passivity with which her sexual experience is depicted, is reductive because Cam, therefore, is not able to challenge the stereotypes relating to the abject sick and the passive female.

In Green’s and Downham’s text’s relationships inform the regulation of borders, which protect the fragile subject from negative psychological consequences and

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72 Trites, *Disturbing the University, Power and Repression in Adolescent Literature*, p. 84.
therefore help in the acceptance of encroaching death. It can be argued that an emotionally healthy subject is more able to accept death than a subject who is poorly emotionally equipped, and the borders that protect from the abject or, at least, help a protagonist to face death with greater acceptance, are crucial in maintaining mental wellbeing. If the abject is: ‘a terror that dissembles’ 73 hope can function as a salve, but it is not (as Smedman argues) a simplified, easily placed construct. That hope is not a facile concept is demonstrated by its complex use by Downham and Green, who present more accomplished, nuanced and involved texts than those of McDaniel and Wunder. Hope, like the abject, is ambiguous and liminal. Kristeva states that abjection is: ‘above all ambiguity. Because, while releasing its hold, it does not radically cut off the subject from what threatens it’. 74 Hope’s ambiguity likewise rests in its teasing nature; hope cannot predict a positive outcome but provides enough reason or motivation to continue forwards.

In Hazel’s case, in *The Fault in Our Stars*, a belief that hope is worthwhile allows her to grieve for Augustus and prepare for her own death. Despite Augustus’s death, and the fact Hazel knows her own death remains imminent, her relationship with Augustus has allowed her to believe in the concept of hope, for it was hope which allowed her to originally peruse a relationship with Augustus.

Augustus arranges for Hazel and Isaac to perform eulogies for him shortly before his death. In hers Hazel says: “Gus, my love, I cannot tell you how thankful I am for our little infinity. I wouldn’t trade it for the world. You gave me forever within the numbered days and I’m grateful” (p. 260). Before her relationship with Augustus, Hazel felt that she was a ‘grenade’ (p. 99), stating that: ‘I can’t be a regular teenager, because I’m a grenade’ (p. 99). The fear Hazel has that she is: ‘going to blow up’ (p. 99)

means she denies herself hope of a relationship because she perceives her body as a site of abjection and danger: ‘To be with him was to hurt him – inevitably. And that’s what I’d felt as he reached for me: I’d felt as though I were committing an act of violence against him, because I was’ (p.101). Later Hazel retracts this position slightly, as contact with Augustus allows her to extend her perception of self beyond the abject: ‘I didn’t want to be a grenade. But then again, he knew what he was doing, didn’t he? It was his choice too’ (p.164). In this way Hazel awards Augustus his own agency to make choices about his feelings for her, therefore allowing hope to triumph in this hope/fear dialogue that has been preventing Hazel from committing to a relationship with Augustus.

Kristeva writes that the body rejects and ejects waste products: ‘such wastes drop so that I may continue to live’. Kristeva goes on to link bodily wastes with the corpse, which is the ‘most sickening of wastes’. Creed explains that:

The ultimate abjection is the corpse. The body protects itself from bodily wastes such as shit, blood, urine and pus by abjecting these things from the body […] The body ejects these substances, at the same time extricating itself from them and from the place where they fall, so that it might continue to live.

If waste is abject, a sick body that cannot control its own wastes is therefore a site of extreme abjection, holding the potential to contaminate others by disturbing boundaries. In *The Fault in Our Stars*, Augustus’s progressing illness makes Hazel uncomfortable because of the encroaching proximity of the abject and the signification of death that this holds: ‘I’d found the boy I love deranged in a wide pool of his own piss’ (p.240). However, whilst this confrontation with the abject (in relation to Augustus’s illness rather than her own) embarrasses Hazel, ‘It was awful, I couldn’t even look really. (p.

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75 Kristeva, *The Powers of Horror*, p. 3.
76 Kristeva, *The Powers of Horror*, p. 3.
the text does not restrict the relationship between two sick subjects in the way that *Till Death Do Us Part* does. Cancer within *Till Death Do Us Part* is identified as the abject ‘other’ and the engagement goes no further, *The Fault in Our Stars* is concerned with illness but the text explores illness in a way which challenges the presentation of the sick body as merely abject.

Hazel is able to continually face and revaluate the abject because she is perceptive, able to recognise her fears, and intelligently vocalise them. Rather than the cancer simply being the ‘enemy’, it is presented as an unfortunate circumstance that has far reaching effects, but that can be tolerated through understanding and rationalizing the topic of illness. She says: ‘Even cancer isn’t the bad guy really, cancer just wants to be alive’ (p.246). That Hazel can eloquently expend empathy for the most abject occurrence in her life, the very force which threatens her, signifies how she has been able to reconcile the effects of cancer, abjection and hope. Critic Samantha Pentony writes that: ‘When we are propelled into the world of the abject, our imaginary borders disintegrate and the abject becomes a tangible threat because our identity system and conception of order has been disrupted’. Although for Hazel and Augustus the abject remains a ‘tangible threat’ the fact that they are both open with each other, refusing to relegate the abject to a place of shame ensures they are then able to build a relationship based on something more than the abject.

As previously mentioned, Hazel thanks Augustus for their: ‘little infinity’ (p. 260). Finding an infinity within a relationship limited in time due to terminal cancer, bodes well for her ability to find hope. Similarly, love is presented as able to generate hope and defeat fear, when Augustus tells Hazel:

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I’m in love with you, and I know that love is just a shout into the void, and that oblivion is inevitable and that we’re all doomed and that there will come a day when all our labor has been returned to dust, and I know the sun will swallow the only earth we’ll ever have, and I am in love with you (p. 153).

It is significant that Green’s text presents Augustus’s illness is both sensitively and realistically (and therefore graphically), his fear of death is fully depicted. He laments that he does not die for a cause, but of an abject illness that separates him from society:

“You’d see Jesus on the cross, and you’d see a dude getting stabbed in the neck, and you’d see people dying at sea and in battle and a parade of martyrs. But Not. One. Single. Cancer. Kid. Nobody biting it from the plague or smallpox or yellow fever or whatever, because there is no glory in illness. There is no meaning to it. There is no honour in dying of” (p. 217)

The emotions of all characters are fully explored, but the text does not hide the abject, bodily, reality of death. Green’s text is overtly aware of the abject space its protagonists inhabit, as Hazel states: ‘That was the worst thing about having cancer, sometimes: The physical evidence of the disease separates you from other people. We were irreconcilably other’ (p. 144). It is the texts confrontation of this otherness that allows it to be so successful in refuting the stereotypical idea of the sick sufferer as passive and good. That Green’s text does not restrict Hazel and Augustus to this stereotype also allows for the parallel existence of hope and love, which is born from their understanding, and honesty, surrounding their respective conditions.

When Augustus informs Hazel that his cancer has returned the situation appears hopeless: “I lit up like a Christmas tree, Hazel Grace. The lining of my chest, my left hip, my liver, everywhere” (p.214). However, Green’s text introduces that idea that the positive effects of relationships transcend death, and hope for the future is connected to mutual understanding and shared love. After his death, Hazel finds a letter from Augustus, in which he had written: ‘You don’t get to choose if you get hurt in this world […] but you do have some say in who hurts you. I like my choices. I hope she
[Hazel] likes hers’ (p. 313). Although Augustus has died, and Hazel’s future is still uncertain at the conclusion of Green’s text the overall message is one of hope. Hazel’s relationship with Augustus has allowed Hazel to explore her subjectivity spanning beyond the reductive space of a cancer patient. The conclusion to *The Fault in Our Stars* presents the conception of an afterlife not related to conservative Christian values, but connected directly to the strength of Hazel and Augustus’s relationship. The final words of the text: ‘I do, Augustus. I do’ (p. 313) are written in present tense. The can either be read as Hazel simply replying to Augustus’s statement about choices: ‘I hope she likes hers’ (p. 313), or can be seen to symbolise marriage vows, where the bride and groom repeat the words ‘I do’. As mentioned, both abjection and hope are connected to the liminal, and Hazel’s experiences can also be described as liminal. She is terminally ill, but still able to function as a normal adolescent. Adolescence in itself is liminal as Hazel is neither a child nor adult, just as her body denies her access to the symbolic, whilst also not being fully abject. Her relationship with Augustus defies these restrictions, allowing her to (even temporarily) take on the identity of a non-sick non-abject adolescent. As mentioned in Chapter One, Hazel talks of a liminal third space that she is able to inhabit when talking with Augustus: ‘I was not in my room […] we were together in some invisible and tenuous third space’ (p. 72). The existence of this third space, in which Hazel and Augustus are allowed to connect as individuals regardless of their abject illnesses and bodies allows for the existence of hope to transcend a sad narrative in which Augustus dies. The ending of the text presents an interpretation that lends to hope: either Hazel is happy that she entered into a relationship with Augustus, regardless of his death and is now able to understand that hope is available even though she is sick, or she and Augustus are eventually reunited in the aforementioned third space (suggested but not confirmed by the present tense
marriage vows). Either way, the ending to this text is hopeful.

This contrasts with the repeating motif in McDaniel’s texts, wherein an ambiguous ending is a negative, in Green’s text the lack of certainty relating to Hazel’s health is realistic, and does not deny the reality of living with terminal cancer. However Hazel’s close relationship with Augustus has allowed her to realise that the length of life does not necessarily correspond with richness of experience. Westwater writing about hope and abjection within YA texts, writes that: ‘Finding meaning in life demands hope: not so much hope for a pristine, exemplary future, but hope in a present that is often infected with cruelty and neglect’ ⁷⁹, replacing the terms ‘cruelty and neglect’ with ‘illness and death’ succinctly explains how hope is employed within The Fault in Our Stars.

Now is Good ends with a similar message to that of The Fault in Our Stars. In chapter two it was demonstrated that Tessa’s sexual relationship with Adam allowed her to view her body in a way that challenges the reductive positioning of sickness as purely abject. Here, it shall be shown that Tessa and Adams emotional connection also challenges the notion that sick patients are always ‘good’, tolerant sufferers, and that their bodies are repellant.

At the conclusion of Now is Good, despite Tessa’s demise, it is implied that her relationship with Adam will have given him the tools to make the most of his own future, and go to university. During her decline Tessa writes a note for Adam, imploring him to: ‘Look after no one except yourself. Go to university and make lots of friends and get drunk. Forget your door keys. Laugh. Eat pot-noodles for breakfast. Miss lectures. Be irresponsible’ (p. 313).

⁷⁹ Westwater, Giant Despair meets Hopeful, p. xvIII.
This message has the potential read as an easily packaged sentiment that perhaps disregards the realities of such experiences that Downham’s text aims to relay, but because, much like Hazel, Tessa is able, throughout her relationship with Adam, to eloquently express her emotions and fear, the pervading sense of hope that this text provides is nuanced and well delivered. Notably, relationships also function in this way within The Fault in Our Stars, previous to these romantic relationships the protagonists are all fairly isolated by their illness, and suffering depressive symptoms. It could be argued this repeating motif can be read as patronising, that these sick, female protagonist require a male figure to help them experience life, but because each character has agency and presents as a well-developed, defined character, as was detailed in chapter one, these relationships present as beneficial to both the male and female characters. 80

For Hazel and Augustus, cancer and their shared understanding (and appreciation) of the central place the abject has within their lives allows sex to as a construct to engage differently with the abject. Cancer interferes with, and alters, the ‘active’ male and ‘passive’ female sexual roles designated by the symbolic order, and the Othering of the female, whose desire is not recognised as possessing the strength of the male’s. Hazel and Augustus’s physical impairments make sex a shared, if difficult, experience, their experience of sex involves a keen awareness of illness and therefore implicitly of death, yet for Hazel and Augustus the normalcy of their respective disabilities lessons the impact of the abject: ‘He reached down and tried to pull my shirt

80 It is interesting to consider the trope of ‘the manic pixie dream girl’ a term developed by film critic Nathan Rabin. A dream girl is defined by her overt femininity and eccentric quirkiness, and is a stock character whom is unable to present as fully developed. She often exists to aid the male protagonist’s alteration in worldview. It is possible to argue that Cam in Wunder’s The Probability of Miracles functions as a Manic Pixie Dream Girl, allowing Asher to see the life is precious and that opportunities need to be embraced rather than feared. This is yet another topic that the word count restrictions prevent a full description of. Nevertheless, it remains an interesting topic which perhaps partially accounts for the weakness of Wunder’s text.
off but it got tangled in the tube. I laughed’ (p.206). Moreover Hazel and Augustus’s, (and Tessa and Adam’s) sexual experiences normalise sex whereas McDaniel overtly avoids the issue. Green and Downham normalise sex in that the depictions are realistic and honest, sex between two cancerous protagonists, in Green’s text, or a healthy male and sick, dying female in Downham’s, is not presented as a taboo or as a social issue that requires moral attention.

After Tess’s first sexual experience with Adam, as described in chapter two, Downham immediately returns to depicting the abject nature of Tessa’s illness as Tessa suffers a nosebleed: ‘Blood leaks down my throat […] I can’t really breathe. I lean forwards and spit onto the tea towel. A big clot glistens back at me, alien dark. It’s definitely not something that’s supposed to be outside my body’ (p. 215). Tessa remains limited by her illness, and this description clearly evokes the abject referring to the split between what should be inside and outside the body, which should be controlled by the clean and proper body. Moreover, the clot is ‘alien’, thus Tessa is abjecting the cancer, refusing to allow the illness to define her, whilst simultaneously acknowledging that her illness is repellent and horrifying. On her return from the ensuing hospital visit Tessa finds her name written in graffiti: ‘on the expensive shutters of the health food store. I’m massive on Handie’s furniture shop, kings chicken joint and the barbecue café […] I’ve possessed the road and am a glistening circle at the roundabout’ (p. 226). Adam’s demonstrative act of graffiti highlights his understanding of Tessa’s fear of being forgotten. Confronting the abject, in the form of Tessa’s sick body and then her nose bleed, does not repel Adam. Instead it allows him a deeper appreciation of Tessa’s emotions, motivating the act of vandalism. Hope, the hope that relationships can make the most abject experiences worthwhile, pervades this scene. Tessa writes: ‘I’ve been in hospital all night, my head’s stuffed with cotton. My arm aches from two units of
platelets delivered through my portacath. And yet, it’s extraordinary how happy I feel’ (p. 226). Wunder’s text presents a similar message relating to the worthiness of life, even if it is shortened, by displaying Cam’s relationship with Asher. On her death bed Cam tells Asher: “‘you were right about one thing […] that Jimmy Steward thing.’ “It’s a wonderful life?” “Yeah. However it plays out”’ (p. 357). However, due to the sanitisation of death, and the repression of the abject in relation to death and sex, as shown here and in Chapter One and Two, this message tends to eclipse the narrative. McDaniel’s texts portray adolescence and relationships as abject, and Wunder as completely curative. This sense that hope within Wunder’s text is contrived is re-enforced by the magical realism. As Cam is deteriorating, rather than focusing on specific emotions or bodily sensations and/or pain, the text employs magical realism. Cam sees a: ‘shadowy figure of the long haired woman from Asher’s photograph’ (p. 344). This figure dispenses loaded advice after Cam has argued with Asher, fearing hurting him, Cam says: ‘He doesn’t need to experience anymore loss […] it’s better for him to be angry than depressed.’” (p. 345). This theme is very similar to Hazel’s fears in Green’s text, where she worries about being a grenade. However, whereas Green’s text explores these emotions with complexity, in Wunder’s text the sentiment is told rather than shown, when the shadowy figure replies that: ‘Maybe he needs to grieve. He needs to say goodbye. He needs some closure’ (p. 345). Cam has not been able to come to this conclusion on her own, and instead is informed by a moralistic spectre.

In McDaniel’s text, abjection, relationships and hope are each portrayed problematically due to McDaniel’s conservative portrayal of April and Mark’s relationship, with its circumscribed categories of ill/healthy, pure/impure, marriage/sin. Kristeva clarifies the encompassing nature of the abject: ‘its very being, that it is none
The abject is constantly at play within the subject thus for the abject, the sick body, to be positioned as Other, as inherently separate from the living, healthy, good individual, as it is in McDaniel’s text, denies the text the opportunity to further explore April’s shifting conceptions of identity and her relationships. Wunder’s text presents concerning notions of sexual passivity, and only sporadically incorporates a confrontation of abjection into her text. Although hope is linked to relationships it is done so in a didactic rather than a convincing way, which relates to the texts overall lack of abjection. However, Green and Downham’s text the strength of the protagonist’s relationships allow them firstly to be presented as individual, rather than being reduced to depictions of abject bodies, and moreover these relationships allow the protagonists to access hope even in seemingly hopeless situations.

Conclusion

Contesting the Sick Body as Irrefutably Abject

This dissertation sought to explore the portrayal of abjection within the seven YA novels analysed, and overall, argues that texts which acknowledge the abject present stronger, more credible texts wherein the sick body as irrefutably abject is contested. The previous three chapters highlight that within *The Fault in Our Stars* and *Now Is Good* the sick body becomes increasingly ambiguous, and cannot be easily banished to the realm of the abject.

Kristeva’s theory of abjection infers that the sick body is abject because the body becomes symbolic of death and illness, an abject state. As has been mentioned, Kristeva is interested in the clean and proper body, a controlled, socially appropriate state, in which the body is socially productive and useful. The corpse presents the ultimate transgression of the clean and proper body. Therefore, illness which takes the subject symbolically, and often literally closer to the corpse is thoroughly abject because the inside of the body cannot be controlled, and is prone to emitting abject wastes. Tessa’s nosebleed, as discussed in Chapter Three, and Molly’s nosebleed as discussed in Chapter One, are evidence of this uncontrollable, abject state that illness forces the body to inhabit. However, it is crucial to this dissertation that when a text engages consistently with abjection when depicting illness, death and sexual relationships, which is true of Green and Downham’s texts, these narratives work to contest the stereotypical portrayal of the cancerous, female body as irrevocably abject.

Within *The Fault in Our Stars* and *Now is Good* the abject reality of cancer is not denied or repressed, rather it is confronted and described with emotional intelligence and agency by Green and Downham’s respective protagonists. Illness is acknowledged as abject by Hazel and Tessa, yet their relationships with Augustus, and Adam allows
them to view their bodies, and their lives, in a different way. These texts propagate a credible sense of hope, despite the terminal nature of the protagonists’ cancers, which can be directly related to the agency and emotional eloquence Hazel and Tessa demonstrate. Furthermore, these two texts refute the accepted portrayal of sick body as abject due to the strength of the emotional and physical relationships Hazel has with Augustus and that Tessa shares with Adam.

In McDaniel’s three texts, *Too Young to Die, Six Months to Live* and *Till Death do Us Part*, the abject is engaged with in such a way that it propagates concerning stereotypes wherein the period of adolescence, which each protagonists inhabits, is heralded as the abject state. Illness is a reprieve from this, and sexual relationships, and sexual desires are repressed, and portrayed as inherently abject. Additionally, as has been shown, these texts also provide a problematic depiction of the female protagonist, who each receives their cancer with tolerance and passivity. Within *Six Months to Live* the cancer reduces Dawn’s body to something thoroughly abject and repellent, which directly contrasts with Downham’s depiction of Tessa within *Now is Good*, who is able to experience an intense, mutually enjoyable sexual experience with Adam shortly before her death. This explicit sexual scene (which is not an isolated incident within this narrative), generates sincerely felt hope, despite the terminal nature of Tessa’s condition. In *Six Months to Live* and *Till Death do Us Part* the deaths of Sandy and Mark are presented as worryingly bound with sexual desire and weakness, indeed, McDaniel presents both female and male bodies as abject, and sexual desire as transgressive. It would be interesting to broaden this study, to focus on such issues in further detail.

Like McDaniel’s texts, a lack of abjection within *The Probability of Miracles* is problematic. In comparison to McDaniel’s texts Wunder’s narrative is less conservative
in its overall approach to the abject, in that it goes some way to presenting protagonist Cam as a developed, emotionally aware character. However, because the abject is constantly repressed by those around her, and death and sexual desire remains highly sanitised the texts attempt to generate hope despite Cam’s terminal illness, reads as didactic and essentially ineffective. The texts inclusion of trite examples of magical realism does nothing to dispute this sense, and instead reinforces the didacticism. The sanitised, repressed way in which the text depicts Cam’s first sexual experience is incredibly problematic, in that Cam’s passivity, and the texts refusal to present such a scene in any detail, leads to Cam’s lack of consent being ignored. Thus, Wunder’s text includes a rape scene which is not afforded any attention, and this stems directly from the texts desire to repress and sanitise sexual relationships.

This dissertation also links abjection to the ‘problem novel’, making a distinction between texts that approach the abject in a conservative way, and comparatively progressive texts. A Summer to Die is given as an example of a text that, due to the prevalence of conservative approaches to the abject, can be labelled as a ‘problem novel’. As has been mentioned, the label ‘problem novel’ is one that appeared during the sixties and seventies, thus it would be convenient to attribute this conservative approach to the abject, to a fixed point in time, a period in the history of YA Literature. However, Wunder’s The Probability of Miracles disputes this, as it contains many elements found within a problem novel.

Kristeva’s theory of abjection may position the sick body as abject, in that it is not clean and proper, however, another defining element of abjection relates to its fundamental ambiguity. A sick, dying body that can engage in mutually enjoyable sexual acts, challenging the accepted, and problematic, stereotype of inherent feminine passivity is immediately more complex, and presents as significantly ambiguous when
compared to a sick body portrayed as repellent and unfeminine, as shown in *Six Months to Live*. Overall, this dissertation succeeds in demonstrating that confronting and acknowledging abjection is important, even integral, within a realistic YA text dealing with cancer, and proposes that Green’s *The Fault in Our Stars* and Downham’s *Now is Good* are examples of texts that deal with terminal illness in a successful, innovative and complex way through confronting abjection.
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