

**CRAIG'S DEPRESSIVE COGNITION IN NED VIZZINI'S**

***IT'S KIND OF A FUNNY STORY***

**THESIS**

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**Craig's Depressive Cognition In Ned Vizzini's  
*It's Kind Of A Funny Story***

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MALANG  
2019**

## STATEMENT OF AUTHORSHIP

I state that the thesis entitled **“Craig’s Depressive Cognition In Ned Vizzini’s *It’s Kind Of A Funny Story*”** is my original work. I do not include any materials previously written or published by another person, except those ones that are cited as references and written in the bibliography. Hereby, if there is an objection or claim, I am the only person who is responsible for that.

Malang, 22 May 2019



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## APPROVAL SHEET

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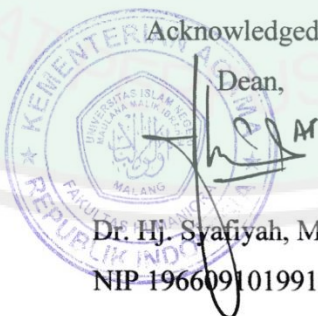
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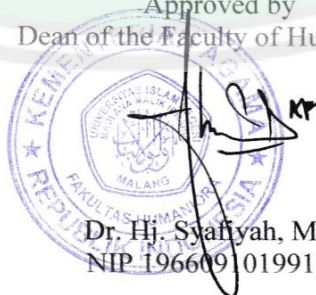


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## MOTTO

*I know many of you are going through tough times right now but this  
could be the most beautiful moments of our lives*

-Rm





## ACKNOWLEDGEMENT

*Bismillahirrohmanirohim*

I would like to express my best gratitude to our greatest Allah SWT for His mercies and blessing so that it made me able to complete this study at the proper time entitled Craig's Depressive Cognition In Ned Vizzini's *It's Kind Of A Funny Story* as the requirement for my degree of Sarjana Sastra and also for my Prophet Muhammad SAW For brought us from the darkness to the lightness.

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Finally, I welcome any critics and suggestions for the improvement of this thesis. I hope this thesis writing will be useful for all of us, especially the students of English Department.

Malang, 22 May 2019

Author

Adristi Fika Septiawan

## ABSTRACT

Septiawan, Adristi Fika. 2019. *Craig's Depressive Cognition In Ned Vizzini's It's Kind Of A Funny Story*. Minor Thesis (*Skripsi*) Department of English Literature, Faculty of Humanities, Universitas Islam Negeri Maulana Malik Ibrahim Malang. Advisor: Agung Wiranata Kusuma, M.A.

**Keywords** : Psychological analysis. Depressive Cognition.

Depression is an emotional condition that is usually characterized by sadness or feelings of nothing. It is one of the main mental health problems nowadays that can occur in our lives. Depression can worsen and can last longer for months or even years sometimes. The worst risk can cause someone to commit suicide. Due to that reason, this study is important because it analyzes the depression issue, specifically depressive cognition. Depressive cognition is associated with negative thinking about the self, the world, and the future.

The object used in this study is *It's Kind Of A Funny Story* (2006) by Ned Vizzini and focus on Craig as the main character. This study uses depressive cognition by Aaron Beck to discover that Craig's depression is associated with negative thinking about the self, the world, and the future and cope the depression theory based on cognitive perspective by Paul Gilbert to discover Craig's ways to cope his depression. This study is a literary criticism since the writer interprets and analyzes a literary work. The data are taken from words, phrases and sentences in *It's Kind Of A Funny Story* (2006) by Ned Vizzini.

The finding of this study discovered the mechanisms of Craigs's depressive cognition are his cognitive bias such as Catastrophizing, Labelling, Selective abstraction. Dichotomous Thinking. Then, he has negative schema from his experiences. As a result, he saw himself, the world and his future in negative way. There are also symptoms of depression such as affectional symptoms, motivational symptoms and behavioral symptoms that still related with his mechanisms of depressive cognition. This study found Craig's way to cope his depressive cognition problem: (1) creating personal space, (2) breaking down the large problem into smaller ones, (3) coping with the boredom, (4) planning positive activities, (5) setting owns limits, (5) changing behavior.

The researcher suggests the next researchers to study more deeply and focus on another mental illness. For example, anxiety disorder might be possible in this novel. The possibility of the theory, process and the results of the analysis are also different from this study.



## ABSTRAK

Septiawan, Adristi Fika. 2019. *Craig's Depressive Cognition In Ned Vizzini's It's Kind Of A Funny Story*. Skripsi Jurusan Sastra Inggris, Fakultas Humaniora, Universitas Islam Negeri Maulana Malik Ibrahim Malang.

Dosen Pembimbing : Agung Wiranata Kusuma, M.A.

**Kata Kunci** : Pendekatan Psikologi, Depresi Kognisi.

Depresi adalah kondisi emosional yang biasanya ditandai oleh kesedihan atau perasaan kosong. Ini adalah salah satu masalah kesehatan mental utama saat ini yang dapat terjadi dalam kehidupan kita. Depresi dapat memburuk dan bisa berlangsung lebih lama selama berbulan-bulan atau bahkan bertahun-tahun. Risiko terburuk dapat menyebabkan seseorang melakukan bunuh diri. Karena alasan itu, penelitian ini penting karena menganalisis masalah depresi, khususnya kognisi depresi. Kognisi depresi terkait dengan pemikiran negatif tentang diri, dunia, dan masa depan.

Objek yang digunakan dalam penelitian ini adalah *It's Kind Of A Funny Story* (2006) dari Ned Vizzini dan fokus pada Craig sebagai karakter utama. Penelitian ini menggunakan teori kognisi depresi oleh Aaron Beck untuk menemukan bahwa depresi Craig dikaitkan dengan pemikiran negatif tentang diri, dunia, dan masa depan dan teori mengatasi depresi berdasarkan perspektif kognitif dari Paul Gilbert untuk menemukan cara Craig mengatasi depresinya. Penelitian ini adalah kritik sastra karena penulis menafsirkan dan menganalisis karya sastra. Data diambil dari kata-kata, frasa, dan kalimat dalam *It's Kind Of A Funny Story* (2006) dari Ned Vizzini.

Hasil penelitian ini menemukan mekanisme kognisi depresi Craig diantaranya bias kognitif seperti Catastrophizing, Labeling, Abstraction selektif dan Pemikiran Dikotomis. Kemudian, ia memiliki skema negatif dari pengalamannya. Akibatnya, ia melihat dirinya sendiri, dunia dan masa depannya dengan cara negatif. Ada juga gejala depresi seperti gejala afektif, gejala motivasi dan gejala perilaku yang masih terkait dengan mekanisme kognisi depresi. Studi ini menemukan cara Craig untuk mengatasi masalah kognisi depresi: (1) menciptakan ruang pribadi, (2) memecah masalah besar menjadi lebih kecil, (3) mengatasi kebosanan, (4) merencanakan kegiatan positif, (5) melakukan kegiatan positif (5) merubah perilaku.

Peneliti menyarankan peneliti berikutnya untuk belajar lebih dalam dan fokus pada penyakit mental lain. Misalnya, gangguan kecemasan mungkin terjadi dalam novel ini. Kemungkinan teori, proses dan hasil analisis juga berbeda dari penelitian ini.

## مستخلص البحث

سيفتيان، أدريستي فيكا. 2019. ( *Craig's Depressive Cognition In Ned* ). البحث العلمي. قسم الأدب الإنجليزي، كلية العلوم الإنسانية، جامعة مولانا مالك إبراهيم الإسلامية الحكومية مالانج.

المشرف: أغونغ ويراناتا كوسوما الماجستير.

الكلمات المفتاحات: النهج السيكلوجي، الإكتئاب الإدراك.

كآبة هي حال عاطفي الذي يظهر الحزن أو الشعور الفرجة أدة. هذا واحدة من المشكلات الصحة الذهنية الرئيسية الآن التي تستطيع ان تحدث في حياتنا. تستطيع ان تستقل وتستطيع ان تمشي في الوقت الأطوال حينما أشهر حتى السنوات العديدة. الخطر الأسفل يستطيع ان يسبب الشخص يفعل إنتحارا. بسبب ذلك، هذا البحث مهم لأنّ التحليل عن المسألة الكآبة، الخاص الإكتئاب الإدراك. الإكتئاب الإدراك يرتبط بالفكرة السلبية عن النفس، الدنيا، والعصر الحاضر.

الأغراض الذي يستخدم في هذا البحث هو ( *It's Kind Of A Funny Story* ) من (2006) من (Ned Vizzini) ويركز على (Craig) الشخص الرئيسي. يستخدم هذا البحث النظرية الإكتئاب الإدراك عن (Aaron Beck) لإكتشاف أنّ الكآبة (Craig) يرتبط على الفكرة السلبية عن النفس، الدنيا، والعصر الحاضر والنظرية ترسي الكآبة عند المنظور المعرفي من (Paul Gilbert) لإكتشاف الكيفية (Craig) يرسي كآبته. هذا البحث هو النقد الأدب لأنّ الكاتبة تفسّر وتحلّل الأدب. تأخذ البيانات من الكلمات، العبارة، والجملة في (2006) (Kind Of A Funny Story) من (Ned Vizzini).

حاصل هذا البحث لإكتشاف التقنية الإكتئاب الإدراك (Craig) بينها التحيز المعرفي مثل (Catastrophizing, Labelling, Dichotomous Thinking) والتفكير ثنائي التفرع. ثم، يملك المخطط السلبي من خبرته. فالعاقبة، ينظر نفسه، الدنيا، والعصر حاضره بكيفية السلبي. ويكون الأعراض الإكتئاب أيضا مثل أعراض عاطفية، أعراض تحفيزية، والأعراض السلوكية التي مازلها ترتبط بالتقنية الإكتئاب الإدراك. تكتشف هذه الدراسة الكيفية (Craig) لتجاوز المسألة عن الإكتئاب الإدراك: (1) خلق الغرفة النفسية (2) حال المشاكل الكبيرة تصبح الأصغر (3) تجاوز البرم (4) تخطيط الأنشطة الواثقة (5) إفعال الأنشطة الواثقة (6) تغيير السلوك.

تقترح الباحثة الباحثين الحاضرين لتعلم العميق والتركيز على الأمراض الذهنية الأخرى. مثلاً، الإختلال الإزعاج يمكن ان يحدث في هذه الرواية. إمكان النظرية، العملية، وحاصل البحث المختلف أيضا من هذا البحث.



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## CHAPTER I

### INTRODUCTION

This part presents the background of the study, research question, objectives of the study, scope and limitation, significance of the study, definition of key terms, previous study and research method. The research method includes data sources, data collection, and data analysis.

#### A. Background of the Study

Literary works study human beings and describe their inner world with all its aspects. The reason is that a literary work is at the same time a product of a certain psychological condition (Emir, 2016). Psychology and literature has deep connection in human life. Both deals with the human behaviors, expression, thought, and motivation. Literature psychology covers almost everything we want to know about literature, because literature is a product of mind. In analyzing the character in literary works should be based on psychological theories and laws that explain human behavior and character. One of psychological theories that can be used for this research is mental illness, especially depression theory.

Depression is the most common mental disorders categories. These disorders are highly prevalent in the population and impact on the mood or feelings of affected persons, symptoms range in terms of their severity (from mild to severe) and duration (from months to years). These disorders are diagnosable health conditions, and are distinct from feelings of sadness, stress or fear that anyone can experience from time to time in their lives (WHO, 2017).

Depression can affect someone becomes feelings of nothing, stay away from others, and unable to sleep, lost interests in the usual activities (Davison, 2006). It can affect men and women of all ages, levels of education, any social class, economic backgrounds can experience the causes of depression. One type of depression is depressive cognition. Depressive cognition theory proposes that depression is associated with negative thinking about the self, the world, and the future.

The theory contends that negative thinking in depression is maintained in part by cognitive biases such as a tendency to infer overgeneralized meanings from a single rejection or failure and thereby conclude that one's future is bleak (McDermut, Haaga, and Bilek, 1997). For example, Aaron Beck is widely regarded as the father of cognitive theory, and his theories are widely used to treat depressive cognition. Aaron Beck developed a cognitive theory that initially focused on depressive cognition and has been expanded to other areas of psychology. He studied people suffering from depressive cognition and found that they appraised events in a negative way.

There are a lot of authors wrote novels in a form psychological problem. Based on the previous explanation, *It's Kind Of A Funny Story* by Ned Vizzini (2006) is a young adult novel that discuss about the life of a clinically depressed teenager, Craig Gilner. He is under the pressure of an exclusive, demanding school in Manhattan, not-so-great friends and the ongoing sensation that he is a failure. He also wants to kill himself but he did not do it then he decided to go to the adult psychiatric unit of a Brooklyn hospital. There he meets a diverse group

of fellow patients and is able to confront the source of his depression. On the unit, Craig meets a diverse group of fellow patients, some adult and some teens like himself. There, he met with a girl named Noelle, who has disfigured herself by cutting her face. As his five day stay proceeds, Craig begins to eat normally again and feel more hopeful as he sees people whose lives are far worse than his. As a temporary patient in a mental ward, Craig, the main character and narrator, learns that he isn't the only one who is having problems succeeding at life. By befriending and helping some of the patients, he also helps himself. He discover the blessings of life and how to cope with the obstacles that sometimes gets in the way of happiness.

*It's Kind Of A Funny Story* (2006) is suitable to be studied with depression theory because nowadays the information related to depression is essential to learn since people can easily and unconsciously get depressed. It is more than just feelings of unhappiness, clinical or major depression is a mood disorder—a medical illness that involves both the body and mind (Bartha C, Parker C, Thomson C, 1999). It's life threatening, and this novel showcases this in such an amazing way which needs to be shown more widely in every day life. This novel shows the harsh reality of depression, bi-polar disorder, schizophrenia, self harm and so many other mental illnesses which nowadays are just worn as a token for attention by people who do not understand. The writer especially liked the concentration on depression being an illness in the book. Depression can happen to anyone, any group of people, any socio-economic conditions, and at any age (Iskandar, 2012). It's a chemical reaction and should be treated with the same care

and dignity as any other disease. Nowadays, people may forget this kind of mental issue, especially with teenagers. This novel also won an award as the Best Books For Young Adults in 2007. At the end, the novel teach the writer about how we can see our life from different things and love our own life. These reasons are considered adequate for the writer to choose the novel to be analyzed.

This research is important to be studied with depression theory because those theory is useful for everyone who have those feeling or thoughts that deviate in the form of negative interpretations (Davison, 2006). We may also feel helpless, hopeless, and worthless. Not only affects us, depression will also change our relationship with family and relatives. Depressive cognition also has medical recovery that can be done and many people who need it feeling better after completing the treatment. There are everal studies suggest that with some depressions, cognitive therapy has been associated with greater reductions in depressive symptoms than anti depressants medications (Blackburn, Bishop, Glenn, Whalley, & Christie, 1981). In literature, the writer found Craig as the main character in It's Kind Of A Funny Story by Ned Vizzini is an example of people who suffered from depression, specifically depressive cognition. He can handle the disease after completing the treatment process such as changing his negative thoughts, etc.

This research is important because it conducts the depression theory that can happened in our life. Depression is one of the main mental health problems nowadays, which gets serious attention (Namora, 2009). In developing countries WHO predict that by 2020 depression will become one of the mental illnesses that



are many experienced. Anyone who is suffering from depression is real, not an illusion like an imbalance disease in schizophrenic neurotransmitters. When depression strikes, this disease will attack the various areas of life. Such as career, friendship, marriage, finance - every aspect of everyday life is disturbed by this depression. If left untreated, depression can worsen and can last longer for months or even years sometimes. The worst risk can cause someone to commit suicide. In literature, the writer found *It's Kind Of A Funny Story* by Ned Vizzini are another example of psychological condition story and can be analyze with Beck's Theory. Beck's theory defined depression in cognitive terms (Beck, 1972). He saw the essential mechanisms of the disorder as the "cognitive triad": (a) a negative view of self, (b) a negative view of the world, and (c) a negative view of the future. The depressed person views the world through an organized set of depressive schemata that distort experience about self, the world, and the future in a negative direction.

Following with the depression theory, there are current researches related with the study. The first research is from Desi Veranita with her study *Major Depression Reflected in Jodie Foster's The Beaver Movie (2011) : A Psychoanalytic Approach* investigates how the major character suffers a major depression in his personality. The object of the study is the personality of the major character of The Beaver Movie. The study analyzes the movie based on structural elements of the movie and based on psychoanalytic approach. Her study also analyzed the major depression theory including depressive cognition

theory but in general. The outcome of the study shows human suffering of major depression in their personality.

The second research is from Wiwin Widyawati *An Analysis of Depression on The Main Character Kyle Kingson On The Beastly Film (2014)*. The object is Beastly Film focusing on Kyle Kingson as a character. She focuses on analysis character's depression such as symptoms and factors. Her study showed that there are five symptoms of depression from the main character Kyle Kingson namely, (1) feeling sad or unhappy, (2) loss of interest or pleasure daily activity that be loved before, (3) easy to be angry or easy to be offended, (4) difficult to take decision, less to concentrate, (5) feeling worthless, guilty and always thinking about past failures. Moreover, Kyle can solve his depression by himself and Zola and Will make Kyle becomes confidence with his ugly face. At the end, she also found there are two causes of Kyle's depression.

The last research is from Dian Sophia Ulfa *Charles Benetto's Dream in Depressive Condition and Its Effect Depicted In Mitch Albom's For One More Day (2014)*. Her study analyzed several symptoms as depressed person after facing several problems in his life that happen within his family. The causes and desires regarding his depression remain in his unconscious. Those affect his mind and later appear in his dream. He dreams about things that worry him and wishes that are unfulfilled. Therefore, the objectives of this study are to explore the relation between Charles' depression and his dream then to discover how Charles' dream changes his personality.

Based on the previous studies above, inspire the writer to conduct the research on Craig depressive cognition portrayed in Ned Vizzini's *It's Kind Of A Funny Story*. The first previous study focus to analyzed the major depression theory including depressive cognition theory. The second previous study only focuses on the symptoms and causes of depression. The last previous study focuses on several symptoms as depressed person after facing several problems in his life that happen within his family. The causes and desires regarding his depression that affect his mind. Therefore, the writer concludes that the novel *It's Kind of a Funny Story* has not been analyzed using depressive cognition theory from Aaron Beck. Those explanations, make this study different than another previous studies that already written. In addition, this research is conducted entitled "**Craig's Depressive Cognition In Ned Vizzini's *It's Kind Of A Funny Story***".

#### **B. Problem of the Study**

1. What are the mechanisms of Craig's depressive cognition in Ned Vizzini's *It's Kind Of A Funny Story*?
2. How does Craig cope his depressive cognition in Ned Vizzini's *It's Kind Of A Funny Story*?

#### **C. Objectives of the Study**

1. To find out the mechanisms of Craig's depressive cognition in Ned Vizzini's *It's Kind Of A Funny Story*.

2. To explain the way Craig cope his depressive cognition in Ned Vizzini's *It's Kind Of A Funny Story*.

#### **D. Scope and Limitation**

This study focuses on Craig's depressive cognition in *It's Kind Of A Funny Story*. This research focused on the mechanisms and the character's way to cope his depressive cognition problem. In analyzing this topic, the writer used depressive cognition theory from Aaron Beck (1972).

#### **E. Significance of the Study**

The writer expects this research will contribute to the larger body of knowledge, especially the literary study on *It's Kind Of A Funny Story* (2006) novel. This research is expected to give deeper understanding to the writer and the readers in analyzing the depressive cognition theory based on psychological perspective.

#### **F. Definition of Key Terms**

**Psychological Approach :** A literary psychological approach is an approach which is based on the assumption that literature is always talking about human life that always exhibits diverse behaviors (Semi, 1993).

**Depressive cognition:** Depressive cognition is associated with negative thinking about the self, the world, and the future (Beck, 1976).

## G. Previous Studies

This study analyzes Craig's depressive cognition in the novel entitled *It's Kind Of A Funny Story* written by Ned Vizzini. This below are several previous studies about depression disorder used by another researcher, in order to see the similarities and the differences with this study.

The first research is from Desi Veranita *Major Depression Reflected in Jodie Foster's The Beaver Movie (2011) : A Psychoanalytic Approach*. Her study investigates how the major character suffers a major depression in his personality. The object of the study is the personality of the major character of The Beaver Movie. Therefore, the study analyzes the movie based on structural elements of the movie. In analyzing the major character using psychoanalytic approach by Sigmund Freud and Robbin's Theory of Major Depression. She is also analyzed depressive cognition theory but in general. The outcome of the study shows human suffering of major depression in their personality.

The second research is from Wiwin Widyawati *An Analysis of Depression on The Main Character Kyle Kingson On The Beastly Film (2014)*. The object is Beastly Film focusing on Kyle Kingson as a character. This research is a literary criticism which uses psychological approach and depression theory based on National Institute of Mental Health Canada. She focuses on analysis character's depression such as symptoms and factors. Her study showed that there are five symptoms of depression from the main character Kyle Kingson namely, (1) feeling sad or unhappy, (2) loss of interest or pleasure daily activity that be loved



before, (3) easy to be angry or easy to be offended, (4) difficult to take decision, less to concentrate, (5) feeling worthless, guilty and always thinking about past failures. Moreover, Kyle can solve his depression by himself and Zola and Will make Kyle confidence with his ugly face. At the end, she also found there are two causes of Kyle's depression.

The last research is from Dian Sophia Ulfa *Charles Benetto's Dream in Depressive Condition and Its Effect Depicted In Mitch Albom's For One More Day (2014)*. This study is carried out using psychological approach since the psychological phenomenon of the main character is analyzed in descriptive ways. Jungian dream and personality theories are applied in analyzing the data that are found in the novel. In her study found several symptoms as depressed person after facing several problems in his life that happen within his family. The causes and desires regarding his depression remain in his unconscious. Those affect his mind and later appear in his dream. He dreams about things that worry him and wishes that are unfulfilled. Therefore, the objectives of this study are to explore the relation between Charles' depression and his dream then to discover how Charles' dream changes his personality.

The difference between the first previous study entitled *Major Depression Reflected in Jodie Foster's The Beaver Movie (2011) : A Psychoanalytic Approach* and this research is the object. The first previous study uses The Beaver Movie, while this research uses a novel by Ned Vizzini as the object. Besides, this research is going to uses psychological approach specifcally cognitive approach to find out the mechanisms and character's way to cope depression while the

objectives of the first research are describe a major depression in his personality. The writer learned that The Beaver movies shows a major depression that suffers by Walter Black as a major character especially based on causes of depression. There are Psychodynamic view, behavioral view, cognitive view, and biological view. Also, the writer learned the effect of his disorder is made him become someone who loss of confident and cannot communicate to others.

This research is also different from the second previous study, *An Analysis of Depression on The Main Character Kyle Kingson On The Beastly Film (2014)*. This research analyzed the depression in general. There are five symptoms of depression from the main character Kyle and there are two causes of Kyle's depression. The first is because Kyle is cursed by Kendra so that his handsome face change into horrified. The second is because Kyle is never accompanied by his father. Besides, the second previous study only focuses on causes, symptoms and describe a brief solution of depression. From those previous study, the writer learn the symptoms and take that into this study. They are feeling sad or unhappy, loss of interest or pleasure daily activity that be loved before, easy to be angry or easy to be offended, difficult to take decision, less to concentrate, feeling worthless, guilty and always thinking about past failures. The symptoms of depression above are found from the dialogues and expression of the character in the scene of the film.

The last previous study is *Charles Benetto's Dream in Depressive Condition and Its Effect Depicted In Mitch Albom's For One More Day (2014)*. Her study is using Jung's psychoanalysis and depression in general while this study using

psychological approach, specifically cognitive approach and depressive cognition theory. These previous study focuses on several symptoms as depressed person after facing several problems in his life that happen within his family. The causes and desires regarding his depression remain in his unconscious. The objectives of this study are: (1) to explore the relation between Charles' depression and his dream (2) to discover how Charles' dream changes his personality. The writer learn that *For One More Day* by Mitch Albom portrays a psychological condition of human being. It is one of the novels that explores that issue, especially regarding dreaming in depressive condition and personality changes.

Unlike the previous studies above, the writer in this research tries to analyze depressive cognition of Craig as the main character in Ned Vizzini's *It's Kind Of A Funny Story*. The writer wants to focus more specific about depression using depressive cognition theory of Aaron Beck in Ned Vizzini's *It's Kind Of A Funny Story*.

#### **H. Research Method**

In this research, the writer used Literary criticism because the writer interprets and analyzes a literary work. Literary criticism might develop the writers' reading and thinking skills to literary work (Gillespie, 2010). By applying psychological approach, the writer wants to focus on depressive cognition in the novel. At this point, the writer tried to analyze the conflict of the novel is depressive cognition which is still related with psychological approach. The writer applies the depressive cognition theory from Aaron Beck (1972) and cope the

depression theory based on cognitive perspective by Paul Gilbert (1997) to find out how to Craig realize and deal with his depressive cognition.

### **1. Data Source**

The data source for this research is a novel by Ned Vizzini's *It's Kind Of A Funny Story* which has 444 pages. *It's Kind Of A Funny Story* by Ned Vizzini was published in 2006 by Hyperion.

### **2. Data Collection**

To collect the data, The writer would classify the data related to the research. First, The writer read the novel and try to understand the whole story. Second, The writer start to identify the mechanisms of depressive cognition and the character's way to cope his depression in *It's Kind Of A Funny Story* (2006).

### **3. Data Analysis**

There are three steps to analyze the data. First, identify the mechanisms of depressive cognition according to Aaron Beck Theory (1972). Then, identify the character's way to cope his depression problem with Paul Gilbert's cope the depression theory based on cognitive perspective (1997). Third, the writer start to classify the data to answer the research problem and making a conclusion from the analysis.

## CHAPTER II

### REVIEW OF RELATED LITERATURE

This research focuses on Craig's depressive cognition in *It's Kind Of A Funny Story* novel. Therefore, theoretical framework is drawn here in order to have deep understanding to the whole concepts of this research.

#### A. Psychological Approach

This study is using the psychological approach to analyze the novel since this study is related to psychological aspects. A literary psychological approach is an approach which is based on the assumption that literature is always talking about human life that always exhibits diverse behaviors (Semi, 1993). Psychological approaches have many disorders result from mental, behavioral, and social factors, such as personal experiences, traumas, conflicts, and environmental condition. A psychological approach is a unique form of criticism in that it draws upon psychological theories in its interpretation of a text. Linking the psychological and literary worlds bring a kind of scientific aspect into literary criticism.

The psychological approach leads most directly to a substantial amplification of the meaning of a literary work. When we discuss psychology and its place in a literary work, we are primarily studying the author's imagination. As all literary works are based on some kind of experience, and as all authors are human, we are necessarily caught up in the wide spectrum of emotional problems



caused by experience. The knowledge of psychology helps the author to create characters in plays and novels more real as well as situation and plot (Wellek and Warren, 1956).

Wellek and Warren (1977:81), in *Theory of Literature*, explain that there are several definitions of literary psychology based on the subject of research:

1. Psychology of literature that studies the psychology of the author as an individual. It means that a writer is a human being who cannot be separated from the nature that has the desire and emotion. Based on his passion and emotional background he can create a literary work.
2. Psychology of literature psychology that studies the creative process. It means that this study looks at how the process of a work can be made into a whole literary work.
3. Psychology of literature that studies the types and principles of psychology applied to literary works. It means that this study looks at how topics and cases in psychology are applied in the character of literary works.
4. Psychology of literature that studies the influence of literary works on the reader. It means that this study sees the influence of literary work on the reader, whether it affects the way of thinking and the way of life of the reader or not.

Based on the above literary psychology approaches, this study is included in the psychological of literature that studies the psychology of the author as an individual. Since Ned Vizzini wrote *It's Kind Of A Funny Story* based on his experienced when he was in hospital. He has the mental illness of depression. Due

to that experienced, Ned described Craig Gilner is a young teenager who suffer in depression too.

## **B. Theory of Depression**

Depression is a disruption of human functions related to natural feelings of sadness and symptoms, including changes in sleep patterns and appetite, psychomotor, concentration, anhedonia, fatigue, hopelessness and helplessness, and suicide (Kaplan, 2010). The sadness feelings are possible as a reaction to an event that is the cause. This sadness can cause physical and mental dysfunction, such as the ability to work, appetite and ability to think even though it is simple (Shreeve, 1992). There are several theories about depression, namely: behavioral theory, biological theory, stress theory, cognition theory, and humanist theory.

### **1. Behavioral Theory**

Behaviorism emphasizes the importance of the environment in shaping behavior. The focus is on observable behavior and the conditions through which individuals' learn behavior, namely classical conditioning, operant conditioning, and social learning theory. Therefore depression is the result of a person's interaction with their environment.

### **2. Stress Theory**

Stress occurs when there are gaps or imbalances between demands and abilities. Demand is something that if not fulfilled will have negative consequences for individuals. Lazarus states that stress is a relationship between

an individual and an environment that burdens or exceeds his strength and threatens his health.

### **3. Cognition Theory**

This approach focuses on people's beliefs rather than their behavior. Depression results from systematic negative bias in thinking processes. Emotional, behavioral (and possibly physical) symptoms result from the cognitive abnormality. This means that depressed patients think differently to clinically normal people. The cognition approach also assumes changes in thinking. One theorist is from Aaron Beck. He studied people suffering from depression and found that they appraised events in a negative way.

### **4. Humanist Theory**

Humanists believe that there are needs that are unique to the human species. According to Maslow (1962), the most important of these is the need for self-actualization (achieving our potential). The self-actualizing human being has a meaningful life. Anything that blocks our striving to fulfill this need can be a cause of depression.

Based on the explanation above, there are several theories about depression, namely: behavioral theory, stress theory, cognitive theory, and humanist theory, but researchers use cognitive theory, because according to researchers there is depressive cognition of self, the world, and future. So that in evaluating and interpreting things that happen to Craigs tend to draw conclusions that are not enough and have a negative view.

### **C. Type of Depression**

Based on the National Institute of Mental Health 1994, Depression disorder a disease "overall of a body" (whole-body) which includes the body, mood, and mind. This affects the way someone to eat and sleep, the way a person feels and someone thinks about things (Siswanto, 2007).

According to the American Psychiatric Association, Depression is more than just sadness. People with depression may experience a lack of interest and pleasure in daily activities, significant weight loss or gain, insomnia or excessive sleeping, lack of energy, inability to concentrate, feelings of worthlessness or excessive guilt and recurrent thoughts of death or suicide. There are five types of the most common depression.

#### **1. Major Depressive Disorder**

A major depressive disorder is one form of depressive illness or mood disorder. Major depressive disorder (MDD) is a debilitating disease that is characterized by at least one discrete depressive episode lasting at least 2 weeks and involving clear-cut changes in mood, interests, and pleasure, changes in cognition and vegetative symptoms. Depression differs from feeling "blue" in that it causes severe enough problems to interfere with a person's day-to-day functioning. People's experience with major depression varies. Some people describe it as a total loss of energy or enthusiasm to do anything. Others may describe it as constantly living with a feeling of impending doom.

## **2. Seasonal Affective Disorder**

Seasonal affective disorder is a form of depression also known as SAD, seasonal depression or winter depression. People with SAD experience mood changes and symptoms similar to depression. The symptoms usually occur during the fall and winter months when there is less sunlight and usually improve with the arrival of spring. The most difficult months for people with SAD in the U.S. tend to be January and February. While it is much less common, some people experience SAD in the summer.

Patients with SAD typically present with symptoms consistent with some form of depression. When depression is suspected, the physician should consider SAD if there is a history of a seasonal pattern to the depression and if it aligns with the current season (Kurlansik, Ibay, 2013).

## **3. Depressive Cognition**

This depressive cognition specified the content of depressive thought as negative views of the self, the future, and the world (Beck, 1976). Since Beck's original formulation, theorists have argued that negative views of the world and the future are limited to one's world and one's future, and could be described as specific kinds of negative self-views (Haaga, Dyck, & Ernst, 1991). Extensive evidence indicates that depressed individuals hold more negative self-views, blame themselves more than others for negative events, are more pessimistic for themselves than for others, and more adversely affected by self-reflection than nondepressed individuals.



#### **4. Postpartum Depression**

Postpartum depression is a serious, but treatable medical illness involving feelings of extreme sadness, indifference and/or anxiety, as well as changes in energy, sleep, and appetite. It carries risks for the mother and child. Peripartum depression refers to depression occurring during pregnancy or after childbirth. The use of the term peripartum recognizes that depression associated with having a baby often begins during pregnancy. Mothers often experience immense biological, emotional, financial, and social changes during this time. Some women can be at an increased risk for developing mental health problems, particularly depression and anxiety.

#### **5. Chronic Depression (Dysthymia)**

Dysthymia (dysthymic disorder) is described as a depressive mood disorder that follows a chronic course. Dysthymia and major depressive disorder (MDD) are two different entities. Dysthymia is not a sequel of well-defined major depressive episodes (Trivedi, Kar, 2011). Dysthymia is defined as a chronic mood disorder which persists for at least two years in adults, and one year in adolescents and children. Since both MDD and dysthymia are part of the spectrum of mood disorders, the American Psychiatric Association distinguishes between them on the basis of symptomatology and chronicity.<sup>1</sup> The cardinal symptom of both illnesses is depressed or low mood. However, this has to have been present for only two weeks for a diagnosis of MDD, compared with two years for dysthymia. For MDD, the low mood has to be accompanied by at least five other symptoms

on the DSM-IV checklist, whereas a diagnosis of dysthymia requires only two other symptoms (Moch, 2011).

## **6. Symptoms of Depression**

Beck defines depression as a condition with symptoms such as; decreased mood, feeling pessimistic, and losing spontaneity and negative symptoms such as weight loss and sleep disorders (Mcdowell & Newel, 1996). Depression is an abnormality concerning the mood. Patients feel depressed, discouraged, feel guilty, worthless, hopeless, apathetic and experience deep and lasting sadness, characterized by symptoms and other specific signs. According to Beck, the symptoms that appear in depressed can be classified this below (Ginting, 2013). Namely:

- a. Affective symptoms. A person suffering from a depressed disorder is characterized by a loss of interest and excitement. Sadness and resentment are the most prominent symptoms in depression. Individuals feel hopeless and helpless. Another prominent symptom is the loss of excitement or satisfaction in life. Activities that usually produce satisfaction appear to be blunt, as are interests and hobbies, recreation and family activities (Meiwati, 1994). This symptoms also includes loss of pleasure, apathy, loss of feelings of love for others.
- b. Motivational symptoms. The hope of escaping from life that usually the desire to commit suicide. Individuals feel hopeless and helpless, often cry and maybe try suicide. Suicide is not a mental illness, but usually is the potential outcome

of serious mental illness, which can include depression, bipolar disorder, stress, anxiety, or post-traumatic disorders. People who think about suicide often feel trapped or have no motivation to handle a situation. The absence of hope and motivation can cause someone to have negative feelings about the current conditions and even expectations for the future.

- c. Behavior symptoms. This symptoms characterized by passivity, pulling themselves from relationships with other people, sleep disturbances, appetite disorders (increased or even decreased appetite).

An individual does not have to have the four symptoms to get a diagnosis as a depressed patient, but the more visible the symptoms they have, the stronger the symptoms, the more certain it is believed that the individual suffered depression. From the explanation above, it can be concluded that there are several symptoms of depression in individuals that can be identified, namely; affective symptoms, motivational symptoms, cognitive symptoms, and behavioral symptoms.

#### **D. Depressive Cognition Theory**

Depressive cognition theory proposes that depression is associated with negative thinking about the self, the world, and the future. The theory contends that negative thinking in depression is maintained in part by cognitive biases such as a tendency to infer overgeneralized meanings from a single rejection or failure and thereby conclude that one's future is bleak (McDermut, Haaga, and Bilek, 1997). According to cognitive theory, people with depression think differently than people who are not depressed. For example, people with depression tend to

view themselves, their environment, and the future in a negative way. As a result, they tend to misinterpret facts in negative ways.

They also tend to blame themselves for any negative things that happen. This negative thinking and judgment style makes it easy for people with depression to see situations as being much worse than they really are. This increases the risk that such people will develop depressive symptoms in response to stressful situations. Disorder of depression can be seen as activating these three cognitive mechanisms, cognitive bias, negative schema and negative triad. So that, cognitive theory assume that other symptoms or signs of depression are a consequence of cognitive mechanisms that active. Beck identified three mechanisms that he thought were responsible for depression:

#### **1. Cognitive Bias ( Faulty Information Processing)**

Beck found that depressed people are more likely to focus on the negative aspects of a situation, while ignoring the positives. They are prone to distorting and misinterpreting information, a process known as cognitive bias. A cognitive bias is a view of the world. Some of the systematic errors in reasoning that lead to faulty assumptions and misconceptions, which are termed cognitive distortions (Beck & Weishaar, 2008; Dattilio & Freeman, 1992).

- a. Catastrophizing or thinking of the absolute worst scenario and outcomes for most situations. This is a cognitive distortion where someone tend to blow circumstances out of proportion. In other words, they make things out to be a

lot worse than they should be. They always make problems larger than life, which of course makes them incredibly difficult to overcome.

- b. Selective abstraction consists of forming conclusions based on an isolated detail of an event. In this process other information is ignored, and the significance of the total context is missed. The assumption is that the events that matter are those dealing with failure and deprivation.
- c. Overgeneralization is a process of holding extreme beliefs on the basis of a single incident and applying them inappropriately to dissimilar events or settings. Thinking in an over-generalising way means someone will often see a single unpleasant incident or event as evidence of everything being awful and negative, and a sign that now everything will go wrong.
- d. Magnification and minimization consist of perceiving a case or situation in a greater or lesser light than it truly deserves. Someone might make this cognitive error by assuming that even minor mistakes in counseling a client could easily create a crisis for the individual and might result in psychological damage.
- e. Personalization is a tendency for individuals to relate external events to themselves, even when there is no basis for making this connection. A person engaging in personalisation will automatically assume responsibility and blame for negative events that are not under their control. This is also called 'the mother of guilt' because of the feelings of guilt, shame, and inadequacy it leads to.



- f. Labeling and mislabeling involve portraying one's identity on the basis of imperfections and mistakes made in the past and allowing them to define one's true identity. Instead of saying "I made a mistake," someone attach a negative label to themselves: "I'm a loser." They might also label themselves "a fool" or "a failure" or "a jerk." Labeling is quite irrational because someone is not the same as what they do.
- g. Dichotomous thinking (all or nothing) involves categorizing experiences in either-or extremes. With such polarized thinking, events are labeled in black or white terms. This distortion manifests as an inability or unwillingness to see shades of gray. In other words, someone see things in terms of extremes – something is either fantastic or awful, you are either perfect or a total failure.

## **2. Negative Self Schemas**

Beck used term schema to refer to the basic structural components of cognitive organization through which humans come to identify, interpret, categorize and evaluate their experiences (Beck, 1967). A schema is a 'package' of knowledge, which stores information and ideas about our self and the world around us. These schemas are developed during childhood which may come from negative experiences, for example criticism, from parents, peers or even teachers. Individuals will tend to believe that they are lacking, unable and worthless in looking at themselves. According to Beck, Depressed people tend to develop their experiences as something that fails, poverty, deficiency and insults (Radiani, 2015).

Neisser defines a schema as a relatively enduring structure that functions like a template to active screen, code, categorize, and evaluate incoming information and experiences (Neisser, 1967). In other words, schemas are cognitive structures for screening, coding, and evaluating every stimulus from the environment. Schemas use to organize current knowledge, but also provide a framework for further understanding – predicting what will or should happen in the future. This influence attention and absorption of knowledge. It also represent core beliefs and values. Schemas are like lines of code that run in brain, giving instructions for how to interpret things, feel about different events and react. A person with a negative self-schema is likely to interpret information about themselves in a negative way, which could lead to cognitive biases, such as those outlined above.

### **3. Negative Triad**

Beck explains that processes thinking as a factor causing depression. The central thinking is that people who are depressed interpret the event or experience as something negative. This results in a person experiencing negative views or schemes both towards himself, the world, and the future. This negative view what Beck calls negative cognitive triads, there are three negative aspects (Davidson, 2006) :

a. Negative view of himself.

When depressed, someone feels that he is useless and worthless. Furthermore, they see themselves as unpleasant, and tends to reject himself. They will criticize and blame themselves for the mistakes and weaknesses they made.

b. Negative views about the world.

When depressed, a person feels unable to face various environmental demands and feels that the world is unfair. Individuals see the world as presenting outside the limits of ability and presents obstacles to reach the goal. They will compile the facts to suit their negative thoughts. Exaggerate the meaning of every loss, and obstacles. Depressed people are usually so sensitive to every one obstacles to its activities reach the goal.

c. Negative views about the future.

When depressed, someone will feel pessimistic about the future. The anticipation of the future is usually an extension of his view of the situation this time. If this depressed individual thinks of himself as a person who is rejected, weak, then they describe the future as someone who is rejected, or weak.

For example, depressed individuals tend to view themselves as helpless, worthless, and inadequate. They interpret events in the world in a unrealistically negative and defeatist way, and they see the world as posing obstacles that can't be handled. Finally, they see the future as totally hopeless because their worthlessness will prevent their situation improving.

## **E. Coping the Depression**

People who are depressed experience all kinds of thoughts and feelings coming from different systems within the brain, and these can be difficult to control or make sense of (Gilbert, 1997). The problem is something that obstruct or makes it difficult for someone to achieve certain goals (Winkel, 1985). Due to that difficult problems and failed goals can make a person become depressed. Usually, a person try to get past the problems that make them depressed and symptoms by doing various things, in order to reduce their depression problems. So that their negative feelings can be controlled. Negative feelings that are felt continuously without being settlement will prevent a person from living their life and developing themselves (Warsiki, 2008).

According to Gilbert, based on cognitive perspective there are some of approaches that able to cope any difficulties that people may be experiencing. Because it is the nature of depression to think negatively about themselves and their future (Gilbert, 1997).

### **1. Creating “Personal Space”**

Occasionally, there may be a problem, that is time to spent on oneself. They can feel so overwhelmed by the needs of others that they allow no ‘space’ for themselves. They become overstimulated and want to run away. Many people feel guilty if they feel a need to be alone but also it is important to negotiate these needs with the loved ones. Most importantly, do not assume that there is anything

wrong with them for wanting space or that there is anything necessarily wrong with their relationships. (Gilbert, 1997)

## **2. Breaking Down Large Problem Into Smaller Ones**

Here, the key thing is to try to avoid being distracted by thoughts such as it will all be too difficult and cannot be done. The evidence suggest that when people are depressed, they lose the tendency to plan things in an ordered way and are easily overwhelmed. For example, when people need to go shopping, try not to think about the hassles before start it. Instead, make a list of what they need and focus on the fact to shopping. This also helps their brains think differently.

## **3. Coping with Boredom**

Some depression related to boredom. The lives of depressed people have become repetitive and boring. Sometimes this appears unavoidable. Some depression are related to feeling socially and emotionally isolated, lonely, and understimulated. The problems are social and environmental ones and low moods may be a natural reaction to boredom and a lack of social stimulation.

## **4. Planning Positive Activities**

Often, when people feel depressed they think they need to do all the boring things first. Sometimes, boring chores are unavoidable but they should also plan to do some positive things. For example, sitting in a garden with a book, going to visit a friend, or taking a walk, plan to do these activities. Sometimes depressed



people are very poor at including positive activities in their plans for the day. All their time is spent struggling to get on top of the boring chores life. They may feel guilty going out. But they need to have positive activities.

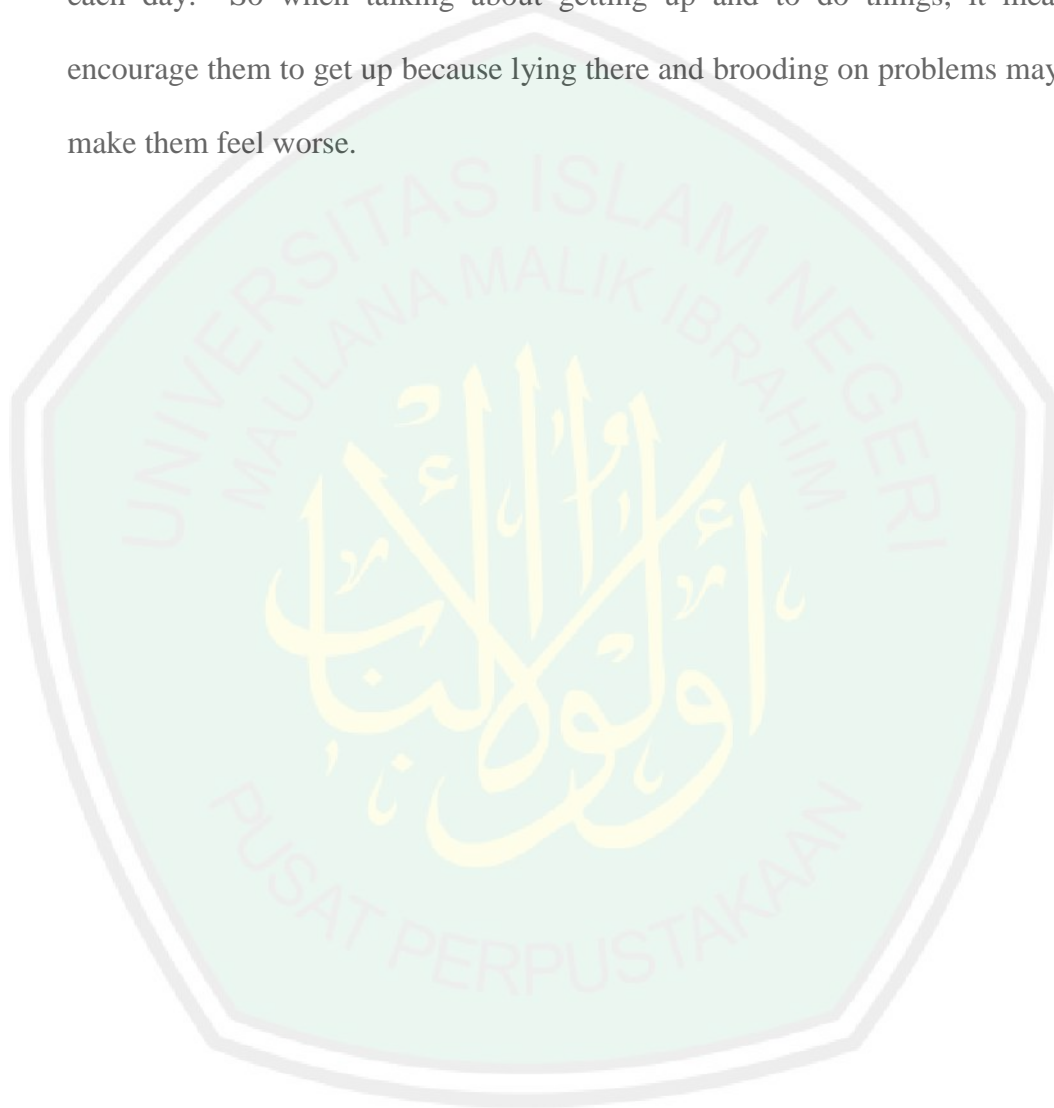
#### **5. Knowing the Limit.**

When depressed people become exhausted they noticed that they are failing and becoming overwhelmed, felt ashamed about their failings and became depressed. Now most depressed people are real battlers. Very rarely to see depressed people who know their own limits. Sometimes this problem related to perfectionism. A term of some professional uses is burnout. Burnout means that an individual has reached their depletion. Burnout can be trigger for depression in some people. For example, whether someone trying to cope with too many tasks at work have limits to amount of the works they can do. Try to think of ways that they might try to replenish themselves but most importantly do not criticize themselves for feeling burnout. Limits are personal things and they vary from person to person, change from time to time and situation to situation.

#### **6. Changing the Behavior**

When depressed, all the activities people have to perform each day can seem overwhelming. However, it is useful to organize them in such a way that people can be approached step by step. For example staying in bed may help people to feel better, all well, and good but often in depression it does not. Then people feel guilty and attack themselves for not doing things they have to do. When lying in

bed, people may tend to brood on their problems. Although bed seems like a safe place to be, it can actually make people feel much worse in the long run. So the most important step is to get up and plan to do something different or positive each day. So when talking about getting up and to do things, it means to encourage them to get up because lying there and brooding on problems may only make them feel worse.



### CHAPTER III

#### ANALYSIS AND DISCUSSION

In this chapter, the writer presents the summary of the novel to help the readers understand about the story and the analysis of Craig's depressive cognition as the main character in *It's Kind Of A Funny Story* by Ned Vizzini.

#### A. The Summary of *It's Kind Of A Funny Story* by Ned Vizzini

*It's Kind Of A Funny Story* tells about the problem faced by a 16-year-old teenager named Craig Gilner. He is an ambitious teen wanting to get into the best school, go to the best college, and get the best job. When he gets accepted into the Manhattan's Executive Pre-Professional High School, Craig believes he is headed on the right track. Soon, however, the pressure becomes too much. The class work, extracurricular activities, friends, girls, email, and pot smoking become more than he can bear. Due to that pressures, Craig sees himself, the world and his future in a negative view that makes him depressive cognition. He had difficulty doing normal things like eating and sleeping. So Craig has a special reason why he is depressed and has a tendency to kill himself. Luckily he could still think by asking for help from a hospital to overcome his depressive cognition problem.

At first time, Craig was not sure if he had made the right decision. It turns out that there are too many "weird" people in hospital for psychiatric disorders and make himself feel uncomfortable. He must receive treatment for five days, so he has to stay. Dr. Minerva then convinced Craig to try to adapt. In the hospital called Argenon, Craig learned how to deal with his depressive cognition. He did

several positive things like drawing, playing music, eating regularly and socializing. It helped him reduce his negative thoughts that made him depressed. He also met another patient that has different characters and helped his condition. Even though at first he had difficulty and was not confident in doing it all, but in the end he managed to make himself back to normal. However, this research will more focus on Craig's depressive cognition. The issues of his depression are developed and found in the novel are being categorized by the mechanisms of Craig's depressive cognition, and his ways to cope depressive cognition problem.

### **B. Craig's Depressive Cognition Mechanisms**

In Craig's Depressive cognition mechanisms, the writer found that Craig's cognitive bias is where he becomes depressed because of his school grades, extracurricular activities, and considers himself as useless. Also, a negative schema from his experience when his friends making fun of his depressed condition and his teacher who gave him too many assignments so he had no free time. Those cognitive bias and negative schema produce negative triads where Craig becomes negative in sees himself and his event. Such as he thought he was stupid, not talented, and he believed he would not succeed. He sees himself and his world as a failure.

According to Beck, the existence of a depressive cognition disorder is a result of a person's thinking about themselves (Beck, 1972). Depressed people tend to blame themselves. It is because of the cognitive distortion of themselves and the environment, so that in evaluating themselves and interpreting things that

happen they tend to draw conclusions that are not enough and have a negative view (Lubis, 2009). Beck identified three mechanisms that he thought were responsible for depressive cognition: Cognitive Bias, Negative schema and Negative Triad. There are some depression symptoms found in this analysis such as affective symptoms, motivational symptoms and behavioral symptoms that are still related with depressive cognition mechanisms.

### **1. Cognitive Bias**

According to Beck, the mindset of people who are depressed is characterized by a negative outlook on themselves, others and their environment. Depressed people found characteristics cognition that reflects various distortions of reality that exist. Here, There are 4 cognitive bias of Craig divided into selective abstraction, catastrophizing, labelling, dichotomous thinking (all or nothing). Those cognition categorized according to the process which Craig deviate from logical thoughts or realities.

#### **a. Selective Abstraction**

In this novel, Craig as the main character has the problem of his depressive cognition. He is a student in New York City. He is smart because he got accepted into Executive Pre-Professional High School. Where students there mostly becomes an important role in the future. Since that, Craig's feels his depressive cognition related to the school such as activities, scores of examination even extracurricular. His depressive cognition came because of his experiences the cognitive bias which is he is always taking the negative conclusion from



everything. In other words, a cognitive bias is his faulty thinking that leads him to depressive cognition. In cognitive bias there is selective abstraction. Selective abstraction consists of the perspective of individuals who only look at events that deal with failures and deficiency. Also drawing conclusion from very isolated details and events without considering the larger context or picture. This idea is maintained by this excerpt below:

*The other kids were geniuses. I thought I was a big deal for getting an 800 on the exam—like the entire entering class had gotten 800. It turned out the test had been “broken” in my year (It’s Kind Of A Funny Story, 95).*

Here, the score of his exam is the reason of his selective abstraction. Craig is a genius student that he got accepted into Executive Pre-Professional High School. But when he got into that school, the other kids are smarter than him. It is not enough for Craig only got 800 on the exam, even though other class also got 800. He could not exceed the other students. In fact, he still can do another exam that may get more score than 800, but he already take the conclusion that 800 made his year “broken”. Broken means his year has really failed just because of a score that he thinks is bad. He did not see anything positive in his life that could not make his year not failure. Other excerpt that shows Craig has the thought of selective abstraction as below:

*That wasn’t good when it came time to start school. The first day, I was quizzed on what I was supposed to have read over the summer. I got a 70, something I’d never seen on a sheet of paper in my life. Where do you see the number 70? There are no \$70 bills; there’s no reason to get a \$70 check. I looked at the 70 as if it had stolen from me. (It’s Kind Of A Funny Story, 93)*

The data above shows that Craig is very concerned about his score. He did not even like the fact that he got 70 for his quiz score. While he had never

gotten a score of 70. “I got a 70, something I’d never seen on a sheet of paper in my life” means that Craig always gets a high score because he is a smart student. This time, he got 70 for his score and he considers that score as meaningless. Craig is thinking of himself that his ability becomes low.

Meanwhile, according to Beck the existence of a depression disorder is a result of the way someone thinks about him. The mistake of thinking here is what becomes selective abstraction. Like the previous data, he only saw the fact that getting a score of 70 was a bad thing. He thinks if the world does not need a score of 70, even that score won't be useful to him. He does not see other details or even other positive things like the score of other quizzes. It seems score of examination is one of Craig problem of selective abstraction that lead him to depressive cognition. In other words, school is his problem.

Craig also realized that he was not good enough to be a good student. Just like the excerpt below:

*I had a lot of Tentacles. I needed to cut some of them. But I couldn't; they were all too strong and they had me wrapped too tight; and to cut them I'd have to do something crazy like admit that I wasn't equipped for school. (It's Kind Of A Funny Story, 95)*

Craig shows if he is aware of things he cannot deal with, and calls his difficulties like tentacles. This problem made him feel unprepared for school in Executive Pre Professional High School where he only made his school results worsen.

## b. Catastrophizing

When someone thinks catastrophically they are unable to see any other outcome than the worse one. In other words, individual make things out to be a lot worse than they should be or individuals will imagine the worst situation that is uncertain. The excerpt below showing Craig have cognitive bias which leads to depression is Catastrophizing.

*That's not to say I did terrible in high school—I got 93's. That looked good to my parents. Problem is, in the real world, 93 is the crap grade; colleges know what it means—you do just well enough to stay in the 90's. You're average. There are a lot of you. You aren't going over the top; if you're not doing any extracurriculars you're done. You can change things in later years, but with 93's your freshman year, you're going to have a lot of dead weight. (It's Kind Of A Funny Story, 97)*

This time, Craig gets a score that is not really bad. “That’s not to say I did terrible in high school—I got 93’s” emphasizes the score is quite good with 93. But he sees the score 93 as an average. As a result, he exaggerated his thoughts with the possibility that can be worse. It seems worst for Craig to get score 9. The reason is it is useless for him to enroll in college later because it is still an average score, due to that he will not going to college and it leads him to thinks even worst that he will not succeed. Then if does not take an extracurricular activity, it has no additional score and in the end, the score of 93 is nothing for Craig.

For him the score 93 will not be useful to be able to enter college because all students can get that average score. He was desperate not to take any extracurricular activities too. For him to get a score of 93 is a problem. Craig seems make those problems larger than it should be. He does not even do bad things at school and can still increase his score but he sees 93 as a score that is not

useful for his life, it is not enough to continue to college. He thought he would fail in his life. The writer also found other catastrophizing excerpt that proved cognitive bias in Craig.

*I didn't get to respond to a mass mail sent out by my teacher asking who needed extra credit, which meant other kids snapped up the extra credit, which meant I wasn't going to get a 98 in the class, which meant I wasn't anywhere close to a 98.6 average (body temperature, that's what you needed to get), which meant I wasn't going to get into a Good College, which meant I wasn't going to have a Good Job, which meant I wasn't going to have health insurance, which meant I'd have to pay tremendous amounts of money for the shrinks and drugs my brain needed, which meant I wasn't going to have enough money to pay for a Good Lifestyle, which meant I'd feel ashamed, which meant I'd get depressed. (It's Kind Of A Funny Story. 14)*

Still talking about Craig's worries about his school. Those data above happened when Craig consulted with his psychiatrist. Like the writer has told in summary, he has depressive cognition because his worries of many things. He told his psychiatrist about his problems. Here he talks about things related to school and his life later. He told his psychiatrist about how busy the school activities were, one of them was checking e-mail everytime, he was afraid if he did not reply to those e-mail that offered him as a volunteer so he had an experience he could use to apply for college.

Craig did not respond to a mail sent by his teacher, because he is in the hospital to recover his mental health of depression. One day his teacher comes to visit him and he thought it was a bad idea to not respond the mail. All his think is a negative thought. He has a negative conclusion just because he did not respond to the mail.

The bad thought about not getting the score 98 in class, not going to get into a good college, not going to have a good job that will lead him to depression. However, the data above is result may turn out to be. Since craig always thinks his worries about his score are increasingly disrupting his life. Even he cannot do the things that humans normally do.

### c. Labelling

Labelling describe one's identity on the basis of imperfections and mistakes that allow them to define one's true identity. In other words labeling is someone's thoughts about problem and thinks themselves as something bad as their identity.

The excerpt below is the example:

*I can't eat and I can't sleep. I'm not doing well in terms of being a functional human, you know? (It's Kind Of A Funny Story, 29)*

The excerpt above for Craig saying he cannot eat and cannot sleep is enough to shows that he is depressed. But he thoughts those two things as problems that make him feels not doing well of being a functional human. While he still can do other terms of being a functional human. "Functional human" for Craig means people who can do all activities normally such as eating or sleeping without any difficulties. So that, Craig sees himself for not doing well in terms of being a functional human, in other words his identity is useless for his life.

*"I can't eat any more either," I say. I've managed five bites. My stomach is churning and closing fast. It's all such inoffensive food; I shouldn't have any problems with it. I should be able to eat three plates of it. I'm a growing boy; I shouldn't have trouble sleeping; I should be playing sports! I should be making out with girls. I should be finding what I love about this world. I should be frickin' eating and sleeping and drinking and studying and watching TV and being normal (It's Kind Of A Funny Story, 44)*



In the error of thinking that becomes a labeling, Craig shows behavior symptoms of depression. Where he can not eat and sleep. Even though these two things are very normal for humans to do in their daily lives. Individuals who are depressed will show symptoms related to physical and natural behavior. In cases of Craig shown that he can not eat. Even he knows he should eat because he needs to eat. But still, it is hard until he needs to force himself to eat. Then, he had sleep disorders. These symptoms also often the first signs of depression. Sleep disorders caused by other organic diseases and personal problems that can worsen depression. Here, Craig feels abnormal. He feels different with other human who functioned well at all activities. His negative mind extends everywhere, blaming a condition on itself.

In this story, based on the excerpt below, Craig had an incident of behavior symptoms of his depression.

*When I do eat, it's one of two experiences: a Battle or a Slaughter. When I'm bad—when the Cycling is going on in my brain—it's a Battle. Every bite hurts. My stomach wants no part of it. Everything is forced. The food wants to stay on the plate, and once it's inside me, it wants to get back on the plate. People give me strange looks: What's wrong, Craig, why aren't you eating? (It's Kind Of a Funny Story, 33)*

He had an eating disorder. The minor stage appears in the form of individual unwillingness to eat, then another sign of stage is marked by a complete loss of appetite and the individual forgets to eat without realizing it, the heavy stage of the individual must force themselves or be forced by others to eat (some cases show the opposite, individuals overeat). In cases of Craig shown that he can not eat. When he is eating, it feels like he wants to throw up. It is like the food wants to get back on the plate. Also Craig aware for people around him. He do not want people to notice his condition. He do not want people to know that he

is depressed. Craig thought there is something wrong with him. From that incident he thought wrongly of himself. He thinks if he is no longer normal.

#### **d. Dichotomous Thinking (All or Nothing)**

This type of cognitive bias is involved in categorizing good or extreme experiences. With such polarized thinking, events are labeled in black or white terms. This thinking causes someone to see themselves as either perfect and great or a good for nothing failure. If a situation falls short of perfect, they see it as a total failure. The excerpt below is the example of dichotomous thinking.

*“Do you have difficulty sleeping?”*

*“Sometimes not. When I do it’s bad, though. I lie there thinking about how everything I’ve done is a failure, death and failure, and there’s no hope for me except being homeless, because I’m never going to be able to hold a job because everyone else is so much smarter.”*

*“But they’re not all, are they, Craig? Some of them have to be not as smart as you.”*

*“Well, those are the ones who I don’t have to worry about! But plenty of people are, and they’re going to kick my ass everywhere. Like my friend Aaron—”(It’s Kind Of A Funny Story, 106)*

In this case, Craig is being asked by his psychiatrist about the reason for his insomnia. Then, he admits sometimes not. “Everything I’ve done is a failure, death and failure, and there’s no hope for me” emphasizes he got difficulty sleeping because of his negative mind thinking everything he has done is bad, wrong, useless, failure. Instead of thinking that he might have already done something wonderful that can make his life more meaningful, he decided to take the conclusion that he will never be a success in life. In other words, he sees his life is a failure.

## 2. Negative Schema

According to Beck, depressed people possess negative self-schemas, which may come from negative experiences, for example criticism, from parents, peers or even teachers. Based on cognitive theory, vulnerability to depression develops during experienced when basic beliefs about the self are formulated. Beck said that basic beliefs about the self are person's self-schemas. This idea is maintained by this data below:

*The teachers all told me I was going to have four hours of homework a night, but I didn't believe it— plus I believed I could handle it. I had gotten into the school; I'd definitely be able to take anything it could dish out, right? (It's Kind Of A Funny Story, 97)*

When Craig started his school at Executive Pre- High School, He has been told he only has four hours at night to finish the homework. It means he does not have a lot of time besides do the homework. Craig becomes busy as a student. Also, the person who told him is his teachers. The teachers believe Craig could finish his homework in four hours. The fact is the teachers were right, Craig also believed at himself that he could finish the homework, even at the first time Craig doubted himself. However, realize or not while Craig decided his time at night to finish the homework, he has been under pressure. He has been depressed. The next excerpt below is another evidence of craig's negative self schema.

*"I saw on your chart. Why do you think you couldn't sleep?"  
 "My friends called. They were kind of . . . making fun of my whole situation."  
 "And why would they do that?"  
 "I don't know." (It's Kind Of A Funny Story, 271)*

A person with a negative self-schema is likely to interpret information about themselves in a negative way. Here, when he was counseling with the counselor Craig wrote on his chart that he could not sleep. The reason is because

of his friends. His friends called and Craig worried if they know he was depressed. He is looking at himself as a joke for having depressive cognition. Craig told the counselor that if his friends know about his depression they would making fun his situation. It also means Craig got criticism by his friends.

The struggle that leads him to depression is not something to make fun. Otherwise, it makes him feels under pressure, not being confident and wondering why they do that. Those can be a negative experience for Craig. He never wanted his friend to treat him like that. It can give him faulty thinking about his own self. The data above also shows another symptom of craig's behavior. Due to his negative schema by getting criticism from his friends, he had difficulty sleeping.

*I'm pretty stupid for thinking I could get any sleep tonight. Once I turn off the lights and put the cup aside, I get the Not-Sleeping Feeling—it's kind of like feeling the Four Horsemen of the Apocalypse rear up in your brain and put some ropes around it and pull it toward the front of your skull. (It's Kind Of a Funny Story, 135)*

The excerpt above shows Craig that he cannot sleep. Sleep disorders indicate an increased risk of depression. The relationship between sleep and depression is stronger than other mood disorders (Chorney, 2008). He fooled himself by thinking he would be able to sleep at night. The fact is he just can not sleep. Those negative thoughts keep haunting him and blame himself that he is young but already screwing his life until he decided to check himself at the hospital.

### **3. Negative Triad**

Beck explained that depressed individuals have negative views on themselves, the world around them, and their future (Beck, 1967). Those negative



views he defined as the negative triad: Negative thoughts about oneself, Negative thoughts about the world, Negative thoughts about the future. This individual's interpretation of events that can lead a person to become depressed (Beck, quoted by Nolen-Hoeksema, 2001). This idea is maintained by this data below:

*"We're going to get through this, Craig. Now, from a personal standpoint, why do you think you have this depression?"*  
*"I can't compete at school," I said. "All the other kids are too much smarter. i'm not going to get into a good college" (It's Kind Of A Funny Story, 105)*

In this novel, the main reason for Craig's depression is his own thoughts. Those conversations above shows the negative triad of Craig. The counselor asked him why he had depression. Craig answered because he can not compete at school. He just started his first year at Executive Pre-High School and he already depressed. He is blaming himself that his not enough or not smarter enough to compete at school. "All the other kids are too much smarter " he saw the other kids are smarter than himself as negative thoughts about the world. This happened because when someone depressed, they feel cannot face various environmental demands and feel that the world is not fair. He jumped to the conclusion where he won't be accepted in any good college just because of those negative thoughts. That conclusion is his negative thoughts about the future.

*I lie there thinking about how everything I've done is a failure, death and failure, and there's no hope for me except being homeless, because I'm never going to be able to hold a job because everyone else is so much smarter. (It's Kind Of A Funny Story, 106)*

In the excerpt above Craig is thinking about how everything he has done so far in his life. He thought all of he have done is a failure, useless, death. He blames himself. He is not thinking about the other positive things that may he



have done too. He only sees the negative view for himself. Due to that view, he thinks he will be a homeless later and there is no hope to find a job. He is already seeing himself as a failure and it is impossible to have such a good life in a few years. It means he is blaming the future. Craig's saw those blaming things happened because everyone is so much smarter. He feels himself is a fool and did not smart enough to compare with everyone else. This is how Craig's blame the world.

Because Craig's view himself, the world and his future that he believed would fail make him suffered a depressive cognition. That view makes him always sad, upset, not confident, loses interest in everything. And those emotional things included to affectional symptom of depression such as the excerpt below:

*"You really have to stop, right now, and think about how you feel. I want you to remember how you feel the next time you decide to stop taking your medicine." "Okay." I commit it to memory; I feel dead, wasted, awful, broken, and useless. It's not the kind of feeling you forget. (It's Kind Of A Funny Story, 158)*

Since Craig deals with depressive cognition, he tries drug treatment to help his condition. Craig tried the Zoloft and he was feeling better in weeks. But it does not last any longer because the depression comes back again. Craig feels dead like he feels numb, in a very negative way. It can be an emotional state that's based on defeat, feelings of helplessness, sadness or anger, and possibly shock. He also said he feels wasted like he unable to process thoughts and logic due to intoxication or influenced by alcohol.

Then he feels awful, broken as something has damaged him to the point that he thinks he can not be fixed and useless. Useless for Craig who is depressed

might struggle with feelings of the worthlessness of not being useful or important in any way. Those feeling above can be concluded that he feels extremely sad and he added that he can not forget those feelings. It is not easy for him to fight or ended those feeling as he will never forget how those feelings feel like. Such as the excerpt below:

*I wasn't gifted. Mom was wrong. I was just smart and I worked hard. I had fooled myself into thinking that was something important to the rest of the world. Other people were complicit in this ruse. Nobody had told me I was common. (It's Kind Of A Story, 96)*

The negative triad above shows Craig is blaming himself that he thinks he was not gifted. Even his mother said conversely. He is also blamed for thinking he was important for the world. In other words, he was thinking he won't be useful for the world later. This happened because when depressed, someone will feel pessimistic about the future then blame his own future. Also, he thoughts he was common, not special and no one told him his not special. This shows that he is also blaming the world for not telling him that he was common. The next excerpt below is another example:

*I'm no one; I'll never make it in my life; I'm about to get revealed as a fake, I've already been revealed as a fake but I don't know it yet; I know I'm a fake and pretend not to. (It's Kind Of A Funny Story, 136)*

He blames himself as he is no one. He is nobody. He does not feel important as a human being. When depressed, someone feels that he is useless and worthless. Also, he is afraid if he does not make it in life, everyone will see him as a fake. He does not want to be revealed as a fake person. He wants everyone to see him as a good person that will get into a good college, be able to have a job. if

that not happened, Craig feels he is a fake just because he is pretending that he can reach what he wants. Then, Craig's blame the future for thinking he will not able to make such good things in life that will lead him to success.

Craig here has no motivation that can make him recover from depression. At least someone who is depressed has the slightest motivation to change his mind which is always looking for negative solutions. Craig did not think that he might found another solution that is better besides suicide. But he refused to see another positive side around him that may help him to get his motivation. Those suicide things are included in the motivational symptoms of depression. The quotation below is the evidence:

*I look at myself in the bathroom light. Yes, I'm okay. I'm okay because I have a plan and a solution: I'm going to kill myself. I'm going to do it tonight. This is such a farce, this whole thing. I thought I was better and I'm not better. I tried to get stable and I can't get stable. I tried to turn the corner and there aren't any corners; I can't eat; I can't sleep; I'm just wasting resources. (It's Kind Of A Funny Story, 126)*

Craig is really want to do suicide resulting from a way of negative thinking about himself, the world and a future. He has locked himself in the bathroom. His parents were asked him if he is alright and he was lied by saying he is okay. The truth is he is thinking about killing himself. When he will do suicide and he decided to do it that night. The ideas, signs and suicide attempts are often accompanied by depression. The biggest suicide idea occurs if depression disorder is severe. He thoughts he already found a better plan and solution by kill himself.

He also confused about his condition. He did not know if he is feeling better or not, he can not get stable and believed he just wasting his life. Craig has lost motivation to move. He refused to move and get along, not even having the

appetite to eat. Everything is useless for him. He considers himself to be the cause of all mistakes and tends to criticize himself for all his deficiency. There is no motivation for Craig to change his life becomes better and occur the motivation to commit suicide. Craig wants to kill himself because he did not know how to end the pressures he received.

The analysis of elements of Craig's depressive cognition shows that the faulty thinking which makes Craig did not think in a realistic way can be a factor to his depression. It is different from someone who is not depressed. They still can think optimism in a realistic way. The negative schema that Craig experienced from teachers and friends criticism. That makes him feel worried about his situation until he is realized he got depressed. The negative triad is the way Craig sees himself, the world and the future are mostly feeling afraid, worry, failure for everything he has done. Without seeing the good sides that may he have but he does not realize.

Based on the analysis above it can be concluded that depression is an abnormal state of the individual caused by a gap between expectations and reality in his life, where a person has negative feelings (such as pulling himself from others, pessimism, feelings of guilt, and worry). Also, Craig does not show his motivation to do better or thinking positively. Individuals with low motivation and fear of failure, their thoughts are always filled with fear of failure. They see their future as pessimistic, which is seen only as a possibility of failure. Interpretation of him is negative, pessimistic, afraid of failure, and lacks the desire to succeed. Thoughts of possible failure, pessimism can cause depression.



### C. Craig's Ways To Cope His Depressive Cognition

Depressive cognition can be experienced by anyone. Depressive cognition is terrible because it is not only dangerous but also can make someone to suicide. However, someone who is depressed can still go through the day even though it feels difficult. So does Craig who is depressed and must deal with it. This below are the way of Craig cope his depressive cognition problem in his life. There are some of ways that able to cope any difficulties that Craig may be experiencing. Because it is the nature of his depression to think negatively about himself and his future. Those ways are changing the behavior, breaking down large problem into smaller ones, planning positive activities, coping with boredom, creating personal space, and knowing the limit.

#### 1. Creating Personal Space

Craig who realized he was depressed likes to have his time to spent alone. Because he can feel so overwhelmed by the needs of others that they allow no 'space' for himself. He become overstimulated and want to run away. The excerpt below is an example of creating personal space:

*I have a system with bathrooms. I spend a lot of time in them. They are sanctuaries, public places of peace spaced throughout the world for people like me. When I pop into Aaron's, I continue my normal routine of wasting time. I turn the light off first. Then I sigh. Then I turn around, face the door I just closed, pull down my pants, and fall on the toilet—I don't sit; I fall like a carcass, feeling my butt accommodate the rim. Then I put my head in my hands and breathe out as I, well, y'know, piss. I always try to enjoy it, to feel it come out and realize that it's my body doing something it has to do, like eating, although I'm not too good at that. I bury my face in my hands and wish that it could go on forever because it feels good. (It's Kind Of A Funny Story, 6)*

The excerpt above shows that bathroom is like Craig's personal space. Because craig realized he was depressed, for him to spend time in the bathroom



makes him feel better than having to be gathered around with people. the data occurred when Craig was at his friend house, Aaron. Everyone gathered except Craig. he went to the bathroom for a few minutes. No one knows his existence while in the bathroom, even he thinks that he and the people outside are different, so being in the bathroom is a good thing for him. The fact that he was there besides to pee, he was trying to calmed his mind too. The next excerpt below Craig still showed another his personal space.

*"I'm depressed, okay, Aaron?"*

*"No way! You're like the happiest guy I know!"*

*"What are you talking about?"*

*"That's a joke, Craig. You're like the craziest person I know. Remember on the bridge? But, you know, the problem is you don't chill enough. Like even when you're here, you're always worried about school or something; you never just kick back and let things slide, you know what I mean? We're having a party tonight—where are you gonna be?" (It's Kind Of A Funny Story, 255)*

From those data Craig realized that he was depressed. The data happened when Aaron called him when he was in a mental ward. Aaron, who didn't know Craig was there, called him to invite him to a party, but Craig answered him with telling aaron about his depressed condition. However, Aaron considered it as a joke. Craig does not respond to the party inviting. This means that Craig does not want people to make jokes about him, that is where he feels he doesn't want to be near anyone, including Aaron. Therefore he did not want his friends to know if he was depressed, he wanted to be alone. Whereas to overcome his depression, compared to spent his time in the bathroom, Craig also spends his time with people he loves as his personal space such as the excerpt below:

*I even spent time with Sarah. She was so smart, smarter than me for sure. She'd be able to handle what I was going through without seeing any doctors. Her homework bordered on algebra even though it was only fourth grade, and I helped her with it, sometimes doodling spirals or patterns on the*

*side of the pages while she worked. I didn't do maps anymore. (It's Kind Of A Funny Story, 115)*

Many people feel guilty if they feel a need to be alone but also it is important to negotiate these needs with the loved ones (Gilbert, 1997). Here, Craig spends his time with his sister, Sarah. Different from the previous data, he chose to spend time in the bathroom but this time he spent his time with someone he loved. he spends his time helping Sarah's homework which is still easy for Craigs because sarah is only 4th grade. from here, it seems if Craig's personal space is where he wants to be alone or with someone and there is nothing wrong with that. That is the way to cope his depressive cognition problem so that he feels better and can deal with it. The next following excerpt, Craig try to creating his personal space by talking with a doctor as he counsellor.

*The first doctor was Dr. Barney. He was fat and short and had a puckered and expressionless face like a very serious gnome.  
 "What's the problem?" He leaned back in his small gray chair. It sounded like a callous way to put things, but the way he phrased it, so soft and concerned, I liked him.  
 "I think I have a serious depression."  
 "Uh-huh."  
 "It started last fall" (It's Kind Of a Funny Story, 100)*

In this case, counselors are trained to help people think about the problems they are experiencing in their life and find new ways of coping with difficulties. Here, Craig is realized that he got depressed. He knows what to do to make his condition better. He came to a psychiatrist named Dr.Barney. He knows there is something wrong with him and he needs someone to talk about his depression. There is no wrong in consulting with experts. All of Craig's problem been told to him. From Craig's negative thoughts about his life until what he feels when his depression appeared. Dr.Barney handling him by listening to his

problem and asked Craig a few questions that can he checked off. So, she knows how to help Craig at the end of the meeting.

## 2. Breaking Down Large Problem into Smaller Ones

Since the depressive cognition that Craig feels increasingly tormenting him, he thought of a very bad thing to do, suicide. Even he had planned it to do that in one night. But when the night comes, he could not sleep. He keep thinking of killing himself in early morning. Because he could not sleep he decided to to call the Suicide Hotline service and ask for help because he had the thought to kill himself. Someone who answered the phone from Craig asked him to visit the nearest hospital for help. The excerpts below shows that going to Argenon Hospital is Craig's way to cope his depressive cognition.

*Argenon Hospital. I can walk there from here. It might even feel good. And once I get there, I won't have to do anything. I'll just tell them what's wrong with me and they'll give me medicine. Probably they'll give me some kind of new pill—maybe they've invented that fast-acting Zoloft by now—and I'll come right back home. Mom and Dad won't even know. (It's Kind Of A Funny Story, 150).*

He decided to go to Argenon Hospital to get help with his depression. He did not think of the bad possibility when he wanted to go there. He is breaking down his large problem by thinking if he wanted to tell about his condition, then the person in the hospital would help him by giving medicine, after that he returned home. Very simple to do, so he felt no need to tell his parents about that. in fact when he finished checked himself at Argenon Hospital. Craig had to join the treatment there for five days so he could return to normal and recover from his depression.

After Craig leaves the hospital and passes the treatment, Craig began to open up to his negative thoughts. He began to find out how to cope his depression problem in his life. He found his fondness for art. He also wants to change schools so he can enjoy art classes. He had already decided to move to Manhattan Arts Academy to his parents. Even though his parents were surprised, they still supported what he wanted. The next quotation below is another example of coping the depression by transfer schools.

*"If I don't make some kind of big change, I'm going to come out of here wondering how anything is different from before, and I'm going to end up right back here."*

*"Right," says Mom. "I'm with you, Craig."*

*"What art school are you going to go to?" Dad asks.*

*"Manhattan Arts Academy? It's easy to transfer to with my grades—"*

*"Oh, but Craig, that's the school for kids who are all screwed up," Dad says. I look at him. "Yeah? Dad?" I raise my wrist, show him the bracelets. I have pride in them now. They're true, and people can't screw with them. And when you say the truth you get stronger.*

*Dad stands still for a minute, looks down at his feet, and then looks up.*

*"Okay," he says. "We'll do whatever we have to do. You have to stay in school until you transfer, though. That's going to be . . . until the end of the year at least, I think."*

*"I'll handle it," I say.*

*"I know you will. We'll help." (It's Kind Of A Funny Story, 415)*

Craig find that transfer schools is his way to breaking his problem, so he could focus on the art he liked. But his father was worried that if he moved to another school, however Craig must continue his school right now until the end of the year. Craig does not mind it, he was positively thinking about handling it. Here what he focuses on is that he can survive until the end of the year. He do not want to think badly about what will happen until the he finally transfer schools. This shows that if the transfer schools is a large problem, he could consider it a small problem he could handle.



### 3. Coping with the Boredom.

Sometimes Craig's depressive cognition related to boredom. Sometimes Craig spends his day doing nothing and lying in bed thinking about things that happen with negative views. But those boredom can be handle by Craig like the following excerpt.

*"I'm going to Aaron's house!" I announced to Mom, flipping my phone shut. I still had the welcome packet in my hand; I gave it to her to put in my room. "What are you going to do over there?" she asked, beaming at the packet, then at me.*  
*"Um . . . sleep over."*  
*"Are you going to celebrate? Because you should celebrate."*  
*"Heh. Yeah." (It's Kind Of A Funny Story, 62)*

The excerpt shows before he go to Argenon Hospital, when Craig got an announcement if he was accepted to executive pre professional school. Then he was confused what to do until he remembered one of his friends. At that time craig was not in a close relationship with his friend, except for Aaron. This is why Craig is always hit by boredom because of the lack of communication with people around him. So that sometimes he feels alone. but to celebrate, Craig wants to go to Aaron's house where he will meet other friends. He thinks at least he has to do something that is fun or not boring and also because Aaron is the only friend he still communicates with. In other words, being with Aaron is Craig's way to cope his boredom that still related with his depressive cognition. The next excerpt shows a way of Craig's coping his boredom was when he was at Argenon Hospital for his depression treatment.

*I bite my tongue. I can't help it. I shouldn't be laughing at any of these people, and neither should Humble, but maybe it's okay, somewhere, somehow, because we're enjoying life? I'm not sure. Jimmy, two tables away,*



*notices my stifled laughter, smiles at me, and laughs himself. (It's Kind Of A Funny story, 247)*

At first he feels uncomfortable and bored there, until he meet people who also had mental disorders which turned out to be not too bad to communicate with. Craig here shows if he can enjoy making friends with new people there. Until he does not believe in himself if he will laugh with them. He also thought he began to enjoy his activities there. From there craig realized he no longer felt lonely about his boredom.

#### **4. Planning Positive Activities**

When Craig feels depressed he thinks he need to do all the boring things first. But all that changed when he was at Argenon Hospital where he tries to do positive activity activities to cope his depression. For five days, Craig focuses on finding ways to cope his depressive cognition problem. Because the hospital is being renovated, he will join the patient adult, not just teenagers. At first, Craig does not want to be there. He wishes he was not depressed. Over time, Craig can adapt to other patients and participate in existing activities. One of them is arts and crafts. There, Craig participated in an art activity, where the activity was a schedule or procedure that all patients must follow, including craig like the following quotation.

*"It's so pretty!"*

*"It's all right," I say, looking down. I decide it's done. I can do better. I put my initials in the bottom—CG, like "computer-generated"—and put the picture aside. I ask for more paper and start the next one.*

*It's easy. It's easy and pretty and I can do it. I can make these things forever. For the rest of arts and crafts, I make five. (It's Kind Of A Funny Story, 293)*

When the activity starts, Craig doesn't know what to do. He was given pencils, paper and crayons. One of his friends who was also patient there, Noelle advised him to draw something from his childhood. Craig also had the idea to start drawing. He draws something unique. A map that is designed like a brain. there are highways, rivers, and streets. As if Craig is pushing his emotions from one place to another, bringing the city to life.

This type of positive activity is Craig's way to cope his depressive cognition problem. The conversation data above shows that Craig really enjoyed his activities. The activity he had forgotten from his childhood. He felt an activity that made him feel better and alive. Even the people around him admired the map he made. Craig wants to draw again and again, he starts to find what he likes.

*"Craig, there's one thing you didn't mention that your recreation director did. She said you've been doing art while you've been here."*

*"Oh, yeah, that's nothing, really. Just yesterday."*

*"What is it like?"*

*"Well, remember how I told you last time that I liked to draw maps when I was a little kid? It sort of came from that." (It's Kind Of A Funny Story, 306).*

From the excerpt above, Craig remembered what he wanted from his childhood. Which is to become a mapmaker. He realized drawing is not just art, it is a way for him to cope his depressive cognition. He found a way to cope his depressive cognition. And being creative can help ease the symptoms his depressive cognition. He told his psychiatrist if he did a new activity he liked. Even the psychiatrist already knew if there had been progressing from Craig. The following quotation is another evidence if craig's condition develops better.

*"I kinda like it in here," I say to Dr. Minerva.*

*"This room?"*

*"No, the hospital."*

*"When you're finished, you can volunteer."*

*"I talked to the guitar guy Neil about that. I think I'll try. I can get school credit!" (It's Kind Of A Funny Story, 388)*

On the last day of his treatment at the hospital, Craig even admitted he felt like being there. He can develop better through positive activities. He had even planned another positive activity when he was discharged from the hospital namely volunteering there. There is evidence of good impact for Craig during in the hospital, Craig was aware that he needed to do positive activities. The next data also shows if Craig has a good impact from its positive activities during the hospital.

*"Your artwork," she says.*

*"Craig, these are wonderful."*

*"Thanks." I sit down. We were both standing. I didn't even notice.*

*"You started these because you used to do them when you were four?"*

*"Right. Well. Something like them."*

*"And how do they make you feel?"*

*I look at the pile. "Awesome."*

*She leans in. "Why?"*

*"Because I do them," I say. "I do them and they're done. It's almost like, you know, peeing?"*

*"Yes . . ." Dr. Minerva nods. "Something you enjoy."*

*"Right. I do it; it's successful; it feels good; and I know it's good. When I finish one of these up I feel like I've actually done something and like the rest of my day can be spent doing whatever, stupid crap, e-mail, phone calls, all the rest of it." (It's Kind Of A Funny Story, 389)*

Before he completes treatment at the hospital, he gives a gift to Dr. Minerva about the results of the drawing. Craig likes drawing since he was small but was forgotten as he grew older. When at the hospital, Craig managed to find what he liked through positive artistic activities. For Craig, drawing makes him happy and forgets his negative thoughts that make him depressive cognition like responding to e-mail and phone calls.

Through this art activity, it seems obvious how Craig changed his mind about what he liked and wanted. He was able to recognize himself long before he did the treatment at the hospital. Even doing art activities was unthinkable, but by following the activities in six north, Craig slowly returned to his old self. This is proof that art activities are a the true way for craig to cope his depressive cognition.

### 5. Setting Owns Limit

When Craig feels depressed, he becomes exhausted he notices that he is failing and becoming overwhelmed, felt ashamed about his. Sometimes Craig's problem related to perfectionism like the following excerpt.

*Plus there were extracurriculars. Other kids did everything: they were on student government; they played sports; they volunteered; they worked for the school newspaper; they had a film club; they had a literature club; they had a chess club; they entered nationwide competitions for building robots out of tongue depressors; they helped teachers out after school; they took classes at local colleges; they assisted on "orientation days." I didn't do anything but school and Tae Bo, where I hit a plateau. They humored me in class, letting me fake-fight and do my not-that-form-fitting pushups, but the teacher knew it was something that I didn't really enjoy. I quit. That was the only Tentacle I ever cut. (It's Kind Of A Funny Story, 95)*

As the previous analysis about the things that makes Craig depressive cognition is his thoughts about school. The excerpt above shows how Craig cope his life problems, namely extracurriculars. For him, extracurriculars are very important for his school grades and his experiences so that he can study at Yale University. He showed pessimism where other students followed many extracurriculars. Then Craig does nothing, only a few extracurricular. But he did not feel comfortable and did not enjoy the extracurricular he joined. To deal with

extracurricular problems that cause his depressive cognition, he stopped from the extracurricular.

Craig describes extracurriculars as tentacles in his life. The tentacles for Craig are the evil task that attacks his life. The tentacles is one of the causes that he has a negative view of himself, the world, and his future. To face the problem of the tentacles in his life, he tried to cut the tentacles, in other words he stopped doing his extracurricular. Craig also said that it was the only tentacle or problem he had cut. It means quitting extracurricular activities made Craig think if he has a limit in participating activity.

After treatment at the hospital is complete, he wants to ask his parents to transfer schools, because he knows how to cope his depressive cognition problem by doing what he likes now such as the excerpt below:

*I don't want to be completely crazy. I don't like being here that much. I like being a little crazy: enough to volunteer here, not enough to ever, ever, ever come back.*

*"Yes," I say. "Yes. I have thought about it."*

*"When? Just now?"*

*I smile. "Absolutely."*

*"And what do you think?"*

*I clap my hands together and stand up. "I think I should call my parents and tell them that I want to transfer schools." (It's Kind Of A Funny Story, 392)*

The conversation above is proof of data when Craig realizes he had to transfer schools to cope his depressive cognition. His psychiatrist, Dr. Minerva, asked him what he should do if he wanted to do art activities, while in the school he currently studied there was no art activity, all of them only focused on getting the graduates to become rich or lawyers. Even before Craig stay in hospital taking part in an activity, he never thought of changing schools as a way to cope his



depressive cognition. He also thought if he continued his education in Executive Pre-Professional School, even though in the future he would be successful and rich, he would still be depressed considering he was doing things that did not suit him. He really wants to do what he likes. His decision to move to school was increasingly certain when Aaron came to visit him. The next quotation shows Craig's thought of art.

*"So are you feeling better?"*

*"Yeah."*

*"What changed?"*

*"I'm going to leave school."*

*"You're what?"*

*"I'm done. I'm going somewhere else."*

*"Where?"*

*"I don't know yet. I'm going to talk it over with my parents. Somewhere for art."*

*"You want to do art?"*

*"Yeah. I've been doing some in here. I'm good at it."*

*"You're pretty good at school too, man." (It's Kind Of A Funny Story, 395)*

Craig decides to leave his current school and will find a new school where he will learn what he likes, art. He also said if he did art activities here and felt he had talent there. Craig is also actually a smart since he got accepted into Executive pre-professional school and Aaron said if Craig has done the best in school. During the conversation, it seems that Craig already knew what he cannot do and what he can do. He had a limit to keep studying at Executive Pre-Professional school. That is why leaving school is another Craig's way to cope his depressive cognition.

## 6. Changing Behavior

When Craig feels depressed, all the activities he had to perform each day seems overwhelming. Sometimes he feels guilty and attacks himself for not doing thing they have to do. Here are some excerpt from Craig's behavior that he managed to change so he can cope his depression.

*What was I doing taking pills? I had just had a little problem and freaked out and needed some time to adjust. Anyone could have a problem starting a new school. I probably never needed to go to a doctor in the first place. What, because I threw up? I wasn't throwing up anymore. (It's Kind Of A Funny Story, 122)*

Those excerpt above Craig shows a change in behavior which is to stop using antidepressant pills. previously he used an antidepressant to make him feel better and that was proven. he also felt like he was back to normal. therefore he thinks there is no useful again to consuming pills if he feels better. He does not feel like symptoms of depressive cognition before. Craig has consumed Zoloft only a few weeks and he believed he is already back to normal condition. Craig felt he could overcome everything again and felt himself to be functional compared to himself when depressive cognition attacked him. He was amazed that this time his way to face his depressive cognition was worked. He even thought why he could be depressed before if taking drugs could feel back to normal. The data below shows Craig changed his behavior using the bathroom as his escape.

*I look at the toilet and decide to stand. I'm not going to sit down like the world's beaten pup anymore. I stand, push hard, wash my hands, and step out. (It's Kind Of A Funny Story, 173)*

Previously he always spent a few minutes in the bathroom with the door closed and the lights turned off because he could not be around people who

thought he was fine. He felt the bathroom was a good place for him. But in this data, Craig shows his behavior using the bathroom like everyone else. Only for purposes when needed, not as a place of escape for his depressive cognition.

There are also changing behaviors of eating that are affected by his depression such as the excerpt below:

*It's weird how your stomach can come back around. As I tune Humble out, I eat not because I want to, not because I have to overcome anything, not to prove myself to anyone, but because it's there. I eat because that's what people do. And somehow when the food is put in front of you by an institution, when there's a large gray force behind it and you don't have to thank anyone for it, you have the animal instinct to make it disappear, before a rival like Humble comes along and snatches it away. I think, I think as I chew, my problem might be too much thinking. (It's Kind Of A Funny Story, 208)*

The excerpt appears when Craig have to try to eat while at Argenon Hospital. He has difficulty to eat, due to that he changed his behavior so he could eat food normally. Because everyone must eat and he wants to be normal. This data shows Craig's thoughts about eating. He has to eat because he really needs to eat. But what made it difficult was too much thought. In other words Craig became overthinking.

When Craig was in the hospital for treatment, he also showed that he could develop better by realizing he was depressive cognition. From there he can change his behavior. The next quotation is another example of his behavior change.

*"Do you remember what I asked you last time, about whether or not you'd found any Anchors in here?"*  
*"Yes."*  
*She pauses. In order to ask a question, it is often possible for Dr. Minerva only to intimate that she might ask a question.*  
*"I think I've found one," I sigh.*  
*"What's that?"*  
*"Can I get up and get it?"*

*"Absolutely."*

*I leave the office and walk down the hall, where Bobby is leading a new recruit on his welcoming tour—a black guy with wild teeth and a stained blue sweatsuit.*

*"This is Craig," Bobby says. "He's real young, but he's on the level. He does drawings."*

*I shake the man's hand. That's right. I do drawings.*

*"Human Being," the man says.*

*"That's his name," Bobby explains, rolling his eyes.*

*"Your name isn't Craig; it's Human Being too," the man says. (It's Kind Of A Funny Story, 387)*

The quotation tells that on the last day Craig will be discharged from the hospital and the treatment is complete. The doctor asked about the anchors that Craig had. Anchors here are things that make people happy. He realized if he found an anchor while in the hospital. He managed to find what he really wanted and helped him escape depressive cognition. He realized if he was suitable and liked to do drawing, especially drawing mind maps. Even he also shows his development to other patients. He can make friends with other patients and they also help him find the anchor. On the last day before he leave the hospital, he gives the results of his drawings to the patient who helped him to cope his depressive cognition like Bobby and his doctor. Craig also has a family that supports him in order to overcome depressive cognition. They always try to fulfill what the craig needs and support all their desires. On the day the craig will leave the hospital, they will gladly pick him up. The following excerpt is a proof that Craig changed his bad behavior where he could not sleep.

*"Are you forcing yourself to sleep?" Mom asks. "Are you depressed?"*

*"Are you on drugs?" Sarah asks. "Can you hear me?"*

*"I was taking a nap! Jeez!"*

*"Oh, okay. It's six o'clock."*

*"Wow, I was asleep for a while. I was drawing my brain maps for people." (It's Kind Of A Funny Story, 413)*

Before his treatment, Craig was unable to sleep. After four days of treatment he was able to sleep like everyone else. Besides, although Craig



admitted that if he could sleep well without experiencing any difficulties, his mother was still worried about Craig. Craig convinced his mother if he didn't need to worry because he could sleep normally without being forced again.

Not only that, Craig began to think about what he should do after leaving the hospital. He thought of some of the things he wanted to do to cope his cognitive depressing problem which had begun to improve and he regretted his thoughts of wanting to kill himself such as the excerpt below:

*Jeez, why was I trying to kill myself?  
It's a huge thing, this Shift, just as big as I imagined. My brain doesn't want to think anymore; all of a sudden it wants to do.*

*Run. Eat. Drink. Eat more. Don't throw up. Instead, take a piss. Then take a crap. Wipe your butt. Make a phone call. Open a door. Ride your bike. Ride in a car. Ride in a subway. Talk. Talk to people. Read. Read maps. Make maps. Make art. Talk about your art. Sell your art.*

*Ski. Sled. Play basketball. Jog. Run. Run. Run. Run home. Run home and enjoy. Enjoy. Take these verbs and enjoy them. They're yours, Craig. You deserve them because you chose them. You could have left them all behind but you chose to stay here.*

*So now live for real, Craig. Live. Live. Live. Live.  
Live. (It's Kind Of A Funny Story, 443)*

The things to do above are another ways to cope his problem that make him depressive cognition which began to heal. Craig felt stupid about his choice to commit suicide. He realized how much the people around him were very supportive and meant to Craig. He got several benefits of life lessons since he was in hospital, including finding what he liked and new friends. He wants to start a new activity to be more healthy and useful for others. He wants to make his life better. The simple things above are enough to make him feel alive, happy, and apart from the depressive cognition he felt all along. He really wants to be a human who can function to live his day as usual. Even from all the activities that he wants to do in his mind, he can conclude if he wants to live. Here, Craig



challenge his depressive cognition, by changing his behavior. Finally, he has an opportunity to get things back into balance. Craig really found ways to cope his depressive cognition.



## CHAPTER IV

### CONCLUSION AND SUGGESTION

In this chapter, the researcher presents several conclusions and suggestions. After analyzing novel *It's Kind of a Funny Story* by Ned Vizzini the researcher makes some conclusions and suggestions as follows.

#### A. Conclusion

Craig Gilner is a main character in Ned Vizzini's *It's Kind of A Funny Story* who has depressive cognition. In this study the writer uses the theory of Aaron Beck (1972), depressive cognition which results in the following analysis found the mechanisms of depressive cognition from Craig. There are catastrophizing, labeling, all or nothing and selective abstraction in cognitive bias from Craig. Then Craig has a negative scheme of his experience with criticism from his teacher and friends. Craig also has a negative triad where he views himself, the world and his future in negative way. Obviously, Craig feels worried about his future and feels that he is useless. That is the reason why his thoughts always viewing any situation in negative way. There are also some depression symptoms he felt such as affectional symptoms, motivational symptoms and behavioral symptoms that still related with his mechanisms of depressive cognition.

The researcher analyzed the way Craig cope his depressive cognition problem uses Paul Gilbert theory of cope the depression (1997). Craig has done several things such as creating personal space. He likes to go to the bathroom for his escape place because he needs to be alone but he also spends his time with

someone he loved, his sister. Then, breaking down the large problem into smaller ones. He go to Argenon hospital and decides to move to Manhattan arts academy. After that, coping with the boredom. He go to Aaron House and gathering with new people in Argenon hospital. The next following is joining positive activities. He likes doing art activities so he finds what he likes and wants. Another way is setting the limits. He decides to quit from extracurricular, wants to transfers school and wants to focus on art. The last, changing behavior. He stopped using antidepressant, he stopped using the bathroom as his escape place, he try to eat normally, and when he leave the hospital he had new things to do. Moreover, Craig realized that the way he could cope his depressive cognition was with stay alive.

## **B. Suggestion**

The writer hopes that this study is useful and gives contribution to literary world. In this study, the writer uses theory Aaron Beck's Depressive cognition to analyzed Craig's depressive cognition in Ned Vizzini's *It's Kind Of A Funny Story*. The writer hopes in further more research the researcher use other theory to analysis Ned Vizzini's *It's Kind Of A Funny Story*, it can focus on the other aspects or issues in the novel that the researcher has not analyze yet.

During analyzing depressive cognition theory in this study, the writer found several mental illnesses related to depression, such as his anxiety. Meanwhile the writer in this study only focused on one mental illness by Craig, depressive cognition. The analysis of other mental illnesses, for example, anxiety might be

possible in this novel. The possibility of the theory, process and the results of the analysis are also different from this study.



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## APPENDIX

### A. The Mechanisms of Craig's Depressive Cognition

#### 1. Cognitive Bias

Corpus	Cognitive Bias	Page
I didn't get to respond to a mass mail sent out by my teacher asking who needed extra credit, which meant other kids snapped up the extra credit, which meant I wasn't going to get a 98 in the class, which meant I wasn't anywhere close to a 98.6 average (body temperature, that's what you needed to get), which meant I wasn't going to get into a Good College, which meant I wasn't going to have a Good Job, which meant I wasn't going to have health insurance, which meant I'd have to pay tremendous amounts of money for the shrinks and drugs my brain needed, which meant I wasn't going to have enough money to pay for a Good Lifestyle, which meant I'd feel ashamed, which meant I'd get depressed	Catastrophizing	14
I can't eat and I can't sleep. I'm not doing well in terms of being a functional human, you know?	Labelling	29
"I can't eat any more either," I say. I've managed five bites. My stomach is churning and closing fast. It's all such inoffensive food; I shouldn't have any problems with it. I should be able to eat three plates of it. I'm a growing boy; I shouldn't have trouble sleeping; I should	Labelling	44

be playing sports! I should be making out with girls. I should be finding what I love about this world. I should be frickin' eating and sleeping and drinking and studying and watching TV and being normal.		
That wasn't good when it came time to start school. The first day, I was quizzed on what I was supposed to have read over the summer. I got a 70, something I'd never seen on a sheet of paper in my life. Where do you see the number 70? There are no \$70 bills; there's no reason to get a \$70 check. I looked at the 70 as if it had stolen from me.	Selective abstraction	93
I had a lot of Tentacles. I needed to cut some of them. But I couldn't; they were all too strong and they had me wrapped too tight; and to cut them I'd have to do something crazy like admit that I wasn't equipped for school.	Selective abstraction	95
The other kids were geniuses. I thought I was a big deal for getting an 800 on the exam—like the entire entering class had gotten 800. It turned out the test had been “broken” in my year	Selective Abstraction	95
That's not to say I did terrible in high school—I got 93's. That looked good to my parents. Problem is, in the real world, 93 is the crap grade; colleges know what it means—you do just well enough to stay in the 90's. You're average. There are a lot of you. You aren't going over the top; if you're not doing any extracurriculars you're done. You can change things in later years, but with 93's your freshman year, you're going to have a lot of dead weight.	catastrophizing	97
“Do you have difficulty sleeping?” “Sometimes not. I lie there thinking about how everything I've done is a failure, and there's no hope for me except being homeless, because I'm never going to be able to hold a job because everyone else is so much	All or nothing	106

<p>smarter.”</p> <p>“But they’re not all, are they, Craig? Some of them have to be not as smart as you.”</p> <p>“Well, those are the ones who I don’t have to worry about! But plenty of people are, and they’re going to kick my ass everywhere. Like my friend Aaron—”</p>		
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## 2. Negative Self Schema

Corpus	Page
The teachers all told me I was going to have four hours of homework a night, but I didn’t believe it— plus I believed I could handle it. I had gotten into the school; I’d definitely be able to take anything it could dish out, right?	97
I’m pretty stupid for thinking I could get any sleep tonight. Once I turn off the lights and put the cup aside, I get the Not-Sleeping Feeling—it’s kind of like feeling the Four Horsemen of the Apocalypse rear up in your brain and put some ropes around it and pull it toward the front of your skull	135
<p>“I saw on your chart. Why do you think you couldn’t sleep?”</p> <p>“My friends called. They were kind of . . . making fun of my whole situation.”</p> <p>“And why would they do that?”</p> <p>“I don’t know.”</p>	271

## 3. Negative Triad

Corpus	Page
I wasn’t gifted. Mom was wrong. I was just smart and I worked hard. I had fooled myself into thinking that was something important to the rest of the world. Other people were complicit in this ruse. Nobody had told me I was common.	96
<p>“We’re going to get through this, Craig. Now, from a personal standpoint, why do you think you have this depression?”</p> <p>“I can’t compete at school,” I said. “All the other kids are too much smarter.”</p>	105



I lie there thinking about how everything I've done is a failure, death and failure, and there's no hope for me except being homeless, because I'm never going to be able to hold a job because everyone else is so much smarter	106
I'm no one; I'll never make it in my life; I'm about to get revealed as a fake, I've already been revealed as a fake but I don't know it yet; I know I'm a fake and pretend not to. All the good thoughts—the normal ones, the ones that have occasionally surfaced since last fall—scramble out the front of my brain in terror of what lives in my neck and spine. This is the worst it'll ever be	136

#### 4. Symptoms of Depression

Corpus	Affective symptom	Motivation symptom	Behavior symptom	Page
When I do eat, it's one of two experiences: a Battle or a Slaughter. When I'm bad—when the Cycling is going on in my brain—it's a Battle. Every bite hurts. My stomach wants no part of it. Everything is forced. The food wants to stay on the plate, and once it's inside me, it wants to get back on the plate. People give me strange looks: What's wrong, Craig, why aren't you eating?			Appetite disorder	33
I look at myself in the bathroom light. Yes, I'm okay. I'm okay because I have a plan and a solution: I'm going to kill myself.		suicide		126
"You really have to stop, right now, and think about how you feel. I want you to remember how you feel the next time	Feeling sad			158

<p>you decide to stop taking your medicine.”</p> <p>“Okay.” I commit it to memory; I feel dead, wasted, awful, broken, and useless. It’s not the kind of feeling you forget.</p>				
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## B. Craig’s Ways to Cope His Depressive Cognition.

### 1. Creating Personal Space

Corpus	Page
<p>I have a system with bathrooms. I spend a lot of time in them. They are sanctuaries, public places of peace spaced throughout the world for people like me. When I pop into Aaron’s, I continue my normal routine of wasting time. I turn the light off first. Then I sigh. Then I turn around, face the door I just closed, pull down my pants, and fall on the toilet— I don’t sit; I fall like a carcass, feeling my butt accommodate the rim. Then I put my head in my hands and breathe out as I, well, y’know, piss. I always try to enjoy it, to feel it come out and realize that it’s my body doing something it has to do, like eating, although I’m not too good at that. I bury my face in my hands and wish that it could go on forever because it feels good.</p>	6
<p>“I’m depressed, okay, Aaron?”</p> <p>“Yeah, I know, about what?”</p> <p>“No way! You’re like the happiest guy I know!”</p> <p>“What are you talking about?”</p> <p>“That’s a joke, Craig. You’re like the craziest person I know. Remember on the bridge? But, you know, the problem is you don’t chill enough. Like even when you’re here, you’re always worried about school or something; you never just kick back and let things slide, you know what I mean? We’re having a party tonight—where are you gonna be?”</p>	255

I even spent time with Sarah. She was so smart, smarter than me for sure. She'd be able to handle what I was going through without seeing any doctors. Her homework bordered on algebra even though it was only fourth grade, and I helped her with it, sometimes doodling spirals or patterns on the side of the pages while she worked. I didn't do maps anymore	115
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## 2. Breaking Down Large Problem Into Smaller Ones

Corpus	Page
Argenon Hospital. I can walk there from here. It might even feel good. And once I get there, I won't have to do anything. I'll just tell them what's wrong with me and they'll give me medicine. Probably they'll give me some kind of new pill—maybe they've invented that fast-acting Zoloft by now—and I'll come right back home. Mom and Dad won't even know	150
<p>"If I don't make some kind of big change, I'm going to come out of here wondering how anything is different from before, and I'm going to end up right back here."</p> <p>"Right," says Mom. "I'm with you, Craig."</p> <p>"What art school are you going to go to?" Dad asks.</p> <p>"Manhattan Arts Academy? It's easy to transfer to with my grades—"</p> <p>"Oh, but Craig, that's the school for kids who are all screwed up," Dad says.</p> <p>I look at him. "Yeah? Dad?" I raise my wrist, show him the bracelets. I have pride in them now. They're true, and people can't screw with them. And when you say the truth you get stronger.</p> <p>Dad stands still for a minute, looks down at his feet, and then looks up.</p> <p>"Okay," he says. "We'll do whatever we have to do. You have to stay in school until you transfer, though. That's going to be . . . until the end of the year at least, I think."</p> <p>"I'll handle it," I say.</p> <p>"I know you will. We'll help."</p>	415

### 3. Coping with the Boredom.

Corpus	Page
<p>“I’m going to Aaron’s house!” I announced to Mom, flipping my phone shut. I still had the welcome packet in my hand; I gave it to her to put in my room.</p> <p>“What are you going to do over there?” she asked, beaming at the packet, then at me.</p> <p>“Um . . . sleep over.”</p> <p>“Are you going to celebrate? Because you should celebrate.”</p> <p>“Heh. Yeah.”</p>	62
<p>I bite my tongue. I can’t help it. I shouldn’t be laughing at any of these people, and neither should Humble, but maybe it’s okay, somewhere, somehow, because we’re enjoying life? I’m not sure. Jimmy, two tables away, notices my stifled laughter, smiles at me, and laughs himself.</p>	247

### 4. Planning Positive Activities

Corpus	Page
<p>“It’s so pretty!”</p> <p>“It’s all right,” I say, looking down. I decide it’s done. I can do better. I put my initials in the bottom—CG, like “computer-generated”—and put the picture aside. I ask for more paper and start the next one.</p> <p>It’s easy. It’s easy and pretty and I can do it. I can make these things forever. For the rest of arts and crafts, I make five.</p>	293
<p>“Craig, there’s one thing you didn’t mention that your recreation director did. She said you’ve been doing art while you’ve been here.”</p> <p>“Oh, yeah, that’s nothing, really. Just yesterday.”</p> <p>“What is it like?”</p> <p>“Well, remember how I told you last time that I liked to draw maps when I was a little kid? It sort of came from that.”</p>	306
<p>“I kinda like it in here,” I say to Dr. Minerva.</p> <p>“This room?”</p> <p>“No, the hospital.”</p> <p>“When you’re finished, you can volunteer.”</p> <p>“I talked to the guitar guy Neil about that. I think I’ll try. I can get school credit!”</p>	388

<p>“Your artwork,” she says.</p> <p>“Craig, these are wonderful.”</p> <p>“Thanks.” I sit down. We were both standing. I didn’t even notice.</p> <p>“You started these because you used to do them when you were four?”</p> <p>“Right. Well. Something like them.”</p> <p>“And how do they make you feel?”</p> <p>I look at the pile. “Awesome.”</p> <p>She leans in. “Why?”</p> <p>“Because I do them,” I say. “I do them and they’re done. It’s almost like, you know, peeing?”</p> <p>“Yes . . .” Dr. Minerva nods. “Something you enjoy.”</p> <p>“Right. I do it; it’s successful; it feels good; and I know it’s good. When I finish one of these up I feel like I’ve actually done something and like the rest of my day can be spent doing whatever, stupid crap, e-mail, phone calls, all the rest of it.”</p>	389
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## 5. Setting Owns Limit

Corpus	Page
Plus there were extracurriculars. Other kids did everything: they were on student government; they played sports; they volunteered; they worked for the school newspaper; they had a film club; they had a literature club; they had a chess club; they entered nationwide competitions for building robots out of tongue depressors; they helped teachers out after school; they took classes at local colleges; they assisted on “orientation days.” I didn’t do anything but school and Tae Bo, where I hit a plateau. They humored me in class, letting me fake-fight and do my not-that-form-fitting pushups, but the teacher knew it was something that I didn’t really enjoy. I quit. That was the only Tentacle I ever cut.	95
<p>I don’t want to be completely crazy. I don’t like being here that much. I like being a little crazy: enough to volunteer here, not enough to ever, ever, ever come back.</p> <p>“Yes,” I say. “Yes. I have thought about it.”</p> <p>“When? Just now?”</p> <p>I smile. “Absolutely.”</p> <p>“And what do you think?”</p> <p>I clap my hands together and stand up. “I think I should call my parents and tell them that I want to transfer schools.”</p>	392
<p>“So are you feeling better?”</p> <p>“Yeah.”</p> <p>“What changed?”</p> <p>“I’m going to leave school.”</p>	395



<p>“You’re what?”</p> <p>“I’m done. I’m going somewhere else.”</p> <p>“Where?”</p> <p>“I don’t know yet. I’m going to talk it over with my parents. Somewhere for art.”</p> <p>“You want to do art?”</p> <p>“Yeah. I’ve been doing some in here. I’m good at it.”</p> <p>“You’re pretty good at school too, man.”</p>	
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## 6. Changing Behavior

Corpus	Page
What was I doing taking pills? I had just had a little problem and freaked out and needed some time to adjust. Anyone could have a problem starting a new school. I probably never needed to go to a doctor in the first place. What, because I threw up? I wasn’t throwing up anymore	122
I look at the toilet and decide to stand. I’m not going to sit down like the world’s beaten pup anymore. I stand, push hard, wash my hands, and step out	173
It’s weird how your stomach can come back around. As I tune Humble out, I eat not because I want to, not because I have to overcome anything, not to prove myself to anyone, but because it’s there. I eat because that’s what people do. And somehow when the food is put in front of you by an institution, when there’s a large gray force behind it and you don’t have to thank anyone for it, you have the animal instinct to make it disappear, before a rival like Humble comes along and snatches it away. I think, I think as I chew, my problem might be too much thinking.	208
<p>“Do you remember what I asked you last time, about whether or not you’d found any Anchors in here?”</p> <p>“Yes.”</p> <p>She pauses. In order to ask a question, it is often possible for Dr. Minerva only to intimate that she might ask a question.</p> <p>“I think I’ve found one,” I sigh.</p> <p>“What’s that?”</p> <p>“Can I get up and get it?”</p> <p>“Absolutely.”</p> <p>I leave the office and walk down the hall, where Bobby is leading a new recruit on his welcoming tour—a black guy with wild teeth and a stained</p>	387

<p>blue sweatsuit.</p> <p>“This is Craig,” Bobby says. “He’s real young, but he’s on the level. He does drawings.”</p> <p>I shake the man’s hand. That’s right. I do drawings.</p> <p>“Human Being,” the man says.</p> <p>“That’s his name,” Bobby explains, rolling his eyes.</p> <p>“Your name isn’t Craig; it’s Human Being too,” the man says.</p>	
<p>“Are you forcing yourself to sleep?” Mom asks.</p> <p>“Are you depressed?”</p> <p>“Are you on drugs?” Sarah asks. “Can you hear me?”</p> <p>“I was taking a nap! Jeez!”</p> <p>“Oh, okay. It’s six o’clock.”</p> <p>“Wow, I was asleep for a while. I was drawing my brain maps for people.”</p>	413
<p>Jeez, why was I trying to kill myself?</p> <p>It’s a huge thing, this Shift, just as big as I imagined. My brain doesn’t want to think anymore; all of a sudden it wants to do.</p> <p>Run. Eat. Drink. Eat more. Don’t throw up. Instead, take a piss. Then take a crap. Wipe your butt. Make a phone call. Open a door. Ride your bike. Ride in a car. Ride in a subway. Talk. Talk to people. Read. Read maps. Make maps. Make art. Talk about your art. Sell your art.</p> <p>Ski. Sled. Play basketball. Jog. Run. Run. Run. Run home. Run home and enjoy. Enjoy. Take these verbs and enjoy them. They’re yours, Craig. You deserve them because you chose them. You could have left them all behind but you chose to stay here.</p> <p>So now live for real, Craig. Live. Live. Live. Live. Live.</p>	443