

Graphic Narratives on Overcoming Eating Disorders and Reconciliation of the Body Image in Nadia Shivack's *Inside Out* (2007)

Luffina Lourduraj

Department of English, St. Joseph's College (Autonomous), an affiliate of Bharathidasan University, Trichy – 620002, India

J. Amalaveenus

Department of English, St. Joseph's College (Autonomous), an affiliate of Bharathidasan University, Trichy – 620002, India

Abstract—Mental illness is often misunderstood, misinterpreted, and misrepresented in the social-cultural context of society. Even with the development of psychology, there is still no widespread understanding of mental disorders and depression. Eating disorders, like anorexia nervosa or bulimia nervosa, are psychological disorders where the victim never eats food or binge eats and purges after eating, respectively. Young men and women are influenced by body shaming in society. They lose their self-esteem because they do not have that picture-perfect body portrayed in the media and mainstream culture, they use binge eating, purging, and starvation in their struggle to attain a body that is accepted by mainstream culture. Some fall into unhealthy eating practices causing nutrition deficiency, anemia, and ulcers; thus, they ruin their overall health. Graphic narratives about psychological disorders like eating disorders provide a realistic picture of the suffering of the victim through words and imagery. This research paper analyzes the graphic novel *Inside Out: Portrait of an Eating Disorder* (2007) by Nadia Shivack, a memoir that elaborates on the author's struggle with an eating disorder. The subjective narrative of the eating disorder highlights the struggles of the patient as well as society's concern for those who overlook the disorders. Moreover, graphic narratives help victims of eating disorders pave the way for self-acceptance and creating a positive self-image.

Index Terms—eating disorder, graphic medicine, graphic narratives, anorexia nervosa, bulimia

I. INTRODUCTION

Disease plays an important role in the history of mankind and literature. Illnesses, of mind and body; have played a significant role in fiction and non-fiction throughout the evolution of literature. Plagues and mass deaths have been portrayed in literature as a bitter reality of life that humanity has endured and continues to endure; this leads to the question of what art and literature mean in a world that deteriorates through illness and ultimately fades into death. In Shakespeare's play *Hamlet*, the titular character famously says, "To be or not to be; that is the question" (Shakespeare, 1695, p. 36). Over time, the characters such as Hamlet through their suffering of physical and mental illness, have grappled with this oft-quoted question: "Is it better to live or die?". They ultimately conclude that it is better to live — not merely exist— but to live meaningfully, finding purpose even in suffering, illness, and death.

Mental illness is often misunderstood, misinterpreted, and misrepresented in the social-cultural relations of society. A person with a mental disorder is shunned and feared in society because humankind fears unknown things, especially when it comes to mental disorders, the causes of insanity, and the actions of the insane mind for which even a cure is unknown. Indeed, the fear of the unknown is greater than the fear of the known; hence, throughout the history of humankind, those who have had mental illnesses have been treated as possessed by evil demons and were subject to torture because of religious superstition. Then, the evolution of the science of psychology broke down the myths of insanity, and religious superstitions began to be criticized. This brought to light that insanity is an illness that must be treated.

The psychology without a subject, which we have rejected, is inclined in the first case to answer in the affirmative since it regards the demon merely as a secondary psychic complex that is in essence of a nature entirely similar to that of the individual himself. (Oesterreich, 2013, p. 64)

Nevertheless, even with the development of psychology, there is still no widespread understanding of mental disorders and depression.

II. LITERATURE REVIEW

Graphic novels are a form of literary work that combines comic book art and dialogue. Though the term does not have a fixed definition, it can be traced back to an essay by Richard Kyle in *Capa-Alpha*, a fanzine comic book. The term

graphic novel became very popular in 1978 through the work of Will Eisner titled *A Contract with God*. Historians have evidence proving that the terminology existed much later than the graphic novels were circulating. The best-known evidence to support the notion is Belgian Frans Masereel's *Passionate Journey*, published in 1919, with cartoon images embedded in the stories, and Lynd Ward's wordless novels printed in the 1930s using the woodcut tradition.

In his book *Understanding Comics: The Invisible Art*, McCloud (1993) gives a brief history of the origin of comics, its components, and the techniques behind creating a comic book. In their book *The Penguin Book of Comics*, Perry and Aldridge (1968) discuss the development of notable comics in the United States and Great Britain, providing critical commentary and plentiful illustrations. In his book *Adult Comics: An Introduction*, Sabin (1993) dates the history of comics for adults to the late nineteenth century. He classifies the period of pre-and post-World War I as the boom of the comic era and largely invented by the media. In his book *Graphic Novels: Everything You Need to Know*, Gravett (2005) explains the worldwide development of comic strips to graphic novels—long stories told through illustrations—like Japanese manga, European caricatures, etc. In their book *The Rise of the Graphic Novel: Faster Than a Speeding Bullet*, Weiner and Couch (2004) highlight the rising number of comic readers and their interest in reading graphic novels. The book talks about the development of graphic novels, its rise to a sophisticated status, and its comeback as the fastest-growing area in publication. In their illustrated book *Graphic Medicine Manifesto*, Czerwiec et al. (2020) explains the intersection of comics in healthcare, thus creating a space in medical humanities for comics with themes on illness.

In *Patho Graphics: Narrative, Aesthetics, Contention, Community*, authors Squier, Merrill, and Marei (2020) have explored the works of fiction that depict illness, healthcare, and medical treatment. In their book *Spanish Graphic Narratives: Recent Developments in Sequential Art*, McKinney et al. (2020) described the history of Spanish sequential art, its themes, and its critical developments. Furthermore, it explores the Spanish customs and practices represented in sequential art. Moreover, in their book *Disability in Comic Books and Graphic Narratives*, Foss et al. (2016) explored the rhetoric of disability in graphic narratives. Author Robert Petersen (2010) detailed the history of sequential art from the dawn of human civilization and across different cultures like Japan, Britain, France, India, and other countries in his book *Comics, Manga, and Graphic Novels: A History of Graphic Narratives*. In the book *Holocaust Graphic Narratives: Generation, Trauma, and Memory*, writer Victoria Aarons (2019) explored graphic narratives and their illustrators who have drawn about the Holocaust, a tragedy that has haunted its victims throughout their lives. Finally, the writers Goggin, Hassler-Forest, Vanderbeke, and Domsch detailed the rise in the genre of comics, graphic novels, sequential art, and graphic narratives as a means of scholarship in *Handbook of Comics and Graphic Narratives* (2021). According to Pawuk (2017), some of the most influential creators in the world of graphic novels include names like “Neil Gaiman, Alan Moore, Jeff Smith, Stan Lee, Art Spiegelman, Jack Kirby, Daniel Clowes, Frank Miller, Will Eisner, Brian Michael Bendis, Rumiko Takahashi, Brian K. Vaughan, and many others” (p. 31). These renowned authors and artists have shaped the genre and contributed significantly to its growth and popularity.

III. METHODOLOGY

Art and literature have always served as platforms for representing groundbreaking principles and ideas that are often ignored by mainstream culture and society. Graphic narratives in art and literature represent that unspeakable truth that is overlooked. Indeed, it is a narrative that uncovers the hidden truth by breaking down the walls of traditions, cultures, myths, religions, and languages. Graphic narratives in literature disintegrate the traditional narratives of words that convey the meaning in polished words. They use words and imagery to create transparency of meaning, and with their clear, lucid, rich illustrations, they create multiple meanings and contexts. Furthermore, graphic narratives are an evolution in narratology, for they have multiple contexts, giving rise to dynamic meanings and interpretations. A graphic novel is a serialized comic that creates a sequential narrative in graphic form. Furthermore, they are the evolution of comics, narrating stories with a touch of art.

Chute (2008) posits, “Authors of graphic novels are not interested in creating images to be independent artworks, but rather in what Spiegelman calls picture writing and Satrapi calls narrative drawing” (p. 8).

Graphic novels use graphic narratives not only to portray reality but also to become the reality they portray. “Graphic medicine” was coined by humanities scholar, artist, and illustrator Dr. Ian Williams, who defines it as an intersection of comics and healthcare. Graphic medicine uses narrative drawing as narrative medicine for representing physical and psychological illnesses. It is an interdisciplinary theory in psychology, sociology, literature, and the arts. In graphic medicine, the victim becomes the subject of study and gains a voice to express their suffering.

Healthcare is a universal subject in which the doctor's perspective is given importance and the patient's perspective is often ignored. Those who treat the illness own the narrative, while those who are treated have no voice to express themselves. According to Charon and Martha Montello, doctors should “listen to the patient's story; attend to the expectation, wishes, and fear expressed; and try to enable the patient to shape a meaningful life, right up to its end” (Czerwiec et al., 2020, p. 46).

Graphic medicine gives voice to the voiceless who suffer from illness, as the victim becomes the subject of study. According to the theorist of graphic medicine, “Graphic medicine seeks to disrupt this power imbalance. We believe those best positioned to represent illness and caregiving are those living with it” (Czerwiec et al., 2020, p. 20).

One image passes the meaning into the other image, creating a sequential art combined with words and imagery that does not only make the reader think of what is inside the captured frame but also think of the things that are not captured

within the frame. Graphic narrative is realistic, lucid, and a combination of words and images that goes beyond representing the discovery of new perspectives. According to Gilman (2013), “The manipulation and alteration of image is not limited to the drawings and caricatures that represented the idea of mental illness during the late nineteenth and early twentieth centuries. Photographs, too, followed the juxtaposition of ideas of beauty/health and ugliness/illness in their representation of ideas of mental illness” (p. 45). The caricatures depicted mental illness through exaggerated features, photographs often juxtaposed the ideas of physical beauty and health with those of ugliness and illness. In this way, photographs were used to portray mental illness by emphasizing the contrast between a “normal” or “healthy” appearance and the supposed “deviance” or “abnormality” associated with mental disorders. This visual dichotomy reinforced societal stereotypes, presenting mental illness not only as a psychological condition but also as something physically visible, often by emphasizing physical features or expressions that were considered abnormal or disfigured. Through both artistic manipulation and photographic techniques, the representation of mental illness was tied to a broader cultural narrative that linked mental health to visible signs of physical degradation.

Graphic narratives on psychological issues such as eating disorders give a realistic picture of suffering through words and imagery. Eating disorders such as bulimia are psychological illnesses where the victim never eats food, eats a lot of food, or eats the food and then vomits it up soon after. Victims of eating disorders never reveal their condition, even to their family members or close friends. They skip meals, starve themselves, pretend to eat, or eat and purge (vomit) it all out later, or even starve themselves. In some cases, the victim eats excessively, thus gaining weight. Still, other disorders include victims swallowing everyday objects, even sharp ones. The people around the victims of eating disorders never understand why they are so lean or so fat. Moreover, in some extreme cases, the victim turns to substance abuse, which becomes a threat to their life. Indeed, there are many reasons for eating disorders, including trauma from childhood, physical abuse, emotional abuse, and victimization, which can create an onset of eating disorders, including bulimia, anorexia nervosa, and binge eating.

Young men and women are influenced by body shaming in society. They lose their self-esteem because of this picture-perfect idea of the body portrayed in both the media and mainstream culture. As a result, many develop eating disorders such as binge eating and purging, and some even starve themselves to attain a body image that is accepted by society. Irregularities in eating and starvation cause multi-failure of organs, nutrition deficiency, and depression. What is more, is that eating disorders take a toll on young women more than men. According to Lemberg and Cohn, “Women attribute their relapse to a fear of being fat and a desire to lose weight” (1999, p. 85). Additionally, eating disorders cause depression in women during times of pregnancy because they eat for the health of the baby, but she constantly worries about gaining weight, which makes her starve after childbirth, thus resulting in anemia, weight loss, depression, malnutrition, and less milk production. According to research, “Almost three-fourths of women fear that they will not be able to return to their previous weight after pregnancy” (Lemberg & Cohn, 1999, p. 85). Moreover, eating disorders arise out of the fear of becoming fat, the fear of losing beauty, unrealistic body expectations, and so on. The most widely recognized objects of fear are things that can inflict damage or fleeting thoughts of dying, which contribute to various problems caused by stress. This, in turn, may lead to hypochondriasis—a persistent fear where the person feels they have a serious or life-threatening illness despite having few or no symptoms.

IV. FINDINGS AND DISCUSSION

Nadia Shivack is a popular comic artist from New York. In her works, she records the effects of her suffering from an eating disorder on her life. She studied music, art, and performing arts at the Fiorello H. LaGuardia High School of Music and Art and Performing Arts and Occupational Therapy at Columbia University. Her graphic novel *Inside Out: Portrait of an Eating Disorder* was published in 2007 and brought her into the limelight of the comic world. Her graphic novel *Inside Out* is a memoir of her life and her struggles with an eating disorder. She begins it with the following: “Every day, meal by meal, millions of people suffer from eating disorders. I am one of them” (Shivack, 2007, p. 1). Shivack, as a teenage girl, felt her eating disorder was like an alien within her, working against her.

Nadia Shivack was introduced to food and dining at the age of six, and she used to be silent when she sat at the dining room table with her parents. Her mother always wanted the girls to eat everything and leave no leftovers on their plates. However quiet she may have been, her mind was always chaotically racing when she sat at the dining table, a voice screaming in her mind that it did not want the food and making her feel sick. One of the reasons why she did not want to eat was that she did not want to become fat. Most of the girls in her class were on a diet, skipping meals, and even fasting to become slim. Shivack says that about 42% of the students in her school between the first and third grades wanted to be thinner, and 85% of the girls were dissatisfied with their appearance.

One of the reasons why Nadia became insecure about her body was the nagging from her mother to be slim and feminine. Her mom frequently insisted that she lose weight and complained that she looked chunky. These actions of her mother highlight how family members can contribute to insecurity within a person. Young girls are particularly affected by these negative influences because families often expect their girls to be slim, associating this with femininity. In contrast, boys are typically expected to be strong and masculine. As a result, girls are often placed on strict diets to lose weight and to be slim, which negatively affects their health. Still, many families do not prioritize women’s health, placing society’s standards of being slim above their well-being.

Furthermore, in athletics and sports, women face the same demand to be slim, which often results in them fasting, becoming weak, and losing the game. When Nadia wanted to start her swimming classes, the coach wanted the girls to be slim and often praised the slim girls and criticized the girls who needed to lose weight. Every day, Nadia would start a new diet, skipping breakfast, lunch, and dinner. However, starving herself only made her hungrier, so she started bingeing and overeating, which made her stomach hurt and caused her to vomit up all the food she ate. Her purging made her weak, nauseated, faint, and breathless. Purging in a person has harmful effects on one's health; it causes severe dehydration, and an irregular heartbeat, and could cause the esophagus to rupture.

Shivack's illustration of two hands with the quotation, "This too shall pass" (Shivack, 2007, p. 10), represents the point where Shivack tries to take control of her life. Two hands clutched together—one hand representing the hand of the eating disorder and the other strong hand holding things together representing the hand of art, which helps her picture her pain and fight her disorder. Though her eating disorder gets stronger with her loneliness and her sadness due to her parent's separation, she finds her comfort in art. Shivack illustrates her eating disorder as a big monster that tries to take control of her life. She says her eating disorder is her evil twin.

Nadia was once hospitalized for four months because her condition got severe. While she was there, she got the psychological counseling, medical care and monitoring, and nutritional counseling she needed. After her discharge, she stayed with her friend Ilana. Both women shopped and cooked together, and Nadia made everything seem normal. However, two weeks after her discharge, she tried to commit suicide by drugging herself and cutting herself. Nevertheless, she was caught in time and given medical attention.

Her counselor advised her that her only job was to stay safe and allow herself to receive the help given to her. Only with time, patience, and medical treatment did she try to overcome her eating disorder. Her friend gifted her a pack of crayons, which helped her draw her suffering. Drawing helped distract her mind from her obsession with food and soothed her mind. In the final pages of her graphic novel, Shivack says, "I must accept my past, not deny it, not discard it, and learn to forgive myself" (Shivack, 2007, p. 53).

Through sequential art, the protagonist reveals the constant judging of her self-worth amidst her anorexia and depression. However, with the support of her family, friends, and therapy, she rebuilds her self-worth. Graphic narratives also helped the protagonist rebuild her lost self-worth by redrawing her image beautifully; using it as a visual metaphor for a self-satisfied body image. The frames in graphic narratives help the protagonist represent her frame of mind towards anorexia. Through visual metaphors, the protagonist realistically depicts different stages of eating disorders that affect various aspects of life.

The protagonist tries to create a visual equivalent of her life with anorexia nervosa through drawings in her graphic novel. The visual equivalent of her life of suffering is created through doodles, drawings, and sketches in her graphic novel, through which she finds meaning. The protagonist also tries to find meaning in her psychological condition, and her drawings of her suffering give her meaning, ultimately becoming her coping mechanism. The medium of comics and graphic narratives helps the protagonist attain mental freedom, something that is impossible to achieve in the real world, while also portraying her as a weak psychiatric patient who needs help.

The protagonist leaves reality and lives in the world of her drawings in which she faces her subconscious fears courageously. Graphic narratives become the opportunistic medium of self-expression of her mental state and thereby become therapeutic. Every scribble becomes meaning in the graphic medium, and the drawing becomes a symbolic play between the conscious and subconscious minds of the protagonist. Of course, the symbolic play cannot be achieved in reality because she fears reality; still, through representing her fears in this graphic medium, the protagonist attains gratification. Her psychological condition, anorexia nervosa, may make her feel weak, but through this graphic medium, she represents her fears in her drawings; thus, she feels powerful.

Acceptance of oneself gives a positive body image that builds self-confidence and self-esteem. Forgiveness of oneself from one's previous actions helps in preventing self-harm and suicidal thoughts. Accepting oneself might be hard for certain individuals due to social stigmas; thus, graphic narratives become the narrative medicine for these individuals who are subjects of illness by giving them a voice. Art and literature break the negative stereotypes and social stigmas and help a person who has a negative body image to have a transition, to aspire, and to accept oneself through one's creation of art and writing. According to Cognitive Behavioral Therapy (CBT), changes have to be made in thoughts, feelings, behavior, and physiology to cure the eating disorder.

By dividing our experience into four central components: thoughts (cognitions), feelings (emotions), behaviors, and physiology (your biology), the CBT approach suggests that if you learn to identify and understand these four elements and how they interact, you will be able to explain your problems and how to solve them (Waller et al., 2010, p. 10).

As trauma is a cause for one's mental suffering, the unfelt suppressed pain of the mind remains unhealed for a long time and takes control of the individual's emotions at unexpected times. Moreover, it takes a toll on a person's peace of mind and emotional stability. In cases of intense suffering from trauma, the person emotionally shuts down and the voice of the mind is silenced; the person refuses to talk or share their emotions with anyone. Furthermore, the intensity of trauma makes a person stutter while talking about their pain; the person feels helpless in choosing the appropriate words to express their pain through words. Finally, this intense condition of trauma prevents the person from expressing one's thoughts and emotions, and in such cases, graphic narratives allow a person to express their emotions in a choice set of words, images, and colors.

V. CONCLUSION

Graphic narratives on illness elucidate the transition of victims to survivors, and from the survivors' stage, they become thrivers. Empathy is the key to helping trauma victims recover. Along with the development process and providing safety and stability, the people around them must have empathy for the victims. When the victims become survivors, their narration of trauma becomes empowering and motivating for other victims. The victims emerge from the victim stage as survivors through self-determination. Illness and trauma should be seen as life events, as life is a continuous process that keeps changing. In this changing process, either the victims remain victims or they become survivors.

Through graphic narratives, people who suffer psychological and physiological illnesses become a product of change and resilient to pain. The people are transformed after their traumatic experience. The survivors change their emotional vulnerability into their emotional strength. The survivors of trauma are winners of the evolution of life. They see their traumatic experience as an event that forced them to change, and they emerge stronger than before. "Whatever does not kill me makes me stronger, yes" (Forna, 2011, p. 304). Trauma victims change their negative experiences into their positive strengths. They become adaptive to any circumstances and can cope with any change in life. Comic book mediums often feature gallows humor that can be used as a key element for trauma victims to represent their traumatic experiences. The trauma caused by terminal illness is severe because the victim knows that death is inevitable. These victims count their days of life on earth, which makes their trauma from illness severe. Graphic narratives on illness help trauma victims of illness to reduce their stress levels. Reading comics and laughing out loud makes the trauma victims of illness forget their pain for a moment. By using graphic narratives, the trauma victim of illness can narrate their experience of illness, and this acts as a cathartic effect to unleash their pain, fear, and agony of illness.

Graphic medicine, an interdisciplinary theory, has paved the way to understanding the correlation of literature, medicine, and art. Through graphic medicine theory, a work of art can be analyzed and interpreted from a medical standpoint. Graphic novels on illness educate the readers on various illnesses through images, and the pictorial representation of a disease and its symptoms creates an easy understanding of any disease. Furthermore, the graphic medicine theory broadens the horizons of art and also gives a whole new perspective on interpreting art through literature and medical viewpoints. This interdisciplinary approach not only deepens our understanding of art's potential therapeutic value but also emphasizes its utility in the clinical context. As Brandão (2019) asserts, "Art therapy is a safe and reliable tool for treatment not only of depression but also of other mental disorders" (p. 1), highlighting its efficacy as a therapeutic modality across a range of psychological conditions. Through this framework, graphic medicine underscores the critical role of visual storytelling in both reflecting and fostering emotional and mental well-being.

Graphic narratives on illness use imagery, illustrations, and graphic metaphors to narrate the personal experience of illness. These modern-day comic books serve as a medium where unheard voices of people suffering from illness can be heard. Moreover, graphic narratives on illness serve as an educative medium of healthcare, illustrating symptoms of illnesses, their treatment, and their outcomes through personal experience. Furthermore, graphic memoirs on illness have used verbo-visual narratives to represent illness through subjective experience. They can be analyzed through diverse perspectives using graphic medicine theory. What is more, is that the subjective experience of illness in graphic memoirs becomes a universal experience of illnesses. They also make the reader view the fallible nature of human beings suffering from an illness and the caregivers and doctors who are repeatedly exposed to the vulnerability of the human condition. Additionally, they use graphic narratives as an outlet for emotional scars and suppressed emotions. They also offer multi-perspectival representations of illness in graphic memoirs. Graphic narratives on illness have made graphic memoirs and graphic autobiographies sustainable in popular cultural dogma.

Graphic medicine theory analyzes the therapeutic nature of comics in expressing subjective experiences of illness. It is applied to the selected graphic memoirs on illness to analyze the externalization of internal emotional scars. Physiological and psychological manifestations of illness create emotional scars that remain repressed in the mind; graphic medicine theory analyzes how these emotional scars are manifested in illustrations in graphic narratives. Furthermore, it is a new revolution in clinical practice, giving priority to the patient's perspectives of illness. The movement of medical humanities and narrative medicine has given voice to those who suffer from various illnesses by prioritizing the subjective experience of the illness. Moreover, it provides an empathetic approach to those who suffer from illnesses and their caregivers. Comics have engaged medicine through narrative medicine and the movement of medical humanities. Additionally, the theory gives a holistic approach to the medium of comics through which comics can be encountered from dynamic perspectives.

Graphic narratives act like a narrative medicine that helps in constructing the thoughts of one's choice of words and images. The combination of word, image, and color in graphic narratives unleashes one's creativity, helping the subject of illness to express one's trauma from illness in a flexible medium of narratology. Finally, graphic novels use the comic medium, which helps the victim of the eating disorder to attain a transition in life, paving the way for self-acceptance and creating a positive self-image.

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Luffina Lourduraj is a full-time Ph.D. research scholar at St. Joseph's College, India. She holds a Master of Philosophy degree in English that was awarded from Bharathidasan University of Tiruchirappalli, India, in 2020. She is currently pursuing her doctoral degree in graphic literature at St. Joseph's College. Her areas of interest are graphic narratives, graphic medicine, comics, and cultural studies. She has published research articles in international peer-reviewed journals and presented research papers at national and international conferences. She was awarded the Best Creative Writer award for short story writing in college and inter-college competitions. She writes poetry and book reviews on goodreads.com and her blog at <https://luffinalourdurajpoems.blogspot.com>

J. Amalaveenus is working as a professor in the Department of English at St. Joseph's College, Tiruchirappalli, India. Her expertise lies in English language teaching and Indian writing in English. Her areas of interest are feminism, queer studies, and Indian feminist writing in English. Her contributions to the field are well documented through publications in reputable international journals and invited talks at various educational institutions.