

DEPRESSION AND THE DEVIL OF HELL'S KITCHEN: EXPLORING HOW MENTAL
ILLNESS IS DEPICTED IN DAREDEVIL COMIC BOOKS

by

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Abstract

This MRP explores how depression is depicted in Marvel's *Daredevil* comic books through multimodal metaphors. It seeks to answer the following research questions:

- 1) How do the visual, textual, and spatial elements in *Daredevil* comic books work together to communicate depression?
- 2) What role does depression play within each *Daredevil* comic book narrative?

A close reading was conducted to analyze how depression was communicated in two *Daredevil* comic books that explicitly discuss depression. This project found that characters discussed their mental illness experience through chaos and quest illness narratives, using a combination of visual and textual metaphors. Their accounts resembled medical representations of depression symptoms. The depiction of mental illness within the two *Daredevil* comics suggests that mainstream American superhero comics can both depict mental illnesses in a medically accurate manner and present them as authentic character experiences. This MRP provides a meaningful foundation for future research that explores how mainstream American superhero comics can play a larger role in graphic medicine and mental health communication.

Keywords: comics, depression, mental illness, graphic medicine, illness narratives, superhero

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Introduction

Clinical depression is a mental illness that affects more than 300 million people across the world (WHO, 2017). It is estimated that 8% of adults will experience clinical depression in their lifetimes (CMHA, 2013). 10% to 20% of women experience depression during pregnancy or within the first year postpartum (Shidhaye, 2014). Often described as a chemical imbalance or mood disorder that can cause a persistent feeling of sadness or loss of interest, depression affects each person differently (Mayo Clinic, 2018). Symptoms can range from tiredness and sleep disturbances to anxiety and irritability, but not everyone suffering from depression will experience every symptom or to the same extent (Mayo Clinic, 2018).

Although depression is so prevalent, people suffering from depression find it difficult to articulate and describe their experience. Partnered with the fact that a person suffering from a mental illness may show no external signs of suffering (Lipford, 2017), this makes it difficult for someone who has not experienced mental illness themselves to fully understand what it is like. To help bridge that knowledge gap and externalize their internal struggle, people suffering from mental illness turn to metaphors to communicate their mental state.

Metaphors allow us to tell stories about our experiences in a way that enables others (and ourselves) to better understand our internal state of being. Metaphors for illness allow individuals to think of their disease as something separate and distinct from themselves, which is why metaphors are useful for therapy and health communication (Lakoff & Johnson, 2008). Although metaphors for depression can vary greatly because each person experiences depression differently, common metaphors include darkness, descent, being weighed down by a heavy burden, a lack of control, and being trapped (El Refaie, 2014; Forceville & Paling, 2018). Other metaphors describe depression as a cloud, a storm, a container, a prison, a shadow, a vacuum, a

monster/giant animal, a sudden deceleration or fall, shrinking, heaviness, or entering a wood (Fahlenbrach et al., 2017; Sánchez & Ramos-Bossini, 2020).

Comics¹ is a medium uniquely suited to convey multimodal metaphors because it utilizes a combination of textual, visual, and spatial elements to communicate ideas, emotions, and concepts that are difficult to express in words or images alone. With Comics, readers can see characters' internal and external states of being, allowing the reader to better understand the characters' experiences. Thus, Comics has the unique potential to communicate “invisible illnesses” like depression and post-traumatic stress disorder, where people may appear fine on the outside but suffer internally (Lipford, 2017).

Consequently, healthcare professionals have begun using Comics for patient care and provider education, a practice referred to as “graphic medicine” (Green & Myers, 2010). Graphic medicine can help both the author and the audience better understand illness (Green & Myers, 2010). Whilst graphic medicine primarily focuses on autobiographical narratives (patient testimonials in graphic format) and comics whose primary focus is depicting illness in graphic form (Green & Myers, 2010), little academic research has been conducted on the depiction of mental illness in mainstream American comics, like Marvel's superhero comics, where mental illnesses are part of a larger narrative rather than the primary topic. One of the potential reasons for the scarce academic attention is the prevailing perception that superhero comic books do not

¹ The term “comics” can be used as a singular noun to refer to the medium (e.g. *Comics combines texts and images...*) and can also be used in its plural form to refer to multiple works in the comics medium (e.g. *Daredevil comics are about a blind superhero...*). To avoid confusion, throughout this MRP, I use the capitalized “Comics” to refer to the medium and the lowercase “comics” to refer to the stories told through the Comics medium. I use the terms “comics” and “comic books” interchangeably.

depict mental illness accurately (Crilley, 2016) or that they are associated with immaturity (Chambliss, 2012).

Marvel comics feature a litany of characters who suffer from some form of mental illness—whether explicitly recognised within the comics or not—and who have become more popular since superheroes gained prominence in movies and TV shows. Now owned by Disney, Marvel is a media juggernaut, with its characters appearing in all kinds of media, from videogames and movies to toys and theme parks. Marvel Comics published 44.72% of all comic books sold worldwide in 2019, including 7 of the top 10 comics published that year (Diamond News, 2020).

Chambliss (2012) writes that superhero comics reflect and influence the norms and values of the society that produces them. Understanding how mental illness is depicted within mainstream American superhero comic books can shed light on how society perceives and understands mental illnesses. Considering Marvel’s impact on the media landscape, it is perhaps even more important to specifically examine how Marvel comic books depict mental illnesses.

One notable Marvel character that struggles with depression is Matthew (Matt) Murdock. Matt was blinded by a radioactive substance when he was a child. However, the accident heightened his other senses to superhuman levels, to the point that he can “see” the world using an echolocation-like radar sense, hear other people’s heartbeats, and never forget an odor (Lee, 1964). A lawyer by day and the masked vigilante Daredevil by night, Matt has dealt with disability, doubt, crises of faith, and depression throughout his life. Although *Daredevil*² storylines have been revamped and relaunched multiple times over the years, those struggles

² I use the italicized “*Daredevil*” to refer the comic book series. I use the unitalicized “Daredevil” and “Matt” interchangeably to refer to the character.

remain inherent to his character. People continue to face these challenges today, which may be why the character remains so popular, more than 50 years after his debut.

This major research paper will explore how *Daredevil* comic books depict depression using multimodal metaphors afforded by the Comics medium. Analyzing how depression is depicted in *Daredevil* comic books may contribute to the understanding of how mainstream American superhero comics can be useful resources for mental health communication and can play a larger role within the realm of graphic medicine.

Literature Review

In this section, I briefly define Comics for the purposes of this research paper. I then examine the scholarly discourse on how Comics communicates and how this capacity affords Comics a unique potential in the realm of graphic medicine. I then turn to superhero comics and identify graphic medicine's limited academic focus on mainstream American superhero comics. Finally, I discuss how this research project aims to fill that gap.

Defining Comics

Establishing a definition for Comics is a challenge that many Comics Studies scholars have faced since the field's inception and it continues to be a sticking point to this day. McCloud (1994) defines Comics as a deliberate sequence of "juxtaposed pictorial and other images" (p. 9) that convey information or produce an aesthetic response in the viewer. This definition is broad and perhaps too inclusive, allowing things like visual instructional manuals or picture books to be counted as comics. Furthermore, McCloud avoids addressing the question of whether Comics needs to have some form of narrative element. Meskin (2007) argues that Comics does not necessarily need a narrative connection between panels; the connection could instead be character-based or thematic.

However, many scholars consider narratives to be inherent to the medium of Comics simply because of how we perceive and understand visual content. Williams (2012) writes that when encountering two or more juxtaposed images, human beings have a tendency to extract or impose some form of narrative, even when one does not exist. Wolk (2007) argues that Comics needs a complex or sustained narrative, thus separating single-panel political cartoons or newspaper comic strips from more complex content like comic books and graphic novels. This is an argument that many Comics Studies scholars have critiqued and rejected. However, Tatalovic

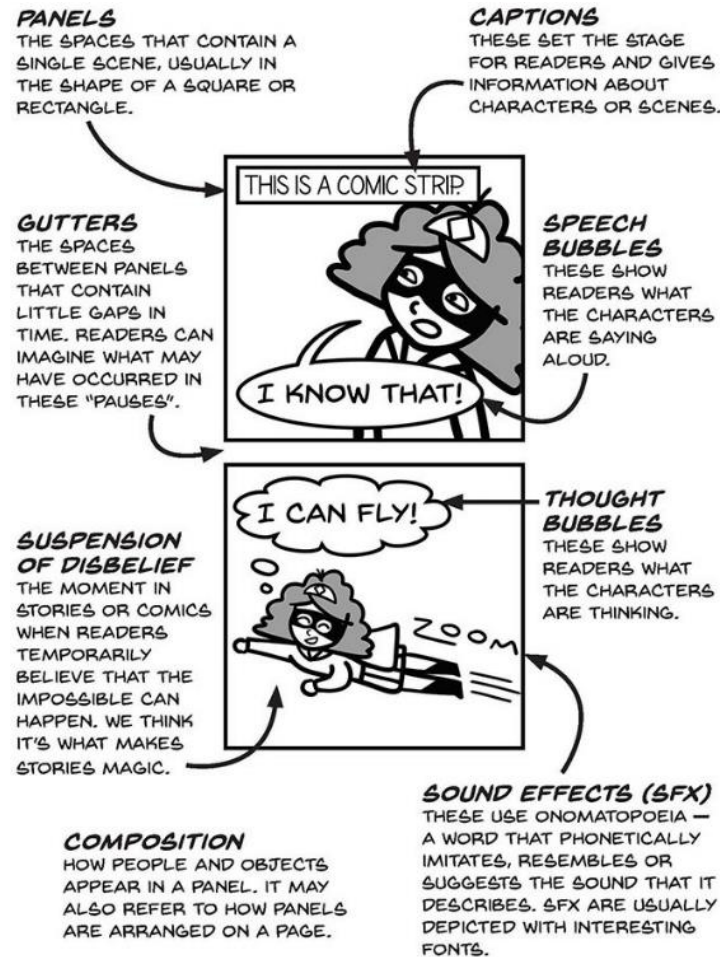
(2009) further adds that comic books and graphic novels should also be distinct categories because of their differences in length and narrative complexity.

Chute (2008) states that comics are word-image hybrids that use two narrative “tracks”—the verbal and the visual—to establish temporality spatially. Similarly, Kukkonen (2013) writes that Comics works as a mode of communication that tells stories using images, words, and sequence. Our brains constantly shift between words and images in comics, creating meaning by relating content to our own personal experiences and thus forming our own interpretations (Sousanis, 2015). However, here again is a point of contention as some scholars argue that Comics does not need text at all; it is possible to have a sequence of images only that can still tell a story and thus be considered part of the Comics medium (Postema, 2013). Indeed, many Comics Studies scholars agree that Comics is a primarily visual medium.

Although there is yet a consensus among scholars on the definition of Comics, for the purpose of this MRP, I combine McCloud’s (1994), Chute’s (2008), and Kukkonen’s (2013) theories and define Comics as a deliberate sequence of juxtaposed pictures or word-image hybrids that establish temporality and spatially tell a narrative.

How Comics Communicates

Comics requires active participation from the reader in order to be understood (McCloud, 1994). Readers are forced to engage with both the verbal and visual narrative tracks and how they interact on the page to understand and produce their own interpretation of the content (Chute, 2008).



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Figure 1 – *Sample illustration of basic Comics elements* (Difference Engine, 2018)

The most basic element of Comics is the “panel,” which represents a single moment frozen in time (see Figure 1). The empty space between panels is known as the “gutter” and is a feature that is unique to Comics. The gutter establishes a connection between juxtaposed panels and enables the reader to establish temporality and narrative.

When looking at an individual panel, the reader takes it to be a snapshot of an event happening “now.” They understand that previous panels show events in the past and upcoming panels illustrate events in the future (McCloud, 1994). The reader’s understanding of “now”

changes depending on which panel they are looking at. However, even when looking at a single panel, the reader is able to see all the other panels on the page. Readers are simultaneously able to experience individual moments of time and experience them in their totality. McCloud (1994) calls this ability “closure.”

Closure forces readers to connect individual moments of time and construct a narrative. How complex that closure is, how much effort it requires the reader to make sense of the content and connection between panels, is influenced by six different panel-to-panel transitions: movement-to-movement, action-to-action, subject-to-subject, scene-to-scene, aspect-to-aspect, and non-sequitur (McCloud, 1994). The first two deal with changes in time, which require little effort from the reader. Subject-to-subject and scene-to-scene transitions deal with changes in time and space, requiring a bit more effort from the reader. Aspect-to-aspect transitions tend to primarily deal with changes in space. Non-sequitur transitions require the most effort from the reader to make sense of as they offer no relationship between panels (McCloud, 1994).

Panels also play an important role in Thierry Groensteen’s (2007) spatio-topical method of understanding Comics. Establishing panels as the most basic unit of his system of Comics, Groensteen identifies three parameters to describe them: form (panel shape), area (panel size), and site (where on the page the panel is located). Manipulating any of these parameters affects how readers understand and navigate content on the page, which Groensteen defines as the “hyperframe” (2007). Page layout, which Groensteen refers to as *mise-en-page*, cannot work with empty panels but “must take into account their contents” (2007, p. 80).

In examining panels along with gutters, margins, and frames (panel borders), Groensteen (2007) further explains how Comics communicates using three main concepts: *quadrillage* (translated as “gridding”), *decoupage* (translated as “breakdown”), and *tressage* (translated as

“braiding”). Gridding divides the page into empty units or compartments, like cells created through rows and columns. Breakdown refers to splitting the narrative into scenes within panels, like individual frames on a film reel. Both breakdown and page layout inform each other; the parameters of a panel depend on its content and the content within a panel depends on *mise-en-page* (Groensteen, 2007). Braiding—which is not necessarily part of every comic—refers to connections between panels based on the content within them. In *The Art of Braiding*, a follow-up article to *A System of Comics*, Groensteen (2016) elaborates on this concept by comparing it to quotations. The most common form of braiding is the repetition of an image or motif, which Groensteen (2016) likens to self-quotation.

Unlike McCloud’s (1994) transitions, Groensteen’s braiding allows for panels to form narrative connections with more than just adjacent panels. Indeed, McCloud (1994) admits that his panel-to-panel categorization is “an inexact science at best” (p. 74). One common objection raised against McCloud’s transitions is that it is unclear what the difference is between an action-to-action transition and a moment-to-moment transition. McCloud clarifies that moment-to-moment transitions showcase action but tend to use several panels to do what action-to-action panels can do in two (McCloud, 1994).

Chris Gavalier (2018) offers a visual analysis method specifically for superhero comics, incorporating elements from McCloud’s and Groensteen’s theories. Doing so allows him to account for the objections raised against either method. For example, Gavalier categorizes the different forms of closure rather than using panel-to-panel transitions (2018). He identifies spatial and temporal closure, which build on McCloud’s transitions. Spatial closure refers to understanding that separate panels exist in a physical relationship to one another. This accounts for McCloud’s aspect-to-aspect, scene-to-scene, and subject-to-subject transitions. Similarly,

temporal closure refers to understanding the passage of time between panels and accounts for McCloud's moment-to-moment, action-to-action, subject-to-subject, and scene-to-scene transitions (Gavaler, 2018).

However, Gavaler also identifies other forms of closure that McCloud's panel-to-panel transitions cannot account for. Causal closure is understanding that an action showcased in a panel happened as a result of something not shown within the panel (Gavaler, 2018). Associative closure is where one image represents something about a subject in a different image. These forms of closure also fit within Groensteen's (2007) semiotic system of Comics and his concept of braiding.

In addition to panels and visual content, text also plays a role in how Comics communicates. Text can take the form of a speech bubble, thought bubble, narration captions or boxes, or onomatopoeia (words that look like the sounds they make, like "Whiz!" or "Splat!"). McCloud (1994) broke down multiple ways in which words and images work together. Word-specific combinations feature images that do not add much context to the text. Conversely, picture-specific combinations are where text in any form does little to add context to the image. Duo-specific combinations are where both the text and the image convey the same information. Additive combinations are where words add context to images or vice versa. In parallel combinations, text and images are unrelated. Finally, inter-dependent combinations are where text and pictures come together to "convey an idea that neither could convey alone" (McCloud, 1994, p. 155).

Inter-dependent combinations are the most common combination in comics and highlight the unique potential of the medium to communicate multimodal metaphors—that is, expressing things in terms of more than one modality of human expression. Building on McCloud's

combinations, Miloš Tasić and Dušan Stamenković (2015) divided multimodal metaphors within Comics into three types: image-dominant metaphors (incorporating McCloud's picture-specific and additive combinations), text-dominant metaphors (incorporating McCloud's text-specific and additive combinations), and complementary metaphors (incorporating McCloud's duo-specific and inter-dependent combinations).

Graphic Medicine

“Graphic medicine” is a term coined by Ian Williams, a physician and Comics artist, to refer to the practice of using Comics for patient care and provider education. It focuses on patient testimonials and autobiographical accounts of illness in graphic form (Green & Myers, 2010). Green and Myers (2010) argue that graphic pathographies—“illness narratives in graphic form” (p. 574)—can help patients learn more about their own illnesses and also find a community of people suffering from the same or a similar illness.

One of the benefits of Comics is that its use of visuals allows it to transcend the language barriers that verbal or textual communication faces. This makes Comics particularly useful for educating patients about illness; regardless of what language they speak, everyone can understand iconography, like pain rating scales or street signs (Green & Myers, 2010). Additionally, the combination of visuals and text within Comics enhances understanding and health information recall, especially in people with low literacy skills (Houts et al., 2001).

Green (2013) further states that graphic pathographies can help understand illness as a “social, political, and narrative construct” (p. 472). In Comics, difficult concepts can be conveyed through textual and visual metaphors, making it easier for readers to understand and relate to the content. The capacity to communicate multimodal metaphors is one of many reasons why Comics has gained attention within the realm of health discourse and education. As Lipford

(2017) writes, graphic medicine comics have the capacity to make explicit “invisible illnesses,” like depression or diabetes, and can depict in visual form symptoms that would otherwise be difficult to express in words.

Similarly, Squier (2009) writes that graphic narratives can articulate “aspects of social experience that escape both the normal realms of medicine and the comforts of canonical literature” (p. 130). Additionally, through their use of visual metaphors, graphic medicine comics can encourage empathy, convey factual information, and help people understand more about the fears and anxieties patients may be dealing with but unable to express (McNicol, 2017).

Another benefit of Comics is that each reader filters content through their own worldview, beliefs, and knowledge in order to be able to make sense of it. They make conscious decisions about moving from one panel to the next and they can work through the content at their own pace, something they cannot do with media like movies (Pratt, 2009). This allows each reader to better empathise and relate to the content in their own unique way (McNicol, 2017).

In most of the reviewed literature, academic research on comics conveying mental health information largely focuses on graphic pathographies and autobiographical accounts of illness in graphic form. Little scholarly research has been done on the depiction of mental illness in mainstream American superhero comics such as those from Marvel. This may be the result of societal bias, in which mainstream superhero comics are considered immature (Chambliss, 2012) and afforded less cultural capital than autobiographical narratives.

Superhero Comics

Before exploring the relationship between superhero comics and mental illness as it pertains to this MRP, I will briefly explain the social environment that produced such comics. In the “Golden Age” of comics (widely considered to be from 1938 to mid-1950), superheroes were

essentially godlike beings that had few flaws (Addis & Troilo, 2016). Immensely popular during World War 2, these comics introduced characters like Captain America and Superman, and featured patriotic stories of good triumphing over evil (History Detectives, n.d.). In fact, the first Captain America comic cover featured the titular character punching Adolf Hitler in the face (Kirby, 1941). After the war however, superhero comics became less popular because evil had been vanquished and readers were not interested in fighting an enemy that no longer existed. Instead, readers became more interested in genres like horror, romance, and crime comics (Superworld Comics, 2014).

In 1954 however, a book by Dr. Fredric Wertham claimed to establish a connection between comic books and juvenile delinquency (Tilley, 2012). Wertham argued that crime and horror comic books desensitized children and made them want to commit violent acts like the characters in the comics they were reading. The U.S. comic book industry was soon forced to establish a censorship bureau known as The Comics Code Authority that ensured comic book content was suitable for children to read.

To try to regain popularity for its superhero comics in the mid-1950s, Marvel introduced an innovation: humanizing its superheroes (Addis & Troilo, 2016). Rather than being near-perfect beings, its superheroes were now flawed, dealing with self-doubts, inner demons, and real-world challenges (Addis & Troilo, 2016). They solved problems using intellect and did not constantly rely on their super abilities. This humanization of superheroes allowed readers to better identify with and relate to the characters, leading to a resurgence of the genre (Addis & Troilo, 2016). This resurgence came to be known as the “Silver Age” of comics.

The Silver Age of comics produced many of the Marvel characters still popular today, such as Daredevil, Spider-Man, Thor, and the X-Men. These characters face real-world problems

that make them relatable to readers, like Spider-Man struggling to pay his rent or Thor squabbling with his siblings. Unlike Golden Age comics, Silver Age comics also prominently featured illness and disability, often incorporating them into the identities of main characters (Alaniz, 2014). Historically, however, superhero comics have had problems depicting illness and disability accurately.

Superheroes and Mental Illness

Wolk (2007) argues that within the realm of comics and metaphors, superhero comics are of particular interest because they feature characters that are themselves metaphors. Superheroes provide metaphors “for discussing ideas or reifying abstractions into narrative fiction” (Wolk, 2007, p. 92) and this can be done best only through Comics.

Many Marvel and DC³ comics have featured characters with some form of mental illness, but few have addressed the subject directly, which may indicate the prejudice and stigma that remains prevalent in society. In fact, in instances where superhero comic books have addressed mental illnesses, they have often done so poorly, relying on stereotypes and clichés. Villains were often shown as ugly, asocial, or broken characters, whose mental illness was simply a precursor to their villainy, whereas superheroes were shown as unstoppable and physically perfect in almost every way (Crilley, 2016).

In many cases, mental illnesses are simply presented incorrectly. For example, since his first appearance as a Batman villain, The Joker has been diagnosed with schizophrenia, post-traumatic stress disorder, and dissociative identity disorder by fictional psychiatrists within the

³ DC Comics is an American comic book publisher whose characters include Batman, The Flash, Superman, and The Joker.

comics (Goodwin & Tajjudin, 2016). However, The Joker fails to meet the necessary diagnostic criteria for any of those illnesses, which suggests that the comic creators either misunderstood mental illnesses or exaggerated their symptoms for dramatic effect (Goodwin & Tajjudin, 2016). In either case, Goodwin and Tajjudin argue that linking The Joker with mental disorders that have no basis in fact can worsen the stigma surrounding mental illnesses.

Despite the unique affordances of the Comics medium as evidenced by the growing field of graphic medicine, mainstream American superhero comic books have often been left out of academic discussion because they misrepresent mental illness and resort to stereotypes or misconceptions. However, superhero comic books have not shied away from depicting physical disabilities.

For example, canonically one of the most powerful mutants in the Marvel universe, Professor Charles Xavier is paralyzed from the waist down and is often depicted in a wheelchair. Unlike villains with disabilities, who were often displayed as deformed or less than human, Xavier is shown as a compassionate mentor and leader of the X-Men. However, even here, portraying disability is not without its problems. Xavier is often depicted statically, passive and helpless (Alaniz, 2014) compared to other characters who are drawn in dynamic poses showcasing movement and energy. In cases where he has been knocked out of his wheelchair, he is often sprawled on the ground, unable to help others or even defend himself.

In one story, Xavier transfers his consciousness into a clone body and is able to walk. Upon standing up from his wheelchair, he immediately exclaims “For the first time in over fifteen years, I am a **whole** man,” (Claremont, 1983, p. 21, emphasis original). Despite his genius-level intellect and superhuman psychic abilities, Xavier still considers himself an incomplete or broken person because of his physical disability. One could interpret this entire

sequence to mean that no matter their strengths or triumphs, a person with a disability will always be less than an abled person.

Thor comics have also featured storylines with disability. In one comic book arc, Odin (Thor's father) wants to teach Thor a lesson in humility. He puts Thor into the body of Donald Blake, a Harvard University medical student with a permanently injured leg (Zelenetz, 1983). When Blake transforms into the hypermasculine Thor, his disability disappears and his cane transforms into Mjolnir (Thor's hammer). When Thor transforms back into Blake, the disability reappears and Mjolnir, a symbol of Thor's power, becomes the cane, a symbol of Blake's disability. The two identities are distinct and almost binary in their depictions; Blake is weak and crippled whereas Thor is strong and muscular. Disability plays a role in Thor's human identity, not his superhero identity (Germaine, 2016).

As Chambliss (2012) argues, superhero comics use the medium to reduce characters into representations of cultural ideas. In doing so, they provide a way to critically analyse and understand U.S. culture through allegories or social commentary (Chambliss, 2012). The way characters with disabilities, whether physical or mental, are depicted in superhero comics represent snapshots of—and can directly influence—societal prejudices and values at the time of publication. For example, Yeich (2015) writes that Marvel reinforced the connection between gay men and AIDS by using it as a plot point in the *Alpha Flight* comic series in 1981.

As society changes, comic book characters and the stories they tell change as well. Even long-standing characters like Spider-Man have changed drastically over time, depending on the societal values at the time, going from a “rather ‘square’ type of individual” (p. 171) to looking like Elvis Presley and hanging out with beautiful women (Berger, 1971).

Discussions of mental health have become more prominent in recent years, and as Crilley (2016) writes, “graphic narratives...can, should, and must forge representations of disability that not only challenge stigma but offer new paradigms for understanding difference” (p. 81). Similarly, better representations of mental illness in mass media could not only reduce stigma but change the help-seeking attitudes of people suffering from mental illness (Goodwin & Tajjudin, 2016).

Given Marvel’s sheer cultural impact on the world and the number of Marvel characters that suffer from some form of mental illness, it is worth examining how Marvel comics depict characters struggling with depression. Doing so will clarify what role mainstream American superhero comics can play in graphic medicine and mental health communication.

Research Questions

Based on the information in the Literature Review, this project will be guided by two main research questions:

- 1) How do the visual, textual, and spatial elements in *Daredevil* comic books work together to communicate depression?
- 2) What role does depression play within each *Daredevil* comic book narrative?

Methodology

In this section, I explain in detail why I focus on two *Daredevil* comics for this research paper and articulate my method of analysis that builds upon the research in the reviewed literature.

Daredevil

My primary interest for this research project was analyzing a Marvel character who suffered from depression in the form of an ongoing struggle, rather than a one-time challenge the character overcomes. Although many Marvel characters like Thor and Spider-Man have had narrative arcs and periods of hopelessness, grief, or numbing apathy, few comic books have talked about depression as openly and directly as *Daredevil* comics.

Created during the Silver Age of comics, Daredevil (Matt Murdock) is one of Marvel's first disabled characters. Although blinded by a radioactive substance when he was a child, Matt's disability in no way hinders his success, either as a lawyer or as a superhero. Unlike Donald Blake's transformation into Thor, Matt's blindness is not hidden away when he changes into Daredevil. Rather, it forms part of his superhero alter ego's identity; Matt modifies his walking stick so it can be used as Daredevil's signature weapon and Daredevil's mask features no eye holes because Matt does not need them (Alaniz, 2014). Blindness is integral to the character, whether he is in costume or not.

There are two valid objections to *Daredevil*'s depiction of physical disability. The first is that Daredevil's abilities nullify his blindness. Although he is blind, his other senses have been heightened to such an extent that he does not need to see. However, there have been many story arcs where Daredevil is limited by his blindness and must find novel ways to approach the problem. For example, in one situation, Daredevil needs to defuse a bomb by cutting the yellow

wire. Despite all his enhanced abilities, Daredevil can only see the world through echolocation; he cannot see the digital countdown display or what colour any of the wires are on the bomb (Soule, 2015). Similarly, his heightened hearing and sense of smell mean Daredevil can suffer from sensory overload easily; villains have used his senses against him on many occasions.

Another objection is that, like all superheroes trying to maintain dual identities, Matt feels the need to act overly helpless in his human identity to avoid being outed as Daredevil. Much like how Peter Parker would purposely act cowardly and weak—to the point that he earned the nickname “puny Parker” (Lee, 1963)—so that no one would even consider that he and Spider-Man were the same person, *Daredevil* comics may have reaffirmed the cultural biases against and stigmatization of the blind by overplaying Matt’s disability (Alaniz, 2014).

For the most part, however, *Daredevil* comics have managed to maintain a sense of balance; the comics neither romanticize his disabilities nor show them as things that stop Matt from living a “normal” life. *Daredevil* comics authentically depict how a character might come to terms with and understand their own disability as well as how others may react to it. This was an important factor in deciding to analyze *Daredevil* comics for this MRP; having seen how the comics depict physical disability, I was interested in analyzing how they used the medium to depict mental illness.

Whilst the *Daredevil* comics contain an overarching theme of depression and struggle, I identified two *Daredevil* comic books that address mental illness explicitly. As such, I limited my analysis to *Daredevil* Volume 4, Issue 7 (published October 2014) and *Daredevil* Volume 4, Issue 10 (published January 2015). Issue 7 discusses Sister Maggie’s (Matt’s mother) experience with postpartum depression while Issue 10 looks at how Matt himself experiences depression.

Although there have been more recently published *Daredevil* comics, I chose to focus on the 2014-2015 series because they clearly and openly discuss depression.

In many comics, characters may show symptoms of mental illness but never have it explicitly addressed within the narrative or even qualify for a medical diagnosis (Goodwin & Tajjudin, 2016), so there may be room for error in interpreting visual, textual, or spatial elements. In the two comics I selected, the characters specifically acknowledge and use the word “depression” to talk about their mental health struggles (Waid, 2014, 2015). This mitigates chances of misinterpreting the content.

Additionally, both comic books are from the same writer, Mark Waid. Waid has experienced depression himself and consulted his mother for her personal account of postpartum depression (Pasquantonio, 2016). The creative team for Issue 7—Waid, Javier Rodriguez, and Alvaro Lopez—also approached Postpartum Support International for more information about postpartum depression to ensure their depiction was accurate (Pasquantonio, 2016).

Lastly, while Issue 7 discusses postpartum depression in the form of one character explaining it to another within the context of the story, Issue 10 takes on the form of *Daredevil*’s internal monologue, explaining his own account of depression directly to the reader. Being able to see both a third-person and first-person account of depression allows for a multi-faceted view and better understanding of how depression is depicted in *Daredevil* comics.

Analytical Approach

For my analysis, I took a two-step approach in keeping with the two research questions guiding this study. Firstly, I conducted an in-depth reading of the two *Daredevil* comics, paying close attention to the visual, textual, and spatial elements and noting how they communicated symptoms of and metaphors for depression. For this stage, I wrote down common symptoms of

depression and postpartum depression as well as visual and textual metaphors for depression based on the reviewed literature, medical websites, personal accounts, and other sources. This served as the foundation on which to study depictions of depression in the *Daredevil* comics.

I then wrote a scene-by-scene story outline for each *Daredevil* comic book to establish character actions, responses, and motivations (where internal thoughts were made explicit). I made note of who was speaking, whom they were speaking to, what they were saying, what they were thinking, what words were emphasized, and what role that played within the overall narrative. Descriptions of depression or its symptoms were noted as I examined dialogue in the form of speech bubbles and narration boxes, making note of which format was used for which purposes. For example, a character suffering from depression may have reduced dialogue, with some panels not having any speech bubbles or verbal character interactions.

Given that Comics is primarily a visual medium, the text alone could not tell the complete story. Consequently, I then analyzed the visual content within each panel using Gavalier's (2018) superhero analysis tools as well as Tasić's and Stamenković's (2015) three types of multimodal metaphors. This allowed me to understand how the visuals depicted depression and what they added to the story that the text could not. For this, I paid close attention to facial expressions, emanata⁴, colour palettes, onomatopoeia, and perspectives, as they can each be used to illustrate a visual metaphor for depression or its symptoms. For example, characters suffering from depression may be depicted in neutral colours to illustrate how

⁴ Emanata are pictorial elements that emanate from a character or object and symbolize something about it. For example, a question mark near a character's head may indicate their confusion while vertical wavy lines over a cup of coffee may indicate that it is hot.

depression makes life lose vibrancy. Additionally, their facial expressions could indicate guilt, shame, tiredness, or other symptoms of depression.

Moving on to the spatial elements, I then examined the panels themselves, taking into account Gavalier's (2018), McCloud's (1994), and Groensteen's (2007) theories of *mise-en-page*, form, area, gutters, and frame thickness. I looked at how the panel shapes and spatial layout complemented the textual and visual content. For example, panels depicting depression could be surrounded by wider gutters than normal, possibly indicating the isolating nature of depression.

The second part of my two-step approach was to analyse how each account of depression in the *Daredevil* comic books fit within Arthur Frank's (1995) framework of illness narratives. Frank identified three narrative types people suffering from illness use to understand their experience and tell their stories: restitution, chaos, and quest.

Restitution narratives portray the illness as something to be overcome through medicine or technology so that the person can return to a normal life—or as close to a life before illness as possible. Chaos narratives forego that element of hope and portray the illness as unending, giving the narrative a lack of sequence or purpose. Due to its nature, a chaos narrative can only be told after the event; a person living through chaos cannot put it into order until they have had a chance to reflect on it. The third type of illness narrative is the quest narrative, which portrays the illness as a means for the person to set out on a journey of self-improvement or transformation of some sort (Frank, 1995).

Frank further split quest narratives into three subtypes: memoir, manifesto, and automythology. In quest memoir narratives, the illness becomes part of a person's life and they often tell their illness narratives "stoically, without flourish" (Frank, 1995, p. 120). In quest manifesto narratives, the narrator calls for some kind of social change or movement. In quest

automythology narratives, the narrative deals with transformation and rebirth following the ordeal, like a phoenix rising from the ashes (Frank, 1995).

A single narrative type may not encompass the entirety of an illness, but the primary purpose of storytelling is its place in the healing process (Frank, 1995). In putting into words their experience, a person with an illness can make sense of it and communicate it to others. Similarly, a person witnessing another's telling of their illness can better understand the world from the ill person's point of view and develop "resonance" with them (Frank, 1995, p. 158).

Although Frank's framework was originally used to explore illness narratives in text or speech, he later turned his attention specifically to illness narratives in graphic form. Frank found that because Comics manipulates time spatially and uses both textual and visual narrative tracks to communicate, this allows Comics to tell chaos narratives as they are happening (Frank, 2016). The reader is placed directly into the chaos and can simultaneously experience it as a past, current, and future event through closure. For chaos narratives told through text or speech, this is an almost impossible feat (Frank, 2016).

Furthermore, because illness in graphic form happens to a drawn character—to something that is separate and distinct from the person telling their illness narrative—the author is free to articulate their experience without the burden of feeling self-conscious about a first-person account (Frank, 2016). On a similar note, Comics can depict suffering and illness through visual metaphors that act as something external to the person experiencing them (Lipford, 2017).

In most restitution narratives, the pain and struggle of the protagonist's recovery process loses its impact because it is ultimately justified by the fact that they are returning to a normal life (Frank, 2016). With illness narratives in graphic form, however, the medium allows authors to show the darker aspects of illness that are often minimised in textual accounts (Frank, 2016).

Although text and prose can make an impact on the reader, “images linger differently” (Frank, 2016, p. 569) in the reader’s imagination, making them more impactful than text alone.

Additionally, a person’s experience of illness is affected by the stories they know and use to understand it (Frank, 2016). Because readers must actively participate when reading comics, making choices about how to interpret and understand the content in their own unique way, Frank (2016) argues that this capacity “underlies these books’ therapeutic contribution to the lives of people living with illness” (p. 577). In providing multiple accounts of depression as experienced and understood by different characters, *Daredevil* comics may be beneficial in helping readers understand and communicate their own struggles with mental illnesses.

Findings and Discussion

Daredevil Volume 4 Issue 7

Narrative

Having rescued her from Wakanda, Daredevil sits down with his mother at the back of the plane that will take them back to New York City. She says he is a good man like his father (Jack Murdock), which prompts Matt to take off his mask and ask her about something that has been troubling him ever since he saw fractured visions of past events in an earlier *Daredevil* issue. Based on his understanding of the fragments he saw, he now believes his father used to beat his mother, which is why she ran away and abandoned Matt when he was a child. Since he only saw flashes of the past, he is not sure of the truth and seeks answers.

He asks his mother why she left. Maggie's head hangs low and Matt reaches out to hold her arm. She says she left to save him, which surprises Matt. He moves his hand up to her shoulder and she holds his hand as she begins her story, which takes place within the comic as a flashback with narration. She explains how she felt anxious and scared soon after giving birth. Her anxiety grew, she didn't sleep for days on end, she barely ate, and she had no patience. She also felt shame that she was letting her son down, that she was failing as a mother because she was unhappy and constantly crying.

Maggie went to visit a doctor but doctors didn't understand postpartum depression during those days. They simply dismissed it as "baby blues" (Waid, 2014, p. 16). Maggie was sick with depression, with a voice in her head—her own voice—echoing that she was the worst mother imaginable. She constantly felt guilty and ashamed, and the more her husband tried to reassure her, the more scared and paranoid she became.

One day, while Maggie was setting the dinner table and Jack was playing with Matt, her paranoia reached a new height. She thought Jack was neglecting her for Matt and that Matt was only there to tear their family apart. Unable to control herself, she dropped the plates and tried to attack them both. Maggie slipped on the food she had dropped and fell to the floor. Jack stood over her, breathing heavily and frowning, confused. She looked back up at him, afraid. (This is the image Matt had seen in his visions). Jack's expression turned to surprise as Maggie got up and ran away.

She ran so she “could be alone with [her] disgrace” (Waid, 2014, p. 19). She knew Jack was searching for her but she just wanted to be alone and die. Eventually, she ended up at a church, which took her in. Maggie tells Matt that with the help of God, doctors, and counseling, she eventually moved away from anger and self-loathing, and directed her energies toward building a “bigger, better world” (Waid, 2014, p. 19).

Here, the flashback ends and the scene shifts back to the present. Maggie still avoids eye contact and looks down at the floor while continuing to hold Matt's hand on her shoulder. She says that although she traveled the world and finally understands what she had been through, she could never come back into Matt's life because she could never overcome her shame. She never wanted to have this conversation because she was worried Matt would hate her. She hopes he can forgive her.

Matt smiles and wonders out loud how he could ever hate her; he didn't even know her. He wishes he had known her because it would have explained so much. Maggie says she was a crazy woman and closes her eyes, folding her hands into her lap. Matt tells her that it was a chemical imbalance and that he has defended lots of clients that have dealt with perinatal issues. Her case was extreme, he says, but as many as 10% of new mothers struggle with it on some

level. He consoles her, telling her that it wasn't her fault, but she still apologises for failing him. Matt holds both her hands in his and smiles; she overcame suicidal depression through faith and sheer force of will to become a force for good in this world. "We should all fail so tragically," he smiles (Waid, 2014, p. 20).

The scene changes as Matt and Maggie arrive in New York. Both climb out of the helicopter, still discussing the same topic. Matt tells her that what she went through happened a lifetime ago. Maggie responds by saying that the wounds are still raw and asks if he can ever forgive her. Matt says they should talk more and she says that would be nice because she would like to have her son back. Matt caresses his mother's face and smiles, saying that he also meant talk as her lawyer since she clearly does not understand the statute of limitations. The comic ends with mother and son hugging each other, two silhouettes embracing in front of a sunset at sea.

Analysis

Two narrative types can apply to Maggie's depression, depending on the time frame: chaos and quest. Because Comics can manipulate time through panels, the reader is able to both experience the chaos narrative as it is happening to Maggie in the flashback and understand that it has already happened and was part of Maggie's overall quest narrative.

When she experiences her depression, Maggie feels scared, alone, and anxious. She knows something is wrong with her, but she cannot understand what it is, even when she goes to doctors for help. All she can experience is guilt, shame, and paranoia. Rather than thinking of her illness as something to be overcome or a means for self-improvement, Maggie completely loses hope. When she flees the house and abandons her family, she is also abandoning hope of getting better. All she wants is to die. This resonates with Frank's (1995) account of chaos narratives.

Additionally, Maggie's story about depression takes the form of a flashback. Having now gone through it, she has had the chance to reflect on the experience. This allows her to form order from chaos, looking back at past events with new knowledge and insight, providing context to the chaos she could not understand at the time. Maggie relates her experience in an almost detached capacity, which fits within the quest memoir narrative format (Frank, 1995).

However, when the church takes her in, Maggie begins an entirely new life, which adheres to the quest automythology narrative aspect of transformation and rebirth following her depression. With the help of the church, her renewed faith, doctors, and counseling, Maggie is able to manage her depression. She pivots her energies "away from anger and self-loathing...and towards a bigger, better world" (Waid, 2014, p. 19).

Note that I use term "manage," rather than "cure" or "overcome" when discussing Maggie's quest narrative. In spite of all the efforts and changes she has made since that period in her life, Maggie still harbors feelings of shame and guilt. She says as much to Matt and her body language as depicted by the visuals—her sad facial expression, avoiding eye contact, hunching over, clasping her hands together—supports this. She still feels as though she failed Matt as a mother.

Matt—serving as an audience surrogate here—immediately reacts with compassion and empathises with his mother. He thinks that Maggie has objectively made a positive difference in the world, which is what the comic implies the reader should think. Matt pokes fun at the situation; if what Maggie has done is such a failure, then he hopes that everyone can fail so tragically.

Comics' ability to prioritize two different narratives tracks simultaneously is brought to focus when Maggie begins her flashback. Through the text—narration boxes instead of speech

bubbles—Maggie discusses her postpartum depression in a relatively straightforward manner, listing symptoms and relying little on textual metaphors. Her symptoms include anxiety, sleep disturbances, loss of appetite, excessive crying, fears of being a bad mother, irritability, and intrusive thoughts of harming her baby. All of these symptoms accurately match medical diagnoses of postpartum depression (Mayo Clinic, 2018). She relays this information with a sense of clarity and detachment that is only possible after having had enough time and distance to make sense of the experience.

For the most part, Maggie's account of depression is supported by panel layout and the visuals. When she begins her flashback and talks about how much she and Jack loved Matt, the visuals use bright colours and a warm colour palette, with everyone in the scene smiling. When she begins talking about her anxiety and other symptoms of postpartum depression, the visuals become darker. In one horizontal panel drawn in shades of red and black, baby Matt is in his crib and Maggie is just a silhouette standing ominously in the doorway, signifying her emotional distance and that fact that Matt may not be safe with her. In another panel drawn in shades of blue and purple, Maggie is standing in front of a mirror and holding her cross, frowning at her reflection.

The visual and verbal tracks of the comic begin to separate when Maggie discusses the night she left. She narrates that she felt paranoid, thought Matt was sent to tear her family apart, and that both Jack and Matt were laughing at her torment (Waid, 2014). The text does not indicate that she had any other symptoms. However, the visuals—particularly a close-up shot of Maggie's eye with red concentric circles around the pupil—indicate that Maggie was hallucinating. Partnered with her other symptoms—especially the paranoia—this indicates that she in fact suffered from postpartum psychosis, the symptoms of which include paranoia,

depression, confusion, hallucinations, and delusions (RC Psych, n.d.; Sit, 2016). Postpartum psychosis affects up to 2 in every 1,000 new mothers (Sit, 2016), making it even more rare than postpartum depression.

Depictions of mental illness in media have often been criticized for misrepresenting symptoms or exaggerating them for dramatic effect. As explored in the literature review, comics have also often misrepresented mental illnesses and portrayed disabilities poorly. Although this *Daredevil* comic can be criticized for perhaps depicting an “extreme” case (to use Matt’s words) of postpartum depression for dramatic effect, it depicts the symptoms of postpartum psychosis accurately and authentically according to medical descriptions of symptoms (Mayo Clinic, 2018; RC Psych, n.d.; Sit, 2016). Additionally, as I will discuss in a later section, the fact that Maggie manages to handle her mental illness plays an important role within the overall illness narrative.

Returning to the visual analysis, rapid flashes of the night’s events are depicted in a 3x4 layout of panels (3 tiers/rows and 4 columns), requiring a series of closures from the reader to make sense of the visual narrative track. In one panel, Maggie is frowning. In another, Jack and baby Matt are playing together. Through spatial closure, the reader can understand that she is frowning at them as well as gauge the relative distance—emotional and physical—between Maggie and her family. The next panel is a closeup of Maggie’s eye with red concentric circles around her pupil, followed by a panel where baby Matt’s face has transformed into a creature with horns coming out of his forehead. In combination with the cross seen in an earlier panel, the reader can surmise that Maggie is hallucinating and drawing on her religious background to feed her paranoia; her mental illness makes her think that Matt is a devil-like creature from Hell who is sent here to destroy her family (Waid, 2014).

In the scenes following the hallucination, the panels depict a closeup of Maggie's hand as she raises it to attack, a plate full of spaghetti breaking on the floor, Maggie's hands scratching Jack as he moves to protect Matt from her, and then a closeup of Maggie's foot slipping on the spaghetti. The use of small panels creates a sense of urgency and speed, telling the reader that these events happen very quickly, perhaps too quickly for Maggie to process what she is doing.

Breaking from this pattern, the next page features a large panel to illustrate Maggie falling, as if to show it in slow motion. It is followed by quick closeups of Maggie's fearful face, Jack's angry and confused expressions, and then Maggie's legs as she runs away. The final panel is a horizontal panel showing Maggie running away from home, with her head in her hands and Jack reaching out to her in the background.

It takes 15 panels and two pages to depict this series of events. As Maggie narrates the story to Matt in the present day, however, she only uses four words (two captions) to tell the same story: "And I..." "...I **ran**" (Waid, 2014, p. 17 – 18, emphasis original). The visuals provide a rich context and tell the story in a way that the text does not, illustrating the power of a visual medium like Comics. Like the text, however, the images alone cannot tell the whole story. Through the arrangement and spacing of the 13 image-only panels, the comic manipulates temporality and illustrates the gravity of the pause between the two captioned panels. To Matt, that pause may only have been a second long. The reader, however, is able to witness all the things left unsaid and can understand how difficult it is for Maggie to recount the experience.

That Maggie is still unable to properly articulate her experience, combined with her closed eyes and head hanging low, tells the reader that she still feels shame about the past. Text is not needed to explain her state of being. Similarly, the visuals in those 13 panels encapsulate the metaphor that depression is a lack of control while also depicting extreme symptoms of

postpartum psychosis; Maggie cannot control her own actions and is fearful of what she may do next. Ashamed of her actions, her psychosis forces her to flee, forgetting even to put on a pair of shoes in her haste. The two pages feature multiple image-dominant metaphors and illustrate how Comics can manipulate spatial layouts and utilize the visual and verbal narrative tracks to effectively communicate mental illness to the reader.

As Maggie talks about wandering the city streets and wanting to be alone with her disgrace so she could just die, the visuals again depict the narrative in a way that the text cannot. Following a 1x4 layout, the four vertical panels show snapshots of Maggie's journey. First, she is running with tears streaming across her face. Then she is walking with her arms wrapped around her sides, her head low. The third panel shows Maggie bent even lower, with a newspaper covering her head as she struggles to walk in the rain. The final panel depicts Maggie sitting on the church steps with her head in her hands.

Moving from left to right when reading the panels, the reader follows Maggie's journey reflected in her posture; Maggie gets lower and lower until she gets to the church steps, which is her lowest point, both literally and within the context of the narrative (this is the worst time in her life). The visuals illustrate that depression is descent or a heavy burden pulling Maggie down. They also indicate that depression is darkness; the colours become darker and more faded as the reader moves from one panel to the next. In the third panel on this tier, it is raining heavily, which reflects the metaphor that depression is a cloud or storm.

In the final panel however, the open church door serves as a source of light in her dark situation. The placement of the caption boxes echoes this sentiment; the text in the first three panels moves in a diagonally downward-right direction, illustrating that depression is descent. In

the final panel however, the caption box is slightly higher than it was in the previous panel, illustrating that this may be the turning point in Maggie's life.

Additionally, even though her situation continues to worsen, Maggie is depicted alone in each panel. She claims that she wanted to be alone so that her "dark thoughts" could "just feed and feed" (Waid, 2014, p. 19). In addition to showing how depression can force individuals to isolate themselves, the visuals also depict how depression—and postpartum depression specifically—affects a person's help-seeking attitudes. One reason why women suffering from postpartum depression do not seek help is because they are unable to disclose their feelings or cannot recognize the symptoms of depression (Dennis & Chung-Lee, 2006). Health professionals who normalize depressive symptoms or act patronizingly exacerbate women's feelings of disappointment, frustration, and humiliation, which in turn reinforces women's reluctance to seek help (Dennis & Chung-Lee, 2006).

Although women may not proactively seek medical help for their postpartum depression, many desire the opportunity to talk about their experience with a nonjudgmental and empathetic listener (Dennis & Chung-Lee, 2006). Not only does this match Frank's (1995) account of how important witness testimony is for a person's illness narrative, but it is reflected in the final panel on the first tier; Maggie is sitting on the church steps, the church door is open, and a priest is standing in the doorway. Maggie tells Matt that the church took her in and didn't press her for details (Waid, 2014). Through the church, Maggie felt accepted, better understood her mental illness, and worked with them to get better. The comic illustrates that empathy is a vital skill to help people suffering from depression get better.

The next tier is a single horizontal panel depicting Maggie in a nun's garb with her hands clasped in prayer, a cross wrapped around her right hand. Bright yellow/gold light shines down

on her from the top right corner, symbolizing spirituality, faith, or God. The panel stretches across all four columns of the top tier, illustrating its importance within the narrative. This is also the panel where the text explains that Maggie was able to “move all that energy away from anger and self-loathing...” (Waid, 2014, p. 19). Following the directional metaphors from the previous tier, the fact that the light is shining down on her from above shows that she has reached a turning point in her life and is no longer headed downward. Incidentally, the way the light is shining down in this panel makes it seem as though it is emanating from the church in the final panel of the tier directly above it.

The final tier on the page is a slightly taller horizontal panel with the caption “...and towards a bigger, better world” (Waid, 2014, p. 19). Again, the text provides vague information whereas the visuals offer specific glimpses of Maggie’s transformation. The reader sees that she volunteered to feed the homeless, took part in protests, and petitioned against oil drilling. The images serve as a montage through Maggie’s quest narrative. The colours support this journey, as the palette moves away from faded colours to brighter hues; yellow, light blue, pink, and light green.

In contrast to the four separate panels showing Maggie’s descent into depression and despair on the first tier of the page, the final panel showing her redemption arc has three images combined into a single cohesive panel. Additionally, each image shows Maggie’s face clearly whereas the separate panels in the first tier had her face hidden by shadows (another metaphor for depression) or her hands (showing guilt or shame). In combination, the text, visuals, and panels show how Maggie changes her life toward the better. Additionally, the overall panel layout and arrangement throughout this issue provides a rich experience for the reader;

sometimes urging them to read panels at pace and at other times slowing things down to emphasize the impact of a certain scene or moment.

Daredevil Volume 4 Issue 10

Narrative

The story opens with Daredevil describing depression to the reader. He refers to it as an inability to reach back out to the people who mean the most to you in the world and are reaching out to you with love and concern. You want to move your arms or call out, but it takes sheer effort just to breathe. He says it is a living thing that feeds on your darkest moods and is always hungry. It drives away anything and anyone that brings joy so that it can grow without interference. It isolates and paralyzes you, leaving you numb, drained, and immobilized.

Having recently faced the Psychic Children, who used their empathic powers to project despair and “stir up and amplify all [his] half-buried shadows” (Waid, 2015, p. 5), Daredevil says that the damage is warm and familiar even though the kids are gone. He feels unable to feel anyone else’s reach or touch. Curled up in the foetal position, he is utterly alone—apart from the man who is about to kill him. Daredevil is aware of the man attacking him (Zebediah Killgrave), but unable to do anything else to protect himself or fight back.

Killgrave’s body emits pheromones that allow him to control anyone who inhales or absorbs them through the skin. His abilities are not all-powerful; exceptionally strong-willed individuals like Daredevil can resist his influence and his pheromones lose their effect if he is too far away from the person he is trying to control. Additionally, Daredevil has been able to fight against Killgrave’s abilities because they rely on sensory manipulation and Daredevil’s blindness limits his sensory input.

However, when Killgrave orders Daredevil to protest, be angry, or put up a struggle, Daredevil cannot even respond because of how far he's fallen into his depression. When Killgrave taunts him to "show me some **fear**" (Waid, 2015, p. 6, emphasis original), it triggers something in Daredevil and he fights back; he knows how to fight fear. Daredevil draws on that initial spark of movement, urging himself to continue that momentum and move away from the shadows. He chases Killgrave away and then heads back to his law office where he runs into Kirsten McDuffie, his girlfriend and partner at law.

As she tends to his injuries, Kirsten asks if Matt is okay. Matt avoids answering and instead asks Kirsten if she has told her father that Matt hasn't yet decided to write an autobiography. She tells him not to change the subject, saying that he seems "off" (Waid, 2015, p. 10). Matt smiles and says he's fine, he just wishes that he could find Killgrave or the Psychic Children before the situation escalates. Kirsten tells him where they might be and Daredevil once again sets out to find them.

Having found the Psychic Children in the arcade, Daredevil realizes that Killgrave got there first. Daredevil begins to fight Killgrave, at which point Killgrave uses his powers to command Daredevil to "**drop dead**" (Waid, 2015, p. 14, emphasis original). Killgrave then escapes. Daredevil resists Killgrave's commands but finds it much harder to do than normal because he is still raw from the emotional damage of dealing with the Psychic Children and still being in close proximity to them.

Despite the deafening house music in the arcade, Daredevil uses his heightened senses to track a heartbeat. He eventually finds one of the children and consoles him, even though Daredevil's own anxiety only grows the closer he is to the child. He tells the child to be brave and point out where the music is coming from; Daredevil has thought of a way to stop Killgrave.

Killgrave, tracking his children through the “spoor of emotion” they leave behind (Waid, 2015, p. 13), finds Daredevil and the child. But before Killgrave can do anything, Daredevil grabs the child and uses his billy club to swing up to where the music is coming from. As the police enter the arcade, Killgrave tries to use his powers to force them to open fire. However, Daredevil turns the music volume up so loud it drowns out Killgrave’s voice. Daredevil then knocks Killgrave out and tells the police officers to take care of the children and be kind, but to keep them physically separated so their powers aren’t as strong.

Later, near the end of the story, Kirsten asks Matt if he is alright after having dealt with Killgrave and the Psychic Children, since they “tore up some **mental floorboards**” (Waid, 2015, p. 19, emphasis original). She wants to ask if he is actually OK or if he’s putting up a façade. Matt tells her that everything is fine and then heads home. He arrives home, hangs up his cane and clothes, and collapses in bed. The comic seemingly ends here, with letters to the editor appearing on the next page.

However, the page after that shows Matt reaching for his phone to call Kirsten. He says he just feels like talking and that she doesn’t have to come over. She replies that she never left. The final scene of the comic is Matt’s door opening and Kirsten thanking him for letting her in.

Analysis

Like Maggie’s account of depression, the narrative format that best suits Matt’s account of depression is the chaos narrative. However, unlike Maggie’s explanation of past events, Matt’s depression is current. He is experiencing his chaos as it happens. The chaotic nature of his illness narrative is reflected in both the text and the panels themselves.

When Matt is describing his depression, the panel borders are thick and hazy instead of the usual clean and sharp borders used in other *Daredevil* comics. Manipulating panel borders

conveys something about the emotional climate in which the narrative is taking place, as well as influencing the entire page's atmosphere (Eisner, 2000). Flashbacks are often depicted in wave-edged or scalloped panel borders, with the resemblance to thought bubbles indicating that events depicted on the page are memories of past events (Eisner, 2000).

The thick and hazy panel borders in this *Daredevil* comic indicate that depression is a difficult thing to articulate or that Matt has trouble recalling these events to the reader. This falls in line with certain symptoms of depression, such as trouble concentrating (WebMD, 2016). The gutter between each panel is also thicker than normal, reflecting the isolating nature of depression and the physical or emotional distance it creates as it drives away anything or anyone that can bring joy (Waid, 2015).

Looking at the text, the reader can see further evidence for the chaos Matt is dealing with and his inability to properly articulate the experience. In trying to tell his story, Matt uses multiple metaphors and describes depression as a living thing, a pit, and blackness. He is trying his best to explain his internal state of being to the reader, yet the use of multiple metaphors may end up confusing the reader instead of enlightening them.

What is perhaps more important is the method through which all this information is communicated to the reader. All the text describing depression is in the form of narration boxes rather than speech or thought bubbles. Both thought and speech bubbles feature pointers, indicating the speaker/thinker in any given scene, but because narration boxes have no pointer, this indicates that they exist outside of the scene depicted in the panel (Gavaler, 2018).

In the first three pages of this comic, it can be argued that both the visuals and text exist outside of time. *Daredevil* explains his depression to the reader through narration boxes, breaking the fourth wall. The visuals support the narration. It is clear that none of this is

happening within the time span of the actual comic story. At the bottom of the third page however, the visuals begin to depict events currently happening in the actual comic story, picking up exactly where the previous comic issue left off. The reader sees Daredevil curled into a ball in front of a storm drain, with Killgrave standing over him, brandishing a wooden plank. The text, however, is still in the form of narration boxes and therefore still exists outside of events within the panel. This duality showcases the unique potential of the Comics medium; the same story is being told through multiple modalities, perspectives, and timelines.

In the story, Daredevil is almost catatonic, unable to think or speak. He cannot articulate his depression and he cannot respond to Killgrave's psychic commands since he is stuck in the depths of his depression. Daredevil is currently living his chaos. However, the narration boxes exist outside of time and are therefore able to provide context; as if Daredevil has had time to reflect on these events and organize them into something that he can understand.

The narration format here raises questions about the narrator and the purpose of narration. The narrator could be interpreted as Daredevil talking to himself or as a meta-narrator solely for the reader's benefit. However, the use of first-person pronouns means that the narrator is Daredevil, helping the reader make sense of the chaos that has been thrust onto him within the comic. This falls in line with Frank's (1995) account of chaos narratives, where the person experiencing the illness can only create a coherent narrative once they have had the opportunity to reflect on the experience and understand that chaos. The comic manipulates the two narrative tracks to visually place the reader within the chaos while using the verbal track to organize it after the fact.

Furthermore, as Frank (2016) noted, a person's experience of illness is affected by the stories they use to understand it. The first-person account of depression in Issue 10 uses

Daredevil's unique perspective to depict the experience. Rather than a generalized description of depression, the comic explains it to the reader through Daredevil's understanding of it, which lends credence and authenticity to the depiction. His understanding is shaped by his experience, which is showcased to the reader through both the text and the visuals.

For example, on the first page, Daredevil does not tell the reader what depression is. Rather, he tells them what it feels like to him. He discusses the people who mean the most to him in the world. They're reaching out to him but he is unable to reach back. He wants to and knows he should, but his arms don't move and he is struggling to breathe. This coincides with metaphors for a lack of control as well as suffocating and adheres to symptoms of depression that include feelings of helplessness and guilt (WebMD, n.d.).

The visuals support this explanation, using Daredevil's unique way of "seeing" the world to highlight exactly how the character is experiencing all of this. The reader sees Franklin "Foggy" Nelson (Matt's best friend) and Kirsten McDuffie (Matt's girlfriend), not as the characters themselves but as pink outlines shaped by Daredevil's echolocation. The reader does not see their eyes or facial details clearly because Daredevil currently cannot. This sequence also highlights Comics' ability to depict first-person experiences of disability that enable readers to better understand it. In the scene, both Foggy and Kirsten are reaching out to Daredevil. However, because the scene is shown from Daredevil's point of view, the characters are reaching out to the reader as well.

Scattered behind them are various objects like pancakes, cups of coffee, crisps, flowers, bottles, and fruits—the smells that Matt uses to identify them. Objects on the left are bright and colourful. As the reader's eyes move from the left side of the panel to the right, the objects lose their colour and begin to look duller and faded. Matt's view of the world—and the reader's view

of the world—is slowly becoming darker and less vibrant, visually showcasing depression in a way that text cannot. Not only is this a visual metaphor for depression, but studies have shown that people suffering from depression display lower retinal contrast gain, meaning they experience world as less vibrant (Bubl et al., 2010). Additionally, people with acute major depressive disorder show lower smell sensitivity and have smaller olfactory bulb volumes than people who do not suffer from depression (Negoiias et al., 2010).

In the next panel, Foggy and Kirsten’s silhouettes are smaller and even less detailed. It’s harder for Matt to identify and connect with them. They’re still reaching out but seem to be growing further away as the darkness grows. Matt is unable to visualise them clearly even though he wants to. In the next panel, the figures grow smaller still until there is nothing; the final panel of the first page is just a black rectangle.

Through the captions on the first page, Matt describes depression using metaphors for a lack of control. Similarly, the visuals echo this sentiment. His friends are shrinking and growing further away from him. The radial patterns in the third tier indicate that Foggy and Kirsten are growing smaller and more distant rapidly, as though they are being sucked out of the panel. Because his radar sense is how Matt sees the world, the darkness indicates that he is no longer receiving—or his brain is no longer registering—any sensory input. The final panel, a black box devoid of any text or visual content, creates a sense of deafening and abrupt silence. Matt’s mind is without sound, colour, smell, or visuals. The darkness is at all-encompassing and empty.

The second page of the comic features a 4x1 layout (four tiers, one large horizontal panel per tier). The panels are all black with nothing but white text in the form of narration. The use of horizontal panels indicates a long period of time; deliberate and stretched out (Gavaler, 2018). As the reader moves down the page, the text moves to the right, drawing the reader’s attention in

a diagonally downward-right direction. Eventually, the reader sees a tiny figure in red curled up into a ball in the final panel on the page.

Without even reading the text, the panel layout and sparse visuals capture multiple metaphors for depression. Depression is descent, darkness, emptiness, and can also be understood to be a heavy burden weighing down on Daredevil. He is in the foetal position, indicating vulnerability and exhaustion. Additionally, the visuals illustrate the metaphor that depression is shrinking, given how small he is. On a page full of large black panels, Daredevil is the only colourful thing: a small red figure surrounded by nothing. The visuals capture the isolating nature of depression and the thick gutters in between each panel reinforce the emotional distance it can create; Daredevil is physically, mentally, and emotionally isolated.

The text echoes these sentiments. It describes depression as an always hungry living thing that feeds on your darkest moods, which is similar to how Maggie described her own depression in Issue 7. Daredevil goes on to say that depression drives away anything that can bring joy or happiness so it can grow without interference. The visuals on the previous page reflect this; his friends slowly shrank out of view until only darkness remained, total and uninterrupted.

Lying in the foetal position, Daredevil explains how depression isolates and paralyzes you, leaving you numb and drained (Waid, 2015). Although the text provides metaphors for depression, the visuals and panel layout are the primary conveyors of meaning here, depicting depression as an authentic character experience and, crucially, showing the reader—not telling them—how it feels.

When Daredevil is being beaten by Killgrave, the text indicates that he cannot feel the pain nor respond to Killgrave's commands. However, the visuals—Daredevil is gritting his teeth and wincing/frowning—indicate that he is, at some level, aware of the pain. The combination of

visual and textual tracks allows the Comics medium to show depression in a way that other media cannot. The reader can simultaneously see what is happening in the scene as it unfolds and has access to Matt's internal dialogue to provide context.

The way Matt describes the events—"I hear pieces of **bone** inside him..." and "I can't move because I have nothing to **push** against. **Nothing**." (Waid, 2015, p. 3, emphasis original)—indicates a sense of detachment. Matt is emotionally numb, unable to feel pain, and mentally disconnected from his physical self, that is how far down the "pit" he has fallen. The pit metaphor embodies a lack of control (being trapped in a prison) and a directional metaphor (he is falling down the pit). Additionally, his lack of control is mirrored in the text when he claims that the only thing he can do is "sink into the blackness" (Waid, 2015, p. 3).

When he eventually begins to fight back against Killgrave, he urges himself to keep moving and not to lose momentum. "Inertia is the **enemy**," he tells himself (Waid, 2015, p. 5, emphasis original). The final tier on the page, in a 1x4 layout, shows how Daredevil musters up the strength to continue fighting. The first three panels focus on his clenched fist in a puddle of water as he urges himself to move. In the first panel, there are ripples in the water emanating from his fist. By the third panel, the water has steadied and the ripples have almost disappeared, indicating how long Daredevil has been stuck in that position. The final panel in the tier focuses on Daredevil's mouth; a hint of a smile appears with the text saying "Okay. That's a **start**." (Waid, 2015, p. 5, emphasis original).

The panels are identically shaped, giving them equal importance within the context of the story. Combined with the text and visuals, this all illustrates the sheer effort it takes Daredevil to overcome his debilitating numbness. The comic illustrates that depression is not easily beaten or overcome. It takes four panels for Matt to do something. Each tiny step takes effort and is just as

important as the last. Matt may not have physically moved in the first three panels on this tier, but his mental state is dynamic and actively trying to force his physical self to follow suit, highlighted by the fact that he is talking directly to and trying to motivate himself.

The difference between Matt's mental and physical self is a point that the comic addresses multiples times within the story. It also showcases Comics' ability to show both a character's internal suffering and their contrasting external appearance (Lipford, 2017). When Kirsten patches him up and asks if he is OK, Matt—avoiding eye contact—smiles and tells her he is fine. Later on, although his “gut clenches with anxiety” (Waid, 2015, p. 16) being near the Psychic Children, Matt acts happy and animated so as not to scare the child he's trying to save. Near the end of the story, even though Kirsten tells Matt that it is pretty obvious he is going through something, he again brushes her concern aside, telling her that he fakes nothing and that life is pretty spectacular (Waid, 2015).

When Matt enters his home, he is finally alone and no longer needs to put on an act for other people. It is here that Matt's entire body language changes; he slouches, his head hangs low, his movements are slow and tired (he just leaves his shirt and tie strewn on the floor where he took them off). Laying on the bed in the foetal position, his body language mirrors his vulnerable mental state for the first time since his monologue about depression at the start of the story. In contrast to the rest of the comic, where scenes are punctuated with Matt's internal monologue through captions, these scenes feature no text, reflecting how exhausted Matt is, both mentally and physically. Additionally, the cold colour palette, using primarily shades of blue and black, symbolizes the cold isolating nature of depression. The comic seems to end on this bleak note, with letters to the editor appearing on the next page.

However, the page after that—usually reserved for advertisements—reopens the story for one last sequence, similar to an after-credits sequence in a movie. Through this surprise twist, this *Daredevil* story uses the Comics medium to full effect, stressing upon its readers the importance of people suffering from depression having some form of support system.

Using just four panels in a 2x2 layout, the comic deftly illustrates the warmth of human connection in sharp contrast to the coldness of isolation and depression. The first panel shows Matt's phone, drawn in shades of blue and black. The next panel shows Matt's hand reaching toward his phone. Here, the hues immediately change to shades of orange and purple. In the next tier, his hand moves back slightly, showing his hesitation. Then he reaches out to pick up the phone; the colours in this panel are much warmer.

Matt calls Kirsten, just wanting to talk. He says she doesn't need to come over, but she says that she never left (Waid, 2015). The penultimate panel on the page is Matt's door opening. The final panel features Kirsten looking directly at the reader—who is experiencing this moment from Matt's point of view—and saying “Thanks for letting me **in**.” (Waid, 2015, p. 23, emphasis original). Panel layout affects the impact of images, with first, centre, and last panels often dominating in superhero comics (Gavaler, 2018). Having Kirsten looking directly at the reader in the final panel on the page creates a lasting impact, showcasing the power of the Comics medium and the importance of seeking help and emotionally letting people in.

Research has shown that gender norms limit men's expression of depression and lead to them concealing their feelings and avoiding seeking help, even when their need is obvious. This leads to a cycle of symptom escalation, where symptoms of depression worsen the more men try to conceal them (Chuick et al., 2009). Symptom escalation makes it harder for men to hide their depression, which allows others to identify their behaviour as exhibiting symptoms of

depression. Intervention by a close friend or loved one can help break this cycle of maladaptive coping; men will accept this form of help even if they avoid actively seeking or asking for help themselves (Chuick et al., 2009).

The *Daredevil* comic illustrates how Matt on multiple occasions refuses to seek help and instead conceals his depression from other characters. It gets to the point where Kirsten can obviously tell he is hiding something (Waid, 2015). Kirsten is persistent in trying to help and support him, which eventually leads to Matt opening up to her. The impact of this moment is made even stronger given the fact that it was foreshadowed in the comic's opening scene; Matt began the story by telling the reader how depression makes it almost impossible to reach out to the people who mean the most to you in the world and he ends the tale by taking that initial step and reaching out to the woman he loves.

Depression's Role in the Narrative

Given how superhero comics can inform and influence public opinion (Chambliss, 2012), I now turn my attention to how the *Daredevil* comics position depression within the narrative. In both depictions of postpartum psychosis and depression, the comics never once romanticize the illness or downplay the character's efforts to overcome it. Mental illness is not shown to be a sign of weakness that only affects certain people; the comics show its effects on both women and men.

The comics also show that depression is not something that can easily be defeated in a single triumphant moment. It takes Maggie years to move away from her depressed mental state with the help of counseling, medicine, and faith. Even after understanding her mental illness, she feels shame and strives for redemption. Similarly, Matt may put on a brave face in public, but he

continues to struggle with his depression even after defeating Killgrave and saving the Psychic Children.

Additionally, mental illness is carefully woven into the narrative as part of the characters' histories and lives, rather than a plot point blatantly shoehorned into the story for dramatic effect. This lends credence to the depictions and makes character actions feel more authentic. For example, Maggie has a Catholic background and so understands her mental illness through a religious lens; her postpartum psychosis convinces her that baby Matt is a demon. Matt's depiction relies heavily on his sense of smell and hearing, and the comic visually showcases this, rather than telling readers through text what it feels like. Each character explains their depression in a manner unique to their life experience. But at the same time, the fact that their visual and textual metaphors share similarities reflects the fact that people suffering from depression often turn to metaphors ingrained in contemporary Western discourse (El Refaie, 2014).

The comics also shed light on the various avenues of support available to people suffering from mental illness. Whether getting support from a close friend or loved one, through counseling or religion, the unifying theme in both comics is the value of empathy. The church accepts Maggie without judgment and listens to her problems in a way that the doctor she visited did not. When Maggie discusses her illness with Matt, whom she feared would hate her because she abandoned him when he was a child, he immediately responds with compassion because he understands her experience. Kirsten realizes that Matt's internal state of being must be raw and empathises with him to understand how she can help him. When Matt encounters the Psychic Children following his run-in with Killgrave, he approaches them with kindness. As depicted in a previous issue, he relates to them by comparing their emotional states to his own experience of anger, loneliness, and despair (Waid, 2014). In fact, the only character that reacts without any

form of compassion or kindness at all—even for his own children—is Killgrave, the villain. By portraying compassion and understanding as qualities of goodness, *Daredevil* comics invite readers to react the same way when interacting with others.

Given that both Maggie and Matt suffer from some form of depression, the comics also indicate that depression may be hereditary, which has some basis in medical research. Although the exact cause of depression is still unclear—it could be down to any number of environmental, biological, chemical, and psychological factors—studies have shown that genetics could contribute to an increased risk of developing depression (Genetics Home Reference, 2020).

In both comics, symptoms of depression were depicted accurately and matched with medical descriptions of depression. However, depicting postpartum psychosis and explaining it as an “extreme” case of postpartum depression may mislead readers into thinking that all forms of postpartum depression involve hallucinations and paranoia. Although the depiction of postpartum psychosis symptoms within the *Daredevil* comic matches medical descriptions of the symptoms (Mayo Clinic, 2018; RC Psych, n.d.; Sit, 2016), misrepresenting it as postpartum depression could worsen the stigma surrounding postpartum depression.

However, as mentioned previously, the fact that the comic shows Maggie overcoming her illness is an important factor within the overall illness narrative; if a person suffering from such an extreme case of postpartum psychosis can get better, then so can people dealing with a similar illness. That capacity gives her illness narrative a sense of restitution, hope, or inspiration for readers. Similarly, through Matt’s internal monologue in Issue 10, the comic shows that depression is not eternal or unending, even if it may feel like that at times. Not only can characters manage mental illness through a strong support system, but they can channel that energy and become forces for good by helping others; Matt as a lawyer and vigilante and Maggie

as a nun and activist. Consequently, readers can infer that it is just as heroic to help yourself get better as it is to help others.

Indeed, examining the Letters Without Fear (letters to the editor) section in Issue 10 makes it clear that Maggie's illness narrative had a positive impact on readers. Issue 7 had dedicated the entire Letters Without Fear section to providing readers with more information about postpartum depression, psychosis, and anxiety (Waid, 2014), with the comic serving as a mass media platform for mental health education. In Issue 10's Letters Without Fear section, Editor Ellie Pyle showcased letters from fans sharing their own experiences with mental illness and thanking the creative team for addressing postpartum depression in Issue 7. Their responses signify the importance of bearing witness to someone's illness narrative, even when that narrative is fiction. An illness narrative does not need to be autobiographical or non-fiction for it to be powerful; as Frank (1995) writes, the purpose of storytelling is its place in the healing process.

Limitations and Future Research

This MRP had a limited scope and only focused on two *Daredevil* comic books that explicitly discussed depression. For a more comprehensive understanding of how *Daredevil* comics depict depression, more comic books can be included in the sample size. These can include comics where depression is explicitly discussed in text or comics where it is implied through textual, visual, or spatial metaphors.

Additionally, future studies can explore not just how characters experience depression, but how other characters respond. In this study, I touched on the various channels of support—both informal and medical—that characters had access to. Studies have shown that the help-seeking attitudes of people with mental illness are affected by overall health literacy skills and the perception of family and friends, among other factors (Suka & Sugimori, 2016). Gaining a better understanding of how other characters respond to mental illness in superhero comics can inform and influence how society responds to people suffering from mental illness. In turn, this can affect how readers seek help from medical professionals.

Stemming from that, future research can also explore how effective mainstream American superhero comics like *Daredevil* are in mitigating stigma and raising awareness about depression. By increasing public awareness of what symptoms of depression may look or feel like, comics as mass media can impact the help-seeking behaviour of people suffering from depression. Additionally, researchers can analyze the various letters to the editor and explore what readers found so helpful about depictions of mental illness in Comics form that other mediums cannot provide.

Other avenues of research include expanding the research scope from focusing solely on depression to including other forms of mental illness as well. Marvel has many characters and

comic books that can be analyzed, including Moon Knight (dissociative identity disorder), Polaris (bipolar disorder), and Jessica Jones (post-traumatic stress disorder), to name a few.

Conclusion

Comics has the unique potential to convey multimodal metaphors through its use of visual, textual, and spatial elements. This makes Comics ideal for graphic medicine or showing illness narratives from multiple perspectives. Although many mainstream American superhero comics have featured characters with disability, graphic medicine scholars have largely focused on autobiographical graphic pathographies rather than comics as mass media due to the way mainstream American superhero comics have often misrepresented disabilities, whether mental or physical. However, this research paper found that *Daredevil* comics that explicitly discussed depression did so in a format that both matched medical accounts of depression symptoms and presented mental illness as an authentic character experience. The comics primarily depicted mental illness using visual and textual metaphors, with the two often complementing each other.

Depicting the characters' internal and external states of being, the two *Daredevil* comics analysed in this study told stories about mental illness as chaos or quest narratives, displaying that mental illness is not permanent nor totally debilitating. Additionally, the comics displayed multiple ways characters with depression dealt with their mental illness, never once romanticizing the experience or belittling the struggle. Reader responses to the comic books' depiction of mental illness illustrated that mainstream American superhero comics can raise awareness of mental illness, reduce stigma, and help readers struggling with their own mental illness. Partnered with the fact that mainstream American superhero comics reach a wider audience than graphic pathographies, this study supports the view that mainstream American superhero comics can—and should—play a larger role in graphic medicine and mental health communication.

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