
**Reading Traumatized and Depressed Women: A Cognitive Study of
Marjane Satrapi's *Persepolis***

**Keywords: Aaron T. Beck, Depression, Marjane Satrapi, *Persepolis*,
psychological analysis**

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Abstract

Depression is a mental disorder that disrupts individuals' thoughts and behaviors. Psychologists recognize depression as one of the most common mental illnesses worldwide. Anyone may develop depression regardless of age or social background; yet, women are most likely prone to depression. Numerous theories have studied the nature of depression, its causes, symptoms, and healing process, among these, is Aaron T. Beck's model of depression. Beck's approach gives a comprehensive examination of depression and provides a therapeutic theory based on the model, known as cognitive behavior therapy. First, the study aims at studying depression, its reasons, symptoms, and why women are most likely affected by it in comparison to men. Second, the study targets understanding depression in literature and shows the effective relationship between them. Hence, to fulfill these aims, the present study makes use of Marjane Satrapi's *Persepolis*. Through the cognitive approach, the analysis will uncover how depression might affect the heroine's impulses, thoughts, and actions, which means having free access to her mindset and providing more understanding of her situations without being misread or misanalyzed. This represents the originality of the current study which presents novel ideas in the respect of adapting Beck's model of depression to the selected text. Therefore, using an original psychological methodology to investigate literary works opens new horizons for psychological analysis in the literary area.

1. Introduction

Since the dawn of humanity, many diseases had swept and killed a large number of people; some of these diseases had been worked on and eliminated, while others continue to threaten humans. Disorders are not only physical; there are also mental illnesses. Slade (2009) defines mental illness as a condition that has no known physical cause, it is rather a functional illness, and the subjective experience apparently lies at the center of mental diseases. One of the most commonly recognized mental disorder in the world today is depression. Gilbert (1997) states that depression has been a problem for humanity for a long time, it was identified as a condition over 2,400 years ago by Hippocrates, the renowned ancient Greek doctor known as the Father of Medicine, who labeled it as melancholia. The term itself may refer to a sort of weather, a drop in the stock market, a hole in the ground, and, of course, states of moods. It was derived from the Latin *deprimere*, which meant to press down. In clinical terms depression is defined as a phrase used to describe any disorder in which a disruption in the person's mood is the primary aspect or problem. Clinical depression, also known as major depressive disorder MDD, is one of the most prevalent and significant types of depression (Pierce, 2018).

Major depressive disorder is characterized by the co-occurrence of multiple distinct symptoms. Beginning with chronic grief, bad temper, anhedonia, drowsiness and low energy, feelings of worthlessness and low self-esteem, extreme self-blame, complications in appetite and weight, anxiety and tension, troubled sleep which can be insomnia and hypersomnia, difficulties in concentration and decision-making, physical discomfort such as headaches and back pain, and last but not least, desperation, suicidal thoughts or behavior. Anhedonia is likely the most distinguishing symptom of major depression, which is the disappearance of the individual's capacity to appreciate things that they would typically like (Nelson & Strakowski, 2015).

According to the American Psychiatric Association (2020), depression may strike anybody, including those who seem to live in reasonably good circumstances. There is a variety of factors that can contribute to causing depression. The first is biochemistry, which means an imbalance in some chemicals in the brain may lead to depressive feelings. The second is genetics, which depression may be passed down across generations. The third is people with poor self-esteem, who are easily stressed, or usually tend to think of worst-case scenarios are more likely to suffer from depression. Fourth are environmental factors, some people may be more vulnerable to depression if they are constantly exposed to violence, neglect, abuse, or poverty. Thus, depression does not affect an exclusive group of people; anyone can have it, regardless of their circumstances, their social background, or their age. However, when it comes to gender, there is a huge difference in depression rates. Women are more prone than men to depression, one-third of women will have a severe depressive episode at some point in their lives. Nolen-Hoeksema

and Hilt (2009) mention that girls' rates of symptoms and disorders increase between the ages of 13 and 15, while boys' rates stay rather consistent. Women are twice as likely as males to develop depression by the time they reach early adulthood. According to Renzoni (2022) the following are potential causes of female depression: genetics, hormonal alterations, uneven wages, and gender roles. The final factor is the most problematic for women in generating depression in a direct and more precise way.

Solomon (2001) speaks up that men rule the world, which makes things difficult for women. Physically, women are less capable of self-defense. They have a higher chance of being poor and a higher chance of being abused. They are less likely to obtain an education. They are more prone to being humiliated frequently. They are more prone to losing social status as a result of apparent aging indicators, and they are most likely to be submissive to their spouses. According to some feminists, women experience depression because they do not have enough autonomous arenas in which they can establish themselves and must rely on domestic accomplishments for all of their feelings of self-worth.

According to behavioral and cognitive theories of depression, a persistent lack of control over one's environment leads to a generalized assumption that one cannot control events; this case then leads to depression symptoms such as decreased motivation, passivity and self-esteem loss. Women's lack of social authority leads to their tendency to ruminate more than males when worried. Rumination is unconscious and repeated attention to one's sensations of despair, as well as the meanings and implications of the distress. Women may ruminate more because they are looking for methods to control their surroundings and their suffering, but they may not feel effective in exercising that control, therefore they remain stuck in ruminating. As a consequence, several laboratory and field investigations find that those who ruminate when they are disturbed have longer and more severe episodes of depression symptoms and are more prone to acquiring complete depressive disorders than those who do not ruminate (Nolen-Hoeksema, et al., 1999).

Teenage girls are also exposed to developing a depressive disorder. Nolen-Hoeksema (2006) found that girls and boys are equally likely to develop depressive symptoms before the age of 13, but around the age of 13 to 15, girls' degrees of symptoms significantly increase, while boys' levels remain relatively steady and even seem to fade out a bit. Hammen (1997) asserts that some researchers believe that the activation of gonadal hormone systems during puberty contributes to the rise in female depression rates. Regular puberty hormonal imbalances may only cause depression in girls who are genetically predisposed to the condition. As cited in Keyes and Goodman (2006) female adolescence is a time when biology and psychosocial changes collide; that is, morphological changes such as breast growth and increased body fat have a psychosocial impact on self-image and perception by others. Thus, pubertal

timing, age, self-image, morphological changes, and psychological support are all likely to impact women's depression vulnerability during this time.

1. 2 Depression In Literature

Depression is not solely explained in psychological terms, literature has its fair share of using depressed characters in novels, poetry or drama. Literature has contributed to drawing the attention of people to all mental disorders including depression; it helps psychiatrists to diagnose it by portraying real characters who struggle with depression. Although medical guidelines are the simplest method to learn about depression, studying it via literary narratives will provide a more detailed outlook, since what is better than knowing it medically is witnessing someone who is directly affected by it. Moreover most people do not comprehend clinical sources and do not understand medical terms unless they are specialists in the psychiatric domain.

In comparison to literary works, the goal of clinical sources is to produce a unified description of the condition. When it comes to patients, it is not about one person but about "them." The focus of clinical research is on the collective to have a better understanding of the disease as a whole. The standardization that results allows clinical sources to diagnose, treat, and advance research on the disease. Hence, individual perspectives are lost for the greater sake of broad comprehension as a result of this standardization. Alternatively, literary narratives are not devoted to giving a large overview of the condition, instead, they give an elaborated explanation of specific experiences. Each literary source portrays what is like to be a mentally ill character, not only but some of them detail the process of visiting psychiatrists and hospitals, bringing into focus the idea of illnesses or madness. Others, on the other hand, may give a clinical description but in brief, while diving into how it manifests inside the particular person. As a result, in narrative works, the patient takes priority over the medical diagnosis, allowing the audience to understand depression through the lens of a personal experience rather than a broad description. Furthermore, because of the stigma attached to mental patients, some of those who have mental conditions believe they are insane. This has a deep impact on how they view themselves, how they approach others, and how they act in general. Analyzing the language used by depressed individuals to express themselves and their illnesses helps to understand the consequence of misunderstandings. It also gives the reader a sympathetic understanding of the situation. Instead of viewing symptoms from clinical sources, readers are provided with unique experiences from individuals with whom they may sympathize (Williams, 2016).

Including psychological themes within the literary text aids not only the readers to have free access to the psyche of the depressed individuals but also these writings are considered as an outlet for their authors, who are personally affected by depression, to share their miseries, their outmost frightful moments and insert with it the reasons that may create mental illnesses. According to Nolen-Hoeksema (2020) depression is more prevalent among writers, artists,

and composers. A study of 1,005 eminent 20th century artists, writers, and other professionals confirms that writers and artists have a higher chance to experience mood disorders, psychosis, and suicide attempts than their peers who are caught up in business, science, and public life.

Besides this, those depressed individuals, or any kind of mental patients, find in psychological literature their comfort zone, because they find in literature stories and characters they can relate to. They witness their inside conflicts verbalized in front of them, which may minimize their sense of loneliness because they will learn that there is someone out there who can feel them. To take an instance, Richmond (2019) states that When working with teenagers, therapists, counselors, and social workers find that employing young adult literature proved effective. Bibliotherapy, or the use of texts to help people to deal with mental illnesses, has long been a tactic employed by those in the helping professions. Through bibliotherapy, people can get insight into who they are, find therapeutic catharsis, feel more attached to others and less alone, as well as learn new ways to deal with their concerns. In his study, *Harry Potter and the Diagnostic and Statistical Manual: Muggle Disorders in the Wizarding World*, Freeman asserts that the psychological issues depicted in Harry Potter encourage readers to diminish the stigma associated with mental illness and offer empathy and tolerance to mental health patients and their loved ones.

Readers and aspiring mental health professionals might learn valuable psychological and psychiatric information from fictional characters. They are even employed in medical school training courses to assist in the training of future psychiatrists. Finally, Literary characters' psychological profiles can provide readers with more than clinical validity; characters such as Mr. Kurtz in *Heart of Darkness* and Luke Jackson in *Cool Hand Luke* are more effective and compelling as symbols of conflict in society than as case studies of pathological or positive psychological forces in individuals. We can perceive and record fundamental, distinguishing elements of human behavior through well-constructed drama. They are sometimes better than we see them in everyday interactions (Haycock, 2016).

Many writers frequently demonstrate a knowledge of psychology in their works, which may then be analyzed in the light of psychology. Accordingly, psychology has always been a part of literature. The psychological approach is not novel in the broadest sense of the term. Aristotle employed it in his traditional description of tragedy as combining the emotions of pity and dread to achieve catharsis as early as the fourth century B.C. With his assertions about the moral impact of poetry, Sir Philip Sidney was psychologizing literature, as were Romantic writers such as Coleridge, Wordsworth, and Shelley with their conceptions of the imagination (Guerin, et al., 2005). Moreover, writers have formed most of their main characters based on psychological complex, which is some kind of obsession that governs the character's feelings, actions, and perceptions of life. Yimer (2019) gives examples of some of these writers. There

is Charles Dickens, mirrored the well-established conventions of psychological realism in his classic industrial novel, *Great Expectations* (1861). *Pygmalion* (1913) by George Bernard Shaw, was based on the Greek legendary figure Pygmalion, and the term Pygmalion effect was coined to underline the observable phenomena relating to men's psychology and performance. Likewise, Vladimir Nabokov's *Lolita* (1955) was a pivotal work in the development of the Lolita complex.

Moreover, what made the psychological novel more prominent in the 20th century was the official alliance between the fields of literature and psychiatry in a critical form, which is known as psychoanalysis, which was established by Sigmund Freud. Abrams and Harpham (2012) mention that Freud developed this theory for the particular reason of therapy. However, the theory evolved to become part of other domains, including warfare, mythology, and religion, as well as literature and other arts.

Adopting psychological theory to investigate the literary text makes it smoother for the critics and readers to understand the mindset of those mental characters without leaving exclamations inside the readers' minds about the characters' impulses and behaviors or without creating a fabricated analysis that may cross the essence of the text or the scientific reality of the human mind. Nowadays, writers are still using psychological themes in their narratives, and these narratives have the possibility of being analyzed through the premises of different psychological theories. Some of the frequently recurring psychological themes in novels are Post-traumatic stress disorder (PTSD), obsessive-compulsive disorder (OCD), anxiety disorders, eating disorders, sexual drives, violence derives, trauma, autism and depression. Therefore, to study depression in literary terms. The current study makes use of the literary text *Persepolis* by Iranian writer Marjane Satrapi. *Persepolis* is two parts autobiographical novel. The novel recounts Satrapi's life from her childhood to early teenage years. Satrapi sets the first part of her narrative at the end of the 1970s, which marked the emergence of the Iranian Islamic Revolution and the subsequent setback of the Iranian-Iraqi war. The second part recounts Marjane's expatriate years in Vienna, and her following come back to Iran. Satrapi illustrates her life experiences through the use of a graphic novel. Merriam-Webster (N.D.) defines the graphic novel as a "story that is presented in comic-strip format and published as a book.

The narrative presents a social and political commentary about Iran during the Islamic revolution and the Iraq-Iran war. In *Persepolis*, the Iranian Revolution lies to be the center of the novel around which all the events are built. Also known as the Islamic Revolution, was a mass uprising in 1978–1979, which ended up with the emergence of the Islamic republic and the downfall of the monarchy on February 11 (Afary,2022). The early consequence of the revolution was freedom of expression, privileges, and discourses that had previously been suppressed by the shah were made public. However; a new type

of persecution arose soon after; those who had not left the area and were either part of the Shah's rule or resisted the revolution were killed or taken captive. The present revolutionary regime is harsh compared to the one that was deposed. An authoritarian dictatorship has been replaced by an authoritarian religion (Priborkin, 2019).

Apart from these extremist practices, Iranian women, in specific, had to deal with other kinds of practices after the Islamic revolution, which imposed legal and social constraints on women's life, leaving them considerably behind males in terms of legal standing. Iran was named among the nations with the lowest gender equality in 2015 by the World Economic Forum (141 out of 145). Since the 1990s, the hijab, or headscarf, and a long coat have been considered appropriate wear for Iranian women, and Islamic religious police are permitted to punish or detain women who violate this dress code. Typical penalties include a fine of around 25 USD and up to two months in jail. Before the Iranian Revolution of 1979, women may legally be married at the age of 18. After the revolution, it was at the age of nine years old; then, in 2013, it was justified to be 13. If a woman desires to marry, she must first obtain approval from her father, paternal grandfather, or a civil court. Legally, rape between spouses is not a crime. Custody rights for women have also been restricted. That is, under the law, a husband has complete control over his wife, including the authority to restrict or limit her freedom to work outside the house. Other post-revolutionary legal changes affecting women's rights include the dismissal of female judges and the prohibition of women from being appointed as judges. Women are not permitted to attend, let alone engage in, public athletic activities. They are not legally protected against employment discrimination. Women are not permitted to travel or get passports without the formal approval of a male guardian; as a result, companies frequently prefer to employ males who can travel freely (Mahmoudi, 2019). These are only a few of the inequitable practices Iranian women have had to undergo. All these dreadful occurrences were depicted in Satrapi's *Persepolis*, where she uses visuals to create a real-time representation of what is happening there and the conflicts she must overcome.

However, bad things did not stop there; new turbulence had emerged, which was the Iranian-Iraqi war, eight-years catastrophe. In addition to living under the societal restrictions of their government system, the Iranians' lives turned upside down. Hence, In the light of these overwhelming dilemmas, Satrapi provides her readers with the key theme of her novel which is the appalling ramifications that result from living in a troubled society, surrounded by local turmoil and war. Murthy and Lakshminarayana (2006) state that war harms both combatants and noncombatants, including physical and mental harm. War has a devastating impact on a nation's health and well-being. According to studies, conflict situations result in more deaths and disabilities than any other major illness. War causes long-term physical and psychological damage to children and adults. Wartime deaths are only the "tip of the iceberg." Other than

death, there are no well-documented repercussions; such as persistent poverty, starvation, disability, economic and social degradation, and mental disorders. *Persepolis* demonstrates a panoramic image of life in Iran during those overwhelming years, as well as the hardships the Iranian citizens went through.

Hence, the core of the study focuses on investigating depression, its nature, its reasons and its destructive consequences, specifically among women. Thus, to have closer look to depressed women, the study employs a novel that features female as main character, and investigates the reasons that lead women to develop depression, and how can depression control their thoughts and behaviors. Going through the reasons that lead women to develop depression, the study raises crucial issues related to the various forms of social injustice which women deal with and how they are locked in patterns of stereotypes against their will. Additionally, by employing an up to date psychological technique to study a literary work, it opens new avenues for psychological analysis in the literary field that go beyond the conventional and overused methods employed by literary critics. It provides to the literary scholars, especially those who are interested in interdisciplinary fields and psychological analysis, new possibility of inquiry that tackles the subject scientifically without pivoting from the essences of the text. The paper's originality lies in using *Persepolis* in accordance with Beck's model. This helps to give a fresh look to the narrative that have never been presented before and extend the themes included within the text which serves to be a helpful source for further studies.

2. Literature Review

Persepolis had been studied extensively, each of the following mentioned studies had presented an illustration about different sides of the novel using multiple methods including psychological ones, however, the current study is the first to highlight the theme of depression in the novel, using Beck's cognitive model as a means of analysis; which is the gap that it tends to fulfill, and this signifies the originality of the present study. Beck's cognitive model studies depression and how it is formed in the mind of the depressed patients. Beck provides three key concepts in his approach which are: the schema, cognitive triad and cognitive errors. By applying these concepts to analyze the three novels, they facilitate to bring to the surface a reasonable elaboration about the character's lines of thinking and disoriented behaviors.

Studies are scarce that have been done about Satrapi and her literary works. Among these very few studies is a study by Amy Malek (2006) named *The third study Memoir as Iranian Exile Cultural Production: A Case Study of Marjane Satrapi's "Persepolis"*. It investigates the Iranian diaspora; this article takes cultural studies perspective using Naficy's idea of liminality. Malek examines *Persepolis* as a distinct type of exile cultural production, demonstrating how Satrapi's liminality enabled her to establish a third space in which to negotiate problems of exile, return, and identity while bending and

merging Western genres with Iranian history and culture. The second study is Gillian Whitlock's essay (2007) *A Generation of Memoir: Soft Weapons: Autobiography in Transit* shows how Satrapi turns to an alternative technology of autobiography, the graphic memoir of black-and-white comics, and to irony and satire as modes for telling her story of childhood and subsequent exile from Iran. Another study *Documentary Graphic Novels and Social Realism* by Jeff Adams (2008) investigates Satrapi's use of childhood memories in times of crisis. It explores how Satrapi adapts documentary realism to depict the experience of girls and young women in Iran.

Ashley Dallacque (2015) had conducted a research titled *Students As Critics: Exploring Readerly Alignments and theoretical Tensions In Satrapi's Persepolis*. This article incorporates literary critics' and teenage readers' perspectives, culminating in the contextualization of critical theory as it explores Marjane Satrapi's *Persepolis*. An article named *Study Acculturation Strategies and Exile in Marjane Satrapi's Persepolis* by Sandor Klapcsik (2016), analyzes transnational individuals' attempts to blend native and host cultures, Eastern and Western identities using acculturation theories. The analysis is based on the four stages of acculturation: the honeymoon, crisis or culture shock, recovery, and adjustment phases.

Another study conducted by Mersedeh Dad Mohammadi (2016) titled *Reading More Than Marjane Satrapi's Persepolis*, in which Mohammadi attempts to analyze *Persepolis* in terms of various theories which are Orientalism, Occidentalism and Feminism. Since the main character in the novel is a female, the narrative highlights multiple women issues, a specific investigation, entitled *Iranian Women in the Memoir: Comparing Reading Lolita in Tehran and Persepolis* by Emira Derbal (2017) gives a special interest to these women's cases. The study provides an overview of autobiographical accounts in general and their implications for female authors. Then, Derbal concentrates on Iranian memoirs in specific, giving a vivid background about the life of Iranian women during the Islamic rule, and thereafter she raises women issues explored in the text of *Persepolis*

Last but not least a research made by Eman M. Ibrahim (2017) *The Representation of Historical Trauma in the Graphic Novel Persepolis by Marjane Satrapi* by Mohammed Abdel-Hamid Ibrahim (2017). It examines the influence of historical trauma on a traumatized society using Maria Yellow Horse' Brave Heart research on historical trauma, and it tackles the concept of traumatic memory in psychoanalysis, questioning its accuracy in narrating events.

3. Method

The study employs Aaron Beck's cognitive model of depression. According to the cognitive approach, depression may be understood as a

manifestation of an underlying alteration in the cognitive structure of depressed people. They frequently have unfavorable perceptions of themselves, their past, and their future as a result of the dominance of particular cognitive schemas. Both the patients' systematic misinterpretation of their circumstances and the contents of their ruminations reveal these negative notions, these distorted notions will lead to additional depressive symptoms such as sorrow, inactivity, self-blame, lack of pleasure response, and suicidal thoughts. Negative thoughts, unpleasant side effects, and self-defeating goals all reinforce one another in a vicious cycle (Beck, 1976). Moreover, how people understand certain situations is more crucial than the actual events themselves in causing the emotional crisis that results in depression (As cited in Ingram, 2009). To define the psychological basis of depression, Beck's cognitive model proposes three distinct concepts: first, the schema ; second, the cognitive triad; third, cognitive errors (Beck et al., 1979). To understand the whole model of depression, Beck defines each component individually.

The first concept is schema. Schemas are strongly rooted ideas that have their beginnings mostly in childhood and serve as lenses through which situations and encounters are perceived. In depression, these 'latent' negative schemas established in childhood are activated by a triggering event (as cited in Whitfield& Davidson, 2007).

The second unit is the cognitive triad which is made up of three key cognitive processes that cause the patients to have a specific perspective of themselves, their future and their experiences. The first unit is centered on the individuals' negative perception of themselves. They perceive themselves to be imperfect, insufficient, diseased or deprived. They are always apt to ascribe their appalling experiences to a moral, psychological or physical defect in themselves. They keep criticizing themselves and look down upon themselves because they deem that this flaw inside them causes them to be worthless and undesirable. Finally, they are certain that they miss the key factors that provide them with happiness and satisfaction. The second element of the cognitive triad is the depressed people's inability to interpret the experiences they positively face in their life. They perceive the world as placing unreasonable expectations on them and imposing tremendous barriers to achieve their life goals. In this case, the patients cannot think of less negative alternative explanations. The third part of the triad is the patients' distorted view of the future. When a sad people draw long-term projections, they predict their current problems or sorrows are endless. They always anticipate the worse and they will likely end up living in hardships, frustrations, and deprivation (Beck et al., 1979).

These anticipations are the automatic thoughts that are generally referred to the third concept of the model and are the faulty information processing. These systemic mistakes are wrapped up around the patients' belief in the plausibility of their incorrect assumptions, despite the presence of positive substitutes. They include: Arbitrary Interference which means the process of

forming unrealistic conclusions without having any evidence; Selective Abstraction which is concentrating on an out-of-context detail, neglecting other important aspects of the scenario, and conceiving the entire experience based on this fragment; Overgeneralization which is the practice of forming a general rule or conclusion based on one or more isolated instances and then extending the notion to similar and unconnected circumstances; Magnification and Minimization refer to evaluative flaws that are sufficiently severe that they cause distortions. Underestimation of an individuals' performance, success, or aptitude, as well as the exaggeration of the enormity of their issues and duties, were all signs of these processes; Personalization which alludes to the patients' tendency to connect external events to themselves when there is no justification for doing so; and finally Absolutistic thinking that is seen in the inclination to classify all events into one of two categories, for instance, saint or sinner, perfect or flawed. The patients choose the most severe, unfavorable category when defining themselves (Beck et al., 1979).

Thereafter elaborating on the theoretical part of the model, Beck follows his discussion by giving a panoramic image of cognitive therapy CT (Cognitive therapy). It is series of processes oriented toward a patients' cognitions (verbal or visual) as well as the dysfunctional premises, beliefs, and attitudes that underlay these cognitions (Beck, 1970). Based on cognitive theory, the cognitive therapy aims to change individuals' distinctive, maladaptive ideation. The fundamental cognitive method identifies individuals' misconceptions, distortions, and maladaptive beliefs, and putting their validity and reasonableness to the test. Therefore, patients can articulate their experiences more genuinely by giving up their persistent and distorted thoughts (Beck, 1970).

4. Analysis

The plot of the novel is narrated by the heroine Marjane, who starts telling her story from her early childhood. She is a 7 years child who lives with her parents and beloved grandma. She has a quiet, steady life until her nation devolves into chaos. At this point, the Iranian citizens begin a revolution against the Shah to alter the political structure, which they eventually succeed in doing so, "In 1979 a revolution took place it was later called The Islamic Revolution" (Satrapi, 2000, P.3). Before these horrible things happen, Marjane offers a fabulous image of herself, when she talks about her early life she is that dreamy and wild child "Teacher: what do you want to be when you grow up? Marjane; I'll be a prophet." (p. 8). She talks to God privately every night before going to sleep, sharing with him everything she has in her mind, her hopes, emotions, and fears. This hints at the kind of person she will become as she gets older, a mindful and bright individual with an unshakeable personality, "Every night I had a big discussion with God." (p. 8).

Marjane's parents are the first reason for her early intelligence; they mold her personality with knowledge and excellent guidance. Growing up in such a cultured, emancipated household is a privilege. This factor helps to distinguish Marjane from her peers; because being a young girl with this level of knowledge and wit is very remarkable. This privilege is held to be the foundation of her young personality, the feminist, wild and bold Marjane. Singh (2020) stresses that Marjane's family becomes an essential source of knowledge and self-constructed, and she depends on her family's devotion, care and liberalism "To enlighten me they brought books. I knew everything about the children of Palestine. About Fidel Castro. About the young Vietnamese killed by the Americans. About the revolutions in my country." (Satrapi, 2000, 12). Marjane's uncle Anosh, on the other hand, has had the most profound influence on her. After the revolution, he returns to Iran from Russia, and Marjane has never met him before. From the beginning, she has been intrigued by him and his stories "And I had a hero in my family... Naturally I loved him immediately" (P. 54). She is highly enthralled by Anosh. Yet, Marjane's happiness is cut short when he got thrown in the prison, and he is only permitted one last visitation in jail, which he requests to be Marjane. Her final encounter with Anosh is quite emotional, he gifts her a souvenir, a handcrafted swan, "Here I made you another Bread-Swan. It's the uncle of the first one." (p. 69). This swan represents the last wonderful things in Marjane's life, which are innocence, happiness, and warmth; all will be ripped away from her forever. After this meeting, Anosh is executed, and Marjane's life gets increasingly complex.

The execution of Anosh stands for the central trauma in the novel which marks the initiation of the schema of depression which is deeply, in Marjane's case, related to losing a close relative. Schemas are strongly rooted ideas that have their beginnings mostly in childhood and serve as lenses through which situations and encounters are perceived. In depression, these 'latent' negative schemas established in childhood are activated by a triggering event (as cited in Whitfield & Davidson, 2007). Hence, all things will get worse. She is overwhelmed by her grief since the person she has lost is genuinely priceless; she has lost her true hero "And so I was lost, without any bearings... what could be worse than that." (p.71). This creates a great emptiness inside her, a void she will try to fill for almost half of her life.

The first signs of the revolution begin to appear; everything is messy in Marjan's life and Iranian's life. Women, including young girls, must wear veils, and boys and girls are separated in schools "Then came 1980: The year it became obligatory to wear the veil at school" (p.3). Their universities are all closed, and the educational system and what is written in school books at all levels are decadent "Everything to be revised to ensure that our children are not led astray from the true path of Islam. That's why we are closing all the universities for a while" (p. 3). Being a 12-year-old girl, this period is challenging for Marjane because all she wants is to enjoy her life like any

normal kid at her age. As a result, she starts a plan of resistance against the tyranny of the government, and society as a whole has begun. She starts her helpless resistance by smoking, an action that enables her to sense that she can have her free, private zone. Bit by bit, the new, strong-willed, and self-reliant Marjane is born, the one who will constantly battle for her independence and refuses to abide by anything against her will. Thus, Marjane decides to have fun on her way, but this leads her to indulge herself in ongoing clashes with people of her community, who think that wearing colorful clothes or listening to western music is something outrageous.

Marjan's audacity makes her parents concerned for her safety because being a strong-headed woman in Iran at that time was not something good, and things will end up with her in an awful way. For this reason, they decide to send her abroad to Austria, "Your mother and I have decided to send you to Austria" (p. 147). This demonstrates her parents' great sacrifice, as they choose to stay away from their only daughter rather than watching her gets hurt. This choice represents a turning point in Marjan's life; she will start her journey in exile away from her parents. Nabizadeh (2019) points out that she is going to endure heartbreak, racism, and physical and mental instability during her stay in Vienna, putting her dreams to the test.

The novel's second half begins with a discussion of Marjan's arrival to Austria; a new chapter in Marjane's life is starting. In Austria, everything seems to be new to her; she is charmed by the simplest things unavailable in her own country, "It had been four years since I'd seen such a well-stocked store." (Satrapi, 2004, p. 6). She finds herself in this fascinating place and not be bound by any restrictions. However, her excitement does not last long, Marjane struggles to fit in since she has no friends to spend most of her time with, and no one to welcome her due to their different traditions and lifestyle, "Come on, relax take advantage! Cultivate yourself! You don't even know Bakunin." (p.19), and has to deal with western prejudice. "It's true what they say about you Iranians. They have no education."(p.23). As a result, she first chooses to educate herself so that she can identify everything around her and be a part of the community in which she lives, to understand them more and, in their turn, they may accept her "This certain Momo wasn't altogether wrong I needed to fit in, and for that, I needed to educate myself." (p.19). Then she finds herself with a group of friends who share the same feature with her which is being marginalized. Hence, Marjane is quickly introduced to sex, drugs, and parties in Vienna. Her new punk hairstyle and attempts to "pass" as French highlig

Marjane is doing the best she can to feel like she belongs somewhere and to be free of her seclusion. She needs someone to align herself with; she does not even admit that she is Iranian "I should say that at the time Iran was the epitome of evil and to be Iranian was a heavy burden to bear." (p. 41). This situation makes her feel she is foreign to her parents as if she has lost them, "the harder I tried to assimilate, the more I had the feeling that I was distancing

myself from my culture, betraying my parents and my origins, that I was playing a game by somebody else's rules." (p.39). This brings her back to the painful memories she experienced when she lost her uncle Anoosh. This notion of consistent losses switches on the schema of depression. According to the cognitive model, negative views about oneself, the future, and the outside world are formed as a result of early experiences. These negative concepts (schemas) may not be active, but they might be activated by specific occurrences that are similar to the ones that led to the development of the negative attitudes (schemas) in the first place (Beck, et al. 1979). Every time Marjane is in a terrible emotional state or frustration all she needs is her parents "where were my parents to take me in their arms, to reassure me?" (p.43).

Marjane falls in absolute despair she cannot go back to her home country due to its chaotic situation nor she can restore the old version of herself because she will be captured in her seclusion. As a result, Marjane starts to show sheer signs of depressive states. The first sign is represented by the negative view she provides of herself, which is one of the units of the cognitive triad; she describes the stage of body changes as part of growing up (from 15 to 16) as "an ugly stage." (p.35), and "My natural deformity ." (p.63). Self-devaluation appears to be part of the pattern of depressed individuals who tend to see themselves as missing in the qualities that are most important to them, such as capacity, performance, intelligence, health, strength, physical beauty, or popularity (Beck & Alford, 2009). What is more, she blames herself for anything she finds wrong in her life. Depressed patients are always apt to ascribe their appalling experiences to a moral, psychological or physical defect in themselves. They keep criticizing themselves and look down upon themselves because they deem that this flaw inside them causes them to be worthless and undesirable (Beck et al., 1979). For instance when she starts a relationship with some guy from Vienna named Enrique; when he does not attempt to have a sexual relationship with her she thinks she is the reason for this "Unfortunately, in the next morning I was as much a virgin and as timid as the night before. It's my fault! I'm so unbelievably ugly. I'm sure that's why he didn't want me. I'm ugly. I smell. I'm terrible. I'm hairy." (p.59). None of these things are true, simply Enrique turns out to be homosexual "Here it is! I think I'm gay. If it didn't work with you. It wouldn't work with anyone! I never really knew who I was. You removed all my doubts." (p.60).

This is an example of Marjane's cognitive distortion; a process which is termed mental reading, it is defined as assuming, without evidence, that one knows what the others are thinking, without considering other alternatives (Knapp & Beck, 2008). Indeed Marjane does not consider other potentials for the situation, instead, she jumps to a conclusion without hearing what the others have to say. Though her judgments turn out to be incorrect, the situation affects her deeply, considering it as another loss "This chaste love affair frustrated me more than it satisfied me. I wanted to love and be loved for real." (p.60).

Therefore, to fill this void inside her, she falls in love with one of her colleagues named Markus. Unfortunately, this relationship hurts her even more, he pretends to love her to use her for her money and his dirty work as a drugs dealer “This is how, for love, I began my career as a drug dealer. Hadn't I followed my mother's advice? To give the best of myself I was a no longer simple junkie, but my school official dealer” (p. 68). Until one day she discovers he is cheating on her; this destroys her, as she keeps losing her loved ones, which is completely painful for her; she tries to compensate for her loneliness and homesickness with love, but even love fails her:

My separation with Markus represented more than a simple separation. I had just lost my one emotional support, the only person who cared for me, and to whom I was also attached. I had no family or friends. I had counted on this relationship for everything. The world had just crumbled in front of my eyes (p.79).

However, the worst is yet to come, her annoying homeowner she lives in throws her out, she spends her time wandering in the streets till she drops: " I spent more than two months on the streets in the middle of winter, I got sick, I started to cough a little, my cough became continuous, until I spit blood, and ended up." (p. 86). This sickness reflects the accumulation point of everything she has gone through, all of her negative emotions have manifested as physical illness. Then, Marjane decides to return to Iran after spending time in the hospital. However, things do not improve. When she comes home, she is like a lost person in the middle of the crowd, everything she has left before is not the same, her town that is full of martyrs names, her friends who view her as an outsider, and completely strange “To them, I had become a decadent western woman” (p. 116), for them she is a western “ whore”. According to Klapcsik (2016). This feeling of loss comes as a result of her moving back and forward between various cultures. As a result, her mental crisis stage begins. She starts to view her experience negatively before she was yearning to come back to be with her family; however, she cannot be happy “ I thought that by coming back to Iran everything would be fine. That I would forget the old days.”(p.114). The second element of the cognitive triad is the depressed people’s inability to interpret the experiences they positively face in their lives (Beck, et al. 1979). She feels like she is in Vienna again; alone, eccentric, with no one to relate to “Certainly they had to endure the war but they had each other close by. They had never known the confusion of being a third-wolder, they had always had a home!” (p.113).

The patients’ negative cognitions fuel additional depressive symptoms including sorrow, inactivity, self-blame, loss of pleasure, and suicidal thoughts (Beck, 1976). Then Marjane becomes even more secluded “I became depressed.”(p.114), unable to contact even her own family “Even my grandma could no longer get me to laugh.” (p.114). She spends her whole time in the house, not willing to interact with anyone or perform any kind of activities. On top of that, she blames herself for her current situation “But my past caught up with me. My secret weighted me down.” (p.114). Patients are prone to be

brutally critical of themselves for any characteristics of their personality or conduct that they regard to be substandard (Beck&Alford,2009). Marjane is not able to see herself as a victim here, traumatized since a young age, displaced in a western country away from her family, lived four years alone in an unfamiliar place with no home to welcome her, and treated racially. In that stage of her life, she was at her most vulnerable, and she was in terrible need for anything or anyone to rescue her from this dark stage. she cannot think rationally, she cannot be merciful with herself, instead she keeps blaming herself, this is due to her negative distortions that are muddling her judgment.

As a result of despair, she decides to commit a suicide “So I decided to die.” (p.118). Her choice to die As Beck (1976) refers is motivated by hopelessness. Patients frequently perceive themselves to be trapped in an intractable life predicament from which there is no way out (except by suicide). Patients decide to end their life because they believe they cannot be saved and that nothing can be done to modify their circumstances. Suicide is frequently chosen as a way of escape because other options are frequently perceived as having an unreasonably poor chance of success, for example, medication, hospitalization, vacation or temporary leave of absence. This is exactly what happens with Marjane, leaving for Vienna, coming back to Iran, visiting a psychiatrist, or having pills, nothing seems to work with her; and besides, she is completely controlled by her negative cognitions. Hence, to escape the situation of her identity crisis, her alienation from her family, and the judgments of her friends.

Her endeavor to end her life fails, thus, she is forced to adjust her way of life because she realizes there is a life waiting for her out there she never knows about “ I inferred from this that I was not made to die. From now on, I’m taking myself in hand.” (p.119). She starts working on herself to bring back the old, strong unstoppable Marjane; she gives full concentration on her appearance, she starts playing sport, prepares for her exam to go to college and she starts a relationship with a nice man named Reza. She applies to the School of Arts where she is successfully accepted. In one of his lectures, Dr. Beck proposes a helpful way of treating depressed patients, “there is a whole approach you can use with depressed patients and that is to get them invested in something outside themselves.” (Beck Institute for Cognitive Behavior Therapy, 2014). This is exactly what happens with Marjane, she invests herself in things that help her to regain her sense of self-worth and carry her mind away from her negative thoughts. Her greatest accomplishments are her pass of the national exam and going to the school of arts. Beck (1976) implies The patients’ perception of their accomplishment in achieving a goal influences their self-perception; as they gain confidence in their capacity to control their environment and function well in ordinary circumstances. They start to believe that their efforts could pay off in some way. As a result, they become more enthusiastic. A rise in optimistic expectations raises motivation and higher motivation results in even better

performance. Patients are likely to feel even more confident as they see and accurately assess their enhanced performance. With this specific tactic, it is clear that a cycle has been completed: improved performance → elevation of self-esteem → increased motivation → improved performance.

Therefore, Marjane's acceptance at the university boosts her mood and motivation; she grows to function better in mundane life, and she starts attending classes, meeting friends, and enjoying secret parties. "Everything was going well: my studies interested me, I loved my boyfriend, I was surrounded by friends." (p.158). Though Marjane is trying her best to live a normal life like any girl at her age, yet her society's restrictions would not let her do this "They didn't leave us alone." (p.152). Every time she tries to adapt to her society, they make it difficult for her; since she is accustomed to expressing herself rather than repressing it, and expressing oneself is considered blasphemy where she lives "So miss Satrapi always saying what you think... it is good! You are honest, but you are lost." (p. 144). She even gets arrested in prison with her friends many times for the most ridiculous reasons like holding secret parties or wearing red socks:

Our struggle was more discreet. It hinged on the little details. To our leaders the smallest thing could be a subject of subversion. Showing your wrist, a loud laugh, having a Walkman. In short...everything was a pretext to arrest us. I even remember spending an entire day at the committee because of a pair of red socks (p.148).

However, Marjane keeps enjoying her life secretly, gathering with friends, partying, and drinking, she would not allow them to impose their power over her. Thereafter, both, Marjane and Reza, decide to get married, a decision which she regrets constantly:

We went home. When the apartment door closed, I had a bizarre feeling. I was already sorry! I had suddenly become a married woman, I had conformed to society, while I had always wanted to remain in the margins. In my mind a married woman wasn't like me. It required to many compromises. I couldn't accept it, but it was too late (p.163).

Their choice of tying the knot is a hasty action, made by a young couple to be able to meet anytime they want, as it is illegal to hang out together in public unless they are relatives "It must be said that during this period young couples who showed themselves in public running risk" (p. 134). Marjane is not that kind of a traditional girl whose only dream in life is to get married to any random guy, have kids, and live a domestic life and that's all, she does not like to follow these rules; she prefers to be the educated, aspiring and free-spirited woman who has a life of her own. Bad things begin to accumulate; first, she witnesses the death of her friend while enjoying a party together, which is, of course, something forbidden for them, then her miserable marriage life. "After one month of marriage, we set up separate bedrooms." (p. 165). Everything around her is getting on her nerves, and then she decides to stop this chaotic life, "I can't take it anymore, I want to leave this country" (p. 183). Now she is in the

middle of a point where she feels like losing her true self. Marjane cannot keep on living under such tyranny. To direct everything back on track again, she decides to get a divorce, which is a tough call at first because it is not usual to get a divorce in such a conservative environment “I know your family is open-minded but everyone else will judge you” (p. 178). Thereafter, she finally leaves Iran, she sacrifices being with her beloved parents and picks her freedom to restore the order in her life, because she knows very well that she cannot be anything in her country, she cannot be productive, and she can't fulfill her dreams:

Not having been able to build anything in my own country, I preferred to leave it once again. I went to France for the first time in June 1994 to take a test to enter the School of Decorative Arts in Strasbourg. I was accepted, then I had to go back to Iran to exchange my tourist visa for a student visa. (p. 185).

After leaving Iran, Marjane starts to reestablish order in her life. She attends college, becomes a renowned novelist after a few years, and writes her own story in *Persepolis*. Booker (2010) believes that she could not have created this comic in her own country, but residing in Paris provided her with the right working environment. The accurate evaluation of depression improvement demands an examination of changes in mood, motivation, cognition, and physiological functions (sleep and eating), as well as overt behavior (Beck, 1976). Her decision to leave reflects the fact that Marjane is actually healed. This time she does not give up on the absurd constraints of her government nor on people's judgments about her as she did when she arrived back in Iran. Her irrational cognitions no longer exist, now she has the full capacity to direct her life according to her wishes without feeling feeble or vulnerable.

Conclusion

Depression is like a demon possessing the patients' minds, attacking their thoughts and disturbing their behaviors. By utilizing Beck's model to study the mindset of the depressed character (Marjane) in the selected novel, the analysis can give a more clear picture of the character's thoughts and sometimes unreasonable actions, such as committing suicide after going through of what may be called as a passing phase. This fulfills Beck's notion about that patients' negative thoughts being the prime reason for causing depression more than life experiences. In *Persepolis*, the central character, Marjane, develops the schema of depression as a result of her uncle's tragic execution, the pain of his loss hunts her for most of her life which leads her to be vulnerable to depression after any time she may experience any kind of loss. Over time, Marjane loses her home, her parents, and the only man she loves, these incidents are the catalysts of her depression. she starts to view herself negatively, she holds herself responsible for all the bad things that happen to her, though she is a victim, along with viewing her life in a pessimistic way. She finally grows up hopeless and helpless and gives up and surrenders to depression and thus attempts suicide. Yet, the unsuccessful attempt triggers her mind and gives her a push to

change her situation, which is a part of her strong personality to try new things after the failure, and indeed, she succeeds in changing her thoughts about life as a whole, which boost her motivation and remove her doubts in herself. For recommendations of further studies:

1. Using religion to cause terror in Marjane Satrapi's *Persepolis*

قراءة النساء المصابات بصدمات نفسية والمكتئبات: دراسة معرفية لمرجان ساترابي

برسيبوليس

الكلمات المفتاحية: آرون ت. بيك ، الاكتئاب ، مرجان ساترابي

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الملخص

الاكتئاب هو اضطراب عقلي يعطل أفكار الأفراد وسلوكياتهم. يعتبر علماء النفس الاكتئاب أحد أكثر الأمراض العقلية شيوعاً في جميع أنحاء العالم. قد يصاب أي شخص بالاكتئاب بغض النظر عن العمر أو الخلفية الاجتماعية؛ ومع ذلك، فإن النساء أكثر عرضة للإصابة بالاكتئاب. لقد درست العديد من النظريات طبيعة الاكتئاب وأسبابه وأعراضه وعملية الشفاء، من بينها نموذج آرون تي بيك للاكتئاب. يقدم نهج بيك فحصاً شاملاً للاكتئاب ويقدم نظرية علاجية تستند إلى النموذج المعروف باسم العلاج السلوكي المعرفي. أولاً، تهدف الدراسة إلى دراسة الاكتئاب وأسبابه وأعراضه وسبب احتمال تأثر النساء به مقارنة بالرجال. ثانياً، تستهدف الدراسة فهم الاكتئاب في الأدب وتوضح العلاقة الفعالة بينهما. ومن ثم، لتحقيق هذه الأهداف، تستخدم الدراسة الحالية كتاب مرجان ساترابي برسيبوليس. من خلال النهج المعرفي، سيكشف التحليل كيف يمكن للاكتئاب أن يؤثر على دوافع البطلة وأفكارها وأفعالها، مما يعني التمتع بحرية الوصول إلى عقليتها وتوفير المزيد من الفهم لمواقفها دون إساءة فهمها أو تحليلها. يمثل هذا أصالة الدراسة الحالية التي تقدم أفكاراً جديدة فيما يتعلق بتكييف نموذج بيك للاكتئاب مع النص المحدد. لذلك، فإن استخدام منهجية نفسية أصلية للتحقيق في الأعمال الأدبية يفتح آفاقاً جديدة للتحليل النفسي في المجال الأدبي.

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