



DOI: <https://doi.org/10.15688/jvolsu2.2023.4.7>

UDC 81'276.6:61
LBC 81.43.21-55

Submitted: 20.01.2023
Accepted: 03.04.2023

METAPHOR AS A MEANS OF REPRESENTING FIRST-HAND CANCER EXPERIENCE IN ENGLISH TEEN SICK-LIT

Alexandra V. Nagornaya

National Research University Higher School of Economics, Moscow, Russia

James Chike Nwankwo

National Research University Higher School of Economics, Moscow, Russia

Abstract. The present paper is a contribution to the study of cancer metaphors in contemporary English. It focuses on the ways cancer is conceptualized in teen sick-lit, a relatively new genre of children's literature which presents stories of severe illnesses that afflict teenagers, cancer being the most important of them. The analysis is based on four novels that employ the first-person narrative mode. It rests upon the Conceptual Metaphor Theory, utilizing such specific research instruments as the Career of Metaphor Theory (B. Bowdle and D. Gentner) and the concept of metaphorical creativity (Z. Kövecses). The novelty of the research angle is that the paper takes a differentiated approach towards cancer metaphor analysis, first identifying thematic groups relevant to cancer experience and then tracing patterns of metaphor use within each group. The four groups presented in the study are metaphors of cancer itself, cancer patients, diagnostic procedures and treatments, and physical and emotional conditions of patients. It is proved that there are metaphors that demonstrate a strong inclination to reflect only one aspect of cancer experience. Thus, the actively promoted journey metaphor appears suitable only for conceptualizing procedures and treatments, while war metaphor proves versatile. Further on, the paper analyzes instances of the war metaphor use proving that far from being obsolete, it has a considerable conceptual and communicative potential and can be developed further.

Key words: teen sick-lit, metaphor, Conceptual Metaphor Theory, cancer experience, cancer metaphors, war metaphor.

Citation. Nagornaya A.V., Nwankwo J.Ch. Metaphor as a Means of Representing First-Hand Cancer Experience in English Teen Sick-Lit. *Vestnik Volgogradskogo gosudarstvennogo universiteta. Seriya 2. Yazykoznanie* [Science Journal of Volgograd State University. Linguistics], 2023, vol. 22, no. 4, pp. 86-100. DOI: <https://doi.org/10.15688/jvolsu2.2023.4.7>

УДК 81'276.6:61
ББК 81.43.21-55

Дата поступления статьи: 20.01.2023
Дата принятия статьи: 03.04.2023

МЕТАФОРА КАК СРЕДСТВО РЕПРЕЗЕНТАЦИИ СУБЪЕКТИВНОГО ОНКООПЫТА В АНГЛОЯЗЫЧНОЙ ПОДРОСТКОВОЙ ЛИТЕРАТУРЕ О БОЛЕЗНЯХ

Александра Викторовна Нагорная

Национальный исследовательский университет «Высшая школа экономики», г. Москва, Россия

Джеймс Чайк Нванкво

Национальный исследовательский университет «Высшая школа экономики», г. Москва, Россия

Аннотация. Статья посвящена изучению метафор рака в современной англоязычной культуре. В центре внимания находятся способы концептуализации рака в так называемой подростковой сик-лит – относительно новом жанре подростковой литературы о тяжелых заболеваниях у подростков, преимущественно о

раке. Исследование проводилось на материале четырех романов, написанных от первого лица. Общим методологическим базисом работы послужила теория концептуальной метафоры, в качестве частных исследовательских инструментов используются теория жизни метафоры (Б. Баудл и Д. Гентнер) и теория метафорической креативности (З. Кёвечеш). Новизна представленного в статье подхода заключается в том, что метафоры характеризуются дифференцированно: сначала определяются релевантные для онкоопыта тематические группы, а затем выявляются метафорические паттерны, характерные для каждой группы. В работе рассмотрены четыре группы метафор: метафоры рака как болезни; метафоры для обозначения онкопациентов; метафоры, репрезентирующие диагностические и терапевтические процедуры; метафоры, концептуализирующие физическое и эмоциональное состояние пациентов. Показано, что некоторые метафоры специализируются на обозначении одного аспекта онкоопыта: широко продвигаемая в современных дискурсах метафора путешествия валидна исключительно для концептуализации процедур, в то время как военная метафора демонстрирует тематическую универсальность. Доказано, что военная метафора не устарела и сохраняет значительный концептуальный и коммуникативный потенциал для развития.

Ключевые слова: подростковая литература о болезнях, метафора, теория концептуальной метафоры, онкоопыт, метафоры рака, военная метафора.

Цитирование. Нагорная А. В., Нванкво Д. Ч. Метафора как средство репрезентации субъективного онкоопыта в англоязычной подростковой литературе о болезнях // Вестник Волгоградского государственного университета. Серия 2, Языкознание. – 2023. – Т. 22, № 4. – С. 86–100. – (На англ. яз.). – DOI: <https://doi.org/10.15688/jvolsu2.2023.4.7>

Introduction

Cancer is known to have been plaguing humankind since time immemorial. It has become such an inseparable part of our somatic biography that it can be regarded as “our desperate, malevolent, contemporary doppelgänger” [Mukherjee, 2011, p. 37]. Despite its omnipresence, until recently it did not possess a cultural visibility and was surrounded by multiple communicative restrictions. Since the 1970s, however, cancer has come out of the communicative underground to become one of the most widely and openly discussed social issues in western countries. Not only does the topic of cancer permeate professional medical discourses, but it has inspired a plethora of studies in the humanities that deal with the anthropological, cultural, sociological, psychological, historical, and linguistic aspects of this disease. It has generated a rich and variegated lay discourse practice welcoming all forms of expression in the media, primarily on social networks. It has engendered a special type of activism aimed at raising public awareness of cancer and promoting cancer literacy. More importantly, it has inspired writers and poets, artists and sculptors, musicians and film directors who give cancer a human face by exploring the existential experience of suffering behind the official medical diagnosis. A particularly notable trend in this sphere is the emergence and promotion of cancer fiction aimed at adolescents

and featuring their peers who are going through the ordeal of the disease. This type of literature has become the focus of the present study.

Material and methods

Teen sick-lit as a cultural phenomenon

To the best of our knowledge, the term “teen sick-lit” was coined by Julie Passanante Elman in 2012. It refers to “emotionally evocative stories about teen illness” [Elman, 2014, p. 96]. The formation of this genre is closely associated with the Dawn Rochele series by Lurlene McDaniel, whose publication started in the 1980s. The series features a 13-year-old girl who has been diagnosed with cancer and is fighting for survival through rounds of painful treatments, relapses, and psychological traumas [McDaniel, 2000].

Although sick-lit covers a variety of health conditions and even explores the teen suicide issue, the most popular topic is cancer. It has gained so much prominence that some literary critics accuse teenage fiction of having become “a branch of oncology” [Peet].

Typically, sick-lit “fuses illness and romance” [Elman, 2012, p. 175] featuring a young girl affected by cancer and falling in love with an able-bodied boy, who, in a way, becomes a treasured prize for her stoicism in the face of the disease.

Elman identifies several features of sick-lit that account for its popularity and guarantee it a

reliable niche in the contemporary culture. Firstly, it has a considerable didactical potential, introducing teenagers to the challenges of real life and contributing to their emotional maturation [Elman, 2014, p. 96]. The latter seems particularly relevant in the current cultural climate which celebrates emotional intelligence and cultivates empathy as an unquestionable social value. Secondly, this type of literature is educational. It usually possesses a high degree of medical accuracy in the descriptions of symptoms, treatments, and procedures, as well as their side-effects. In many cases, this accuracy stems from the background of the authors who have either formal training in oncology or first-hand experience of cancer, often supplemented by extensive research aimed at achieving an acceptable level of scientific authenticity. Elman also writes of the socially normalizing function of sick-lit, pointing out its propensity to reinforce the culturally licensed ideals of “ablebodiedness, heteronormativity, emotional management, and maturity” [Elman, 2014, p. 175]. Hence, sick-lit can be interpreted in the Foucauldian sense as an age-appropriate means of promoting biopolitics and establishing biopower.

Popularity does not make sick-lit immune to criticism. Critics accuse writers of “marketing” the disease [Testoni et al., 2016] capitalizing on teenagers’ morbid curiosity and unhealthy fascination with death. Another important point is that cancer is unduly romanticized. This tendency is strongly linked to the didacticism of sick-lit. Sick characters are represented as inspirational figures, “vehicles for others’ spiritual growth” [Kumbier], “spiritual belltops” and “carriers of experience from which others can benefit” [Spelman, 1997, p. 8]. This approach largely distorts the real picture, marginalizing and stigmatizing weakness and despair, which are often experienced by cancer patients. Moreover, it lays an extra psychological burden on potential cancer victims forcing them to comply with the cultural expectations and display cheerfulness and supernatural resilience in the face of death [Perusek, 2012].

Perhaps in response to this criticism, sick-lit has undergone some noticeable changes over the last decade. It no longer necessarily relies on the pairing between a sick and an able-bodied character, often featuring fellow-sufferers. The love-line has lost its prominence, the plot

focusing on the existential experience of suffering. The once obligatory third-person narrative mode is often replaced with the first-person perspective adding authenticity and relatability to the story. There is more realism in portraying characters, who are allowed to feel angry and frustrated about their disease and who are not guaranteed a stable remission.

Teen sick-lit is badly understudied due to its relative novelty and controversial character. As far as we know, it has never been approached from the linguistic perspective. The present paper aims to fill in this research gap focusing on an important feature of teen sick lit – the use of metaphors.

Metaphor as a means of conceptualizing cancer

Metaphor is widely acknowledged as an indispensable tool for understanding and verbalizing cancer. The need for metaphor stems from the very nature of cancer: not only is it too much of a cognitive challenge to lay people, but to a great extent it is still a mystery for medical professionals. Metaphor is supposed to unveil this mystery, establishing conceptual landmarks in the elusive reality of cancer, and enabling communication about it.

The research presented in this paper rests upon the Conceptual Metaphor Theory [Lakoff, Johnson, 1980], within which metaphor is seen as a mechanism of thought rather than a mere speech ornament. The basic tenet of the theory is that metaphor establishes a link between elements of old knowledge and experience (source domain) and something which is unknown and has to be cognized (target domain). The linking of the two domains enables us to achieve a rather wide range of cognitive and communicative goals. Firstly, it helps us to give cancer tangibility by associating it with a familiar object or phenomenon. This tangibility potentially makes the experience of cancer more manageable, because once you understand what your disease is like, you can work out a behavioral strategy to deal with it. For instance, by thinking of cancer as *a gun to your head* you brace yourself for living under constant threat and begin thinking of ways to minimize it. Secondly, metaphor can perform the explanatory function, enabling you to understand the nature of cancer and its inner logic. Thus,

by presenting cancer as a weed that tends to grow deep unremovable roots to steal nutrients from cultivated plants and grow multiple new sprouts you create a simplistic, but valid image of cancerogenesis [Rosenberg, 2020, p. 7]. Thirdly, metaphor enables articulation and communication of cancer experience. Official medical terminology is conceptually deficient and communicatively inadequate as it cannot convey the nuances of the individual experience of suffering and does not evoke an emotional response from the listener. Even medical professionals now admit that no two cancers are alike, and neither are two cancer patients. There is significant variation even when it comes to symptoms, the course of the disease, response to treatments and other more or less objective signs. As for the “insider view” of cancer, the purely somatic aspects of the experience are further complicated by emotional reactions, which are irreducible to medical concepts and can only be successfully captured by metaphor. For instance, by calling cancer *a tornado* the patient effectively conveys its destructive potential not only for the body, but for the psyche as well. A less significant, but still relevant, function of metaphor is that it can tone down cancer communication making it less intense and stressful and creating conditions for a very specific type of humor. Thus, a *Reddit* user, who has hepatoblastoma, refers to himself as a *cancer landlord*, explaining that he just *provided housing* to the tumor and implying that he did not guarantee it heartfelt hospitality. Ridiculing cancer can become an efficient coping mechanism for some patients [Demjén, 2016].

The content of cancer metaphors has long been the subject of linguistic scrutiny. Of particular note is research conducted by scholars from Lancaster University who look into the patterns of metaphor use, discuss the applicability of different metaphors in various contexts [Semino et al., 2018], and study the cognitive and psychological effects of metaphor use [Hendricks et al., 2019].

It has become common knowledge that the most popular and influential in cancer discourse are war and journey metaphors, quest and dance metaphors following suit [Frank, 2013]. Most of the research effort is concentrated on the analysis of war metaphors and their acceptability in the conceptualization of cancer. Following Susan

Sontag’s claims against war metaphors [Sontag, 1978], scholars attempt to invalidate them accusing them of alienating patients from their own bodies, stigmatizing those who fail to positively respond to treatments and ultimately die, imposing an aggressive behavior mode instead of encouraging patience and long-term thinking, justifying unnecessarily cruel treatment strategies, excessively romanticizing cancer survivorship, etc. Most researchers argue strongly in favor of journey metaphors, which are meditative, value neutral, long-term oriented, with a strong focus on the quality-of-life issues.

The war vs. journey controversy has never been exclusively the domain of linguistic analysis. The benefits and drawbacks of each metaphor are actively discussed by culture studies specialists, sociologists, medical professionals and journalists, as well as cancer patients themselves. These two metaphors have attracted so much specialist’ and lay people’s attention that other conceptual forms have remained largely invisible and badly understudied. Meanwhile, even a cursory glance at cancer narratives reveals a plethora of metaphors which need cataloguing and analyzing. A particularly productive line of research here could be the study of contemporary fiction which touches upon cancer issues, teen sick-lit being one of its most promising genres.

Research material and research objectives

This research is based on four novels: *The Fault in Our Stars* by John Green (2012), *Zac and Mia* by A.J. Betts (2013), *The Honest Truth* by Dan Gemeinhart (2015), and *Wink* by Rob Harrell (2020). All the books meet the following criteria: 1) they have been published roughly within the last decade and reflect the current trends in construing cancer narratives for teenagers; 2) they are written in the first-person mode to mimic a confessional narrative, as well as the cognitive and linguistic style of teenagers; 3) they possess a fair degree of metaphorical density, consistently employing metaphors in describing different aspects of cancer experience.

The research objectives are two-fold: 1) to identify the aspects of cancer experience that are metaphorically relevant and reveal the main metaphors that are used to convey them; we would like to emphasize that a differentiated

approach aimed at structuring cancer experience has never been used so far; 2) to analyze the degree to which the narratives under study depend on war metaphor.

Research methodology

As has been stated above, the general methodological framework for the present research is the Conceptual Metaphor Theory. Within this wide approach, several research instruments appear most relevant. The first one is the developmental view of metaphor presented by B.F. Bowdle and D. Gentner in the Career of Metaphor Theory [Bowdle, Gentner, 2005] and supported by G. Steen [Steen, 2007]. Metaphor is regarded as part of a continuum of conceptual forms, simile being the necessary experimental step in its formation and a prerequisite for its entrenchment. We follow this integral approach and include similes in our analysis.

Another important analytical instrument is the concept of metaphorical creativity proposed by Z. Kövecses. Metaphorical creativity is defined as “production and use of conceptual metaphors and / or their language representations” [Kövecses, 2015, p. 97]. Creativity at the conceptual level manifests itself in the discovery of previously unused source domains or aspects of the traditional source domains which have not been utilized so far (e.g. *cancer is a social dysfunction*). Creativity at the language level consists in experimentation with the verbal representation of the metaphorical mapping, perhaps the simplest case being variation in the morphological structure of the word (e.g. *cancer is a beast – cancer is beastly*).

Metaphors themselves were collected manually with the continuous sampling method based on the Metaphor Identification Procedure (MIP) [Pragglejaz Group..., 2007]. The metaphors in the sample were classified into four thematic groups: metaphors of (1) cancer as a disease, (2) cancer patients, (3) diagnostic procedures and treatments, (4) physical and emotional conditions of cancer patients. Further on, we made up a group of war metaphors across the thematic groups in order to trace the main trends in their use in accordance with our research objectives.

The continuous sampling yielded 437 relevant metaphors (175 in (Green), 106 in (Betts), 57 in

(Gemeinhart), and 99 in (Harrell)), only a limited number of them are presented in this paper. The study is qualitative, statistical analysis pertaining to the distribution of metaphors across source domains and thematic groups is beyond the scope of the present research.

Results and discussion

“A slithering eel of insidious intent”: metaphors of cancer as a disease

Cancer metaphors display great variation in their referential scope making up a continuum from very semantically general to very specific conceptual forms.

Perhaps the least specific is the metaphorical representation of cancer as a possession, which can be seen in multiple examples where the disease is construed as something that a person can *have* or *get*: *my right eye is where I had my tumor* (Harrell, p. 30); *“Mia, one in two people get cancer,” I say. “We’re just getting ours out of the way early”* (Betts, p. 79).

The metaphorical character of such contexts is not immediately obvious as treating the body and everything associated with it as a piece of property has long been a western cultural convention. However, as multiple philosophical reflections reveal, this type of perception is counter-natural and is based on the famous body-mind dualism, which engendered a split between two modes of somatic experience, “being a body” vs “having a body”. The first mode is the basis for a holistic type of identity in which the body is incorporated in the self-image. In our case, the body is a diseased one, burdened with cancer. Being such a body means accepting cancer as part of oneself: *And what is my cancer? My cancer is me. The tumors are made of me. They’re made of me as surely as my brain and my heart are made of me* (Green, p. 216).

This inseparable connection can be conceptualized through a more concrete metaphor **CANCER IS CONSTRUCTION MATERIAL**. On the one hand, it can present the tumor as an inalienable part of the body only, an essential component of its make-up: *my body is made out of cancer* (Green, p. 225). On the other hand, it can be seen as a constitutive element of the identity. This instantiation of metaphor is

especially apt in describing leukemia, which, unlike most other cancers, cannot be localized and encapsulated, taking up all the body space and becoming somatically omnipresent: *Leukemia gets into the blood and lungs, heart and stomach. It's **everything that makes him who he is*** (Betts, p. 253).

The metaphorical character of the “have cancer” mode becomes more pronounced in contexts, where the predicate *have* is replaced with paradigmatically associated, more specific units: *even though you **HAD FREAKING CANCER** you give money to a company in exchange for the chance to **acquire YET MORE CANCER*** (Green, pp. 19-20). This context vividly demonstrates the potential of the possession metaphor, allowing for such metaphorical experiments as *to own cancer / the owner of cancer, cancer proprietorship, to obtain cancer, cancer belongs to me*, etc.

Another metaphor on the less specific side of the spectrum is CANCER IS AN EVENT. The eventfulness of cancer is two-fold. On the one hand, like any other disease, cancer unfolds somatically, manifesting itself as a complex of bodily events that can be registered and analyzed. On the other hand, it can affect a person psychologically and socially marking a certain period in their life and becoming a biographical landmark. It is in the latter sense that eventfulness is represented in our sample. For the sick-lit characters, life becomes divided into a pre-cancer, cancer and – in the best-case scenario – post-cancer periods: *long before his tumor* (Betts, p. 206); *Before cancer, my friends and I <...>* (Betts, p. 224).

This generally recognized division turns cancer into a kind of existential attribute, sometimes enabling jokes. Thus, a coach who runs therapeutic sessions for teenage cancer patients and likes to draw from his own experience of testicular cancer is ironically described as “*exploring his concertastic past*” (Green, p. 5), the word “concertastic” being a trendy blend, which combines the name of the disease with a cut-off version of “fantastic” (cf.: *craptastic, goat-astic (a brand of goat cheese), elephant-astic (a day visiting elephants), mint-astic (brand of tea), fruit-astic (recipe for fruit leather)*).

It should be noted that conceptualized as an event, cancer acquires a certain duration, which

normally presupposes a starting point and an endpoint. The connection between these two points, which would metaphorically mean completion (cf.: all through the lecture / morning show / film / book / debate / wedding reception, etc.) often appears unattainable in the case of cancer: *I think my school friends wanted to help me **through my cancer**, but they eventually found out that they couldn't. For one thing, there was **no through*** (Green, p. 45). Cancer as an event is potentially divisible into episodes, which Rob Harrell quite predictably terms “*cancer moments*” (Harrell, p. 30).

Once cancer is metaphorized as an event, it invites the use of predicates that emphasize its dynamic character: *the invisible reality **going on inside of me*** (Green, p. 97).

Toward the middle of the metaphorical spectrum is the CANCER IS A LIVING BEING metaphor. It can be represented in a rather generalized manner with predicates that denote intentional actions that require both volition and a certain type of anatomy: *the leukemia **comes back anyway*** (Betts, p. 29); *Your cancer is **not going away**, Hazel* (Green, p. 116) *the tumor **holding tight to the artery it had wrapped itself around*** (Betts, p. 158).

Some contexts profile the malicious intent of the living being without specifying its type: *Osteosarcoma sometimes **takes a limb to check you out**. Then, if it likes you, **it takes the rest*** (Green, p. 18); *Mum doesn't know the way sickness **wraps around you**. How **it'll crush you if you let it*** (Betts, p. 269).

Much more interesting, however, are subordinate metaphors, which are either anthropological or zoological.

The former find their most direct manifestation in the following context, where cancer is not only personified, but somewhat exonerated and its presence in the body is justified: *Even cancer **isn't a bad guy** really. Cancer just **wants to be alive***” (Green, p. 246). The latter are more diversified and represented with different animal images. Particularly intriguing is the extended metaphor in which cancer is likened to a fierce and tenacious dog: *My own cancer was **a dog at my ankle, refusing to let go**. I'd thought that all cancers were like that, **gripping fiercely at bone until cut free and disposed of*** (Betts, p. 253). This metaphor

profiles the qualitative characteristics of the cancer experience, the persistence of the disease, the need for extreme measures.

In another case, the zoological metaphor profiles the dynamic properties of cancer focusing on its propensity to spread throughout the body. The author uses the image of an eel, whose sleek and flexible body allows for considerable dexterity when it comes to negotiating complex convoluted terrains: *I imagined the tumor metastasizing into my own bones, boring holes into my skeleton, a slithering eel of insidious intent* (Green, p. 86).

Zoological metaphor can also be represented with predicates that denote different aspects of animal anatomy, physiology, and behavior. In our sample, cancer is given the ability to consume the body like food: *I mean, it was the tumor. It ate her brain, you know?* (Green, p. 173); *bald kid with the disease eating away at him* (Gemeinhart, p. 165).

At the same time, cancer can be represented as a plant which takes root within the human body and begins to grow uncontrollably: *He had composure when it mattered, even with that tumor branching out, taking hold* (Betts, p. 193).

Remarkably, one context can combine genetically different conceptual forms, exemplifying the potential of mixed metaphor in conveying the subjective perception of cancer. Thus, in the example below cancer is represented as a living being capable of deliberate action, showing behavioral traits typical of animals, full of malice and, at the same time, as a plant: *With the destruction it brings, cancer should come howling into a body with sirens wailing and lights flashing. It shouldn't be allowed to slink in and take root in someone's brain like that, hiding among memories* (Betts, p. 193). Mixed metaphors, as we showed elsewhere [Nagornaya, 2013], are an especially potent tool of conceptualizing complex bodily phenomena which are irreducible to a single standard. The experience of cancer, undoubtedly, belongs to this group. One more semantically specific metaphor which deserves attention is CANCER IS A BUSINESSMAN. We tend to see it as a manifestation of metaphorical creativity as it offers a very unusual view of cancer by exploring a previously unused source domain. In this structural metaphor cancer's propensity to

metastasize is linked to the expansion that any business strives for. To make the metaphor even more dramatic, the business itself is presented as predatory, with capturing someone else's property being its main aim: *Like, cancer is in the growth business, right? The taking-people-over business. But surely you haven't let it succeed prematurely* (Green, p. 32).

One of the most interesting examples in our sample is the creative metaphor CANCER IS A COUNTRY. It is evocative of Susan Sontag's famous idea that falling ill is taking temporary residence "in the kingdom of the sick" [Sontag, 1978, p. 3]. This time, however, the author changes the type of governance, making this country a republic and giving it a name: *the Republic of Cancervania* (Green, p. 25). The status of a republic may be interpreted as recognition of the complexity and unpredictability of the disease. In a republic, cancer acquires "civic freedoms" impossible in a kingdom. It should be mentioned, however, that the author is not particularly consistent in the use of this geopolitical metaphor, because in another context the republic turns into a city while retaining its name: *the Secret City of Cancervania* (Green, p. 272). Lack of consistency can be accounted for by the creative character of the metaphor and hence lack of discursive regulations in its use.

"Mayor of Cancervania": metaphors for cancer patients

We have already mentioned identity issues that arise from the experience of being afflicted with cancer. A valuable theoretical tool here might be the concept of bioidentity, which crystallized within the general framework of biosociality proposed by P. Rabinow [Rabinow, 1996]. Bioidentity can be defined as a type of self-perception within which the disease is acknowledged as an essential part of a person and can be used as a means of self-identification and self-presentation. It does not necessarily mean being a person "who becomes their disease" (Green, p. 32), but it is definitely an opposition to the strongly recommended "people first principle", which demands that the disease should be represented as an optional attribute of a person, rather than their element. Never in our sample do we find the culturally approved formula "child with

cancer". On the contrary, the protagonists of all the four novels routinely refer to themselves and their reference group as "cancer kid(s)" or "cancer person(s)". J. Green also introduces the concept of "cancer self" pointing out its difference from the "healthy self" and emphasizing its ability to form new social connections: *My healthy self looked very little like her healthy self. But our cancer selves might've been sisters* (Green, pp. 96-97).

These are not metaphors, of course, but the bioidentity phenomenon that such contexts exemplify, is at the core of the reflexive process aimed at understanding the existential meaning of the new biological status. This reflexive process often contributes to metaphorical creativity.

Most of the examples here come from J. Green, whose characters often get engaged in philosophical discussions. One of the key metaphors is A CANCER PATIENT IS AN EXPERIMENT, which is also represented in an altered form – A CANCER PATIENT IS A SIDE EFFECT OF AN EXPERIMENT. Both forms take a somewhat scientific look at the physiology of cancer and present a lay version of the mutation theory that accounts for the uncontrollable growth of cancerous cells. One of the characters in the book links this process to the evolution of our species: *"You are a side effect... of an evolutionary process that cares little for individual lives. You are a failed experiment in mutation"* (Green, pp. 192-193). This idea is echoed in the exchanges between the sick teenagers themselves: *"We're all just side effect, right?"* (Green, p. 72). It reappears in a different context when the human life is interpreted psychologically, rather than biologically: *I was beginning to think that I was the subject of some existentialist experiment in permanently delayed gratification* (Green, p. 109).

In the same novel, Green introduces two consecutive novel metaphors A CANCER PATIENT IS A BOMB and A CANCER PATIENT IS A GRENADE. They might seem like representations of the metaphor CANCER IS WAR. However, they do a very different conceptual job, which enables us to take them out of the military context. Instead of referring to the treatments that target cancer cells, which would have been natural within the traditional war frame, the bomb and grenade metaphors are used to describe the impact that the cancer patient may

have on the people that care about them. The explosion moment metaphorically refers to the patient's death and the ensuing destruction symbolizes the profound emotional trauma sustained by the relatives and friends: *Wounded. Like Caroline Mathers had been a bomb and when she blew up everyone around her was left with embedded shrapnel* (Green, p. 98).

The novelty of the metaphor necessitates a preparatory conceptual step of drawing an explicit connection between two domains and giving the reader some time to ponder on it before finalizing the metaphor – hence the simile marker *like*.

The context develops further, though. Inspired by the image that she comes up with when thinking about another cancer patient, the protagonist generates a "customized" version of this metaphor to speak about herself. The context below does not only illustrate the validity of the Career of Metaphor Theory, showing how a simile evolves into a full-fledged metaphor, but vividly demonstrates the mental effort involved in creating a new metaphor, the painful search for the most illustrative association: *"I'm like. Like. I'm like a grenade, Mom. I'm a grenade and at some point I'm going to blow up and I would like to minimize the casualties, okay?"* (Green, p. 99). As the metaphor is novel, its meaning is reexplained and reaffirmed two more times in order to get it properly entrenched in the reader's mind: *I wanted to not be a grenade, to not be a malevolent force in the lives of people I loved* (Green, p. 172); *only now that I loved a grenade did I understand the foolishness of trying to save others from my own impending fragmentation: I couldn't unlove Augustus Waters* (Green, p. 214).

Once the connection has been firmly established and the mapping carefully explained, the new metaphor becomes an efficient and economical means of communication. The grenade metaphor, for instance, is used not only by the protagonist who created it, but by her family as well: *"You are not a grenade, not to us. Thinking about you dying makes us sad, Hazel, but you are not a grenade"* (Green, p. 103).

In teen sick-lit an important metaphorical attractor is the appearance of cancer patients, which is only natural considering the fixation on the looks typical of this age. Some signs of the disease cannot be concealed and make cancer patients visibly different from healthy people,

which makes them feel vulnerable: *The baldness that told the world: This kid's got cancer. It shouted it* (Gemeinhart, p. 46).

This circumstance justifies the introduction of the metaphor A CANCER PATIENT IS AN ALIEN: *The physical evidence of disease separates you from other people. We were irreconcilably other* (Green, p. 144).

This otherness engenders poignant humor, when protagonists liken themselves to easily recognizable natural objects or cultural artifacts and practices. In “Zac and Mia” alone we can find such diverse self-deprecating references as *one of those creepy guys from Guess Who* (Betts, p. 16); *a bald Jabba the Hutt like me* (Betts, p. 32); *steroidal puffball* (Betts, p. 33); *a human Rice Krispy* (Betts, p. 45), *a human light bulb* (Betts, p. 62), *a freak show* (Betts, p. 169).

Equally important is the physical condition of the body as it directly affects the teenagers' lifestyle. While taken for granted when healthy, the body loses its natural transparency when sick and begins to attract an undue amount of attention. As one of the characters points out, *“There is no forgetting myself anymore”* (Betts, p. 197). The body's newly discovered dysfunction prompts metaphors, one of them being A CANCER PATIENT IS A BROKEN OBJECT: *A place where the young and irreparably broken sink into love* (Green, p. 202). Sometimes the focus of the metaphor becomes more specific transferring to the body only: *I really liked my body; this cancer-ruined thing I'd spent years dragging around* (Green, p. 203); *At the very time that his body was beginning to fall apart* (Gemeinhart, p. 159).

Finally, the most creative metaphor in the sample correlates with the geopolitical vision of cancer described in the previous section. In it, the cancer patient is conceptualized as head of the political structure dominated by the disease: *Augustus Waters was the Mayor of the Secret City of Cancervania, and he is not replaceable* (Green, p. 272). The elegance of this metaphor is that, while being sufficiently poetic, it nicely correlates with the plot of the novel: Augustus ailed in style, demonstrating philosophical detachment, wit, readiness to support his fellow-sufferers without pitying them, which made him spiritually superior to many of them. Notably, he was famous for his love of metaphor. As the

protagonist says, *“that kid never took a piss without pondering the abundant metaphorical resonances of human waste production”* (Green, p. 258). The metaphor, then, both acknowledges his uniqueness and reflects his inimitable cognitive style.

**“Limbo between sickness and health”:
metaphors for diagnostic
procedures and treatments**

The procedures that the characters go through are an important aspect of the novels under study, as their descriptions add credibility and relatability to the narratives. Despite their serious and highly specific medical character, they are not immune to metaphorization as they are seen through the teenagers' eyes. This naïve, childish perspective is seen in the associations between medical procedures and simple everyday experiences: *I'm getting nuked like a microwave corn dog* (Harrell, p. 87); *“Yeah,” I said, having been the experimental pincushion myself* (Green, p. 216); *“We'll remove the entire eye and socket... like an ice cream scoop”* (Harrell, p. 52).

Simplicity is the optimal strategy as it ensures immediate comprehensibility and makes the description more dramatic. Thus, talking about the results of the scans aimed at revealing metastases, one of the characters likens himself to a Christmas tree – an image, whose cheerfulness is in stark contrast with the grave consequences of the new diagnostic data: *“I lit up like a Christmas tree, Hazel Grace. The lining of my chest, my left hip, my liver, everywhere”* (Green, p. 214).

In some cases, the young patients deliberately mythologize the procedures, adding a romantic touch to their painful experiences. Thus, the artificial respiration apparatus, which the patient constantly depends on, is described as a “pet dragon”: *I had this pet dragon who was cuddled up next to me and cared enough about me to time his breaths to mine* (Green, pp. 119-120). It is worth mentioning that this constant dependence makes the patient see the appliance as an integral, though unwelcome, component of her body despite its location outside the body space. A short disconnection from it is felt as a sudden *“bodily sovereignty”* (Green, p. 141), and the patient begins to see herself as *“a nonmetallicized creature”* (Green, p. 141).

Descriptions of the patients' mental and emotional responses to the procedures they are subjected to can also be very simplistic and age-appropriate: *I feel like a rabbit in a trap* (Harrell, p. 3); *I feel like a bug on a dissecting table* (Harrell, p. 4).

The sample, however, contains quite a few metaphors that suggest a higher degree of maturity. One of them is CURING CANCER IS FIXING THE BODY. This is basically an instantiation of the mechanical metaphor of the body that was inspired by Cartesian philosophy and has demonstrated remarkable vitality: *You said you'll be fixed soon, yeah?* (Betts, p. 26). The repair efforts can be targeted more specifically at the malfunctioning cells: *"If scientists can propel a robot 560 million kilometers away, I thought at the time, surely they can fix something as small as rogue blood cells in a body* (Betts, p. 37).

Another structural metaphor is CANCER TREATMENT IS A JOURNEY. This metaphor seems to have a significant therapeutic potential as it primes the patient for a lengthy course of treatment. It prompts patience and long-term thinking, thus reducing stress and minimizing unrealistic expectations of a quick solution. A particularly illustrative example here is the mental instruction that a "Professional Sick Person" (Green, p. 38) gives to "an amateur in the field of suffering" (Green, p. 215): *Don't struggle, I want to say. Don't pull the emergency exit lever. Take the pills and, for what it's worth, enjoy the ride* (Betts, p. 41).

Journey is a rich and variegated source domain, which gives the conceptualizer a lot of room for experimentation. The most obvious option is to explore different types of journeys. While in the previous example treatment was a ride, in the next one it is presented as a plane flight with some of its most characteristic attributes: a friendly flight attendant (nurse), episodes of turbulence (extreme bodily discomfort), possible emergency landing (disruption in the course of treatment), etc.: *I hear the newbie arrive. Nina goes through the instructions in her cheerful air hostess way, as if this flight will go smoothly. It won't. There'll be turbulence. Unexpected stopovers. Bad food. Loss of oxygen and moments of sheer panic* (Betts, p. 287).

Another noteworthy metaphor is CANCER TREATMENT IS A TRANSFORMATION. Its

relevance comes from the very nature of some procedures, which are aimed at changing the biological make-up of cancer patients. Thus, a marrow transplant is quite duly perceived as a catalyst of a major change affecting not just the body, but the identity of the recipient: *if my own marrow's been wiped out of my bones and then replaced with a stranger's, shouldn't that change who I am?* (Betts, p. 29). This transformation can be described metaphorically as butterfly metamorphosis, an image imbued with profound symbolism and shaping a positive attitude toward the temporary inconveniences: *"You're just going through a suuuuuper awkward phase right now. It's almost tragic, really – the awkwardness – but you'll grow out of it. Imagine the handsome butterfly that's going to emerge from this horrific cocoon"* (Harrell, p. 43).

At the same time, the sample contains an extremely dark, religiously loaded metaphor CANCER TREATMENT IS LIMBO. In catholic theology, limbo is a place between heaven and hell, inhabited by souls that are neither condemned to eternal punishment nor rewarded with eternal joy. Metaphorically it refers to a dubious status of the cancer patients, ambiguity of the outcomes of treatment, as well as the sometimes-intolerable timelessness that they experience: *I wonder if she senses I'm not as strong as I should be, caught in limbo between sickness and health* (Betts, p. 121); *This isn't real life, it's limbo* (Betts, p. 171).

The narratives under study offer some telling examples of how cancer begins to dominate the patients' life and permeate all the spheres of their existence. Simple everyday pleasures begin to be conceptualized in terms of treatment plans: a visit to the café becomes *Milkshake Therapy* (Harrell, p. 179), small favors and minor privileges turn into "cancer perks" – *"the little things cancer kids get that regular kids don't: basketballs signed by sports heroes, free passes on late homework, unearned driver's licenses, etc."* (Green, p. 23).

To end the section on a realistic note, we would like to point out that cancer treatment can be metaphorized as a gamble to emphasize its unpredictable outcome: *I know those are great odds, but I kept thinking it was a game of Russian roulette* (Green, p. 166).

“The absolutely inhuman nihilism of suffering”: metaphors for physical and emotional conditions of patients

Another metaphorically rich thematic group is made up of contexts that describe the physical and emotional sufferings of the characters related to their cancer experience. Many of the descriptions are highly conventional, e.g. *sharp / flooding / burning / gnawing pain, rolling / kicking / clenching stomach, sinking into depression, seesawing emotions, flooded by anxiety*, etc. Considering the limited size of the paper, we will only focus on the most representative and original metaphors.

An important subgroup is constituted by metaphors of pain. Pain may be “*a blunt and nonspecific diagnostic instrument*” (Green, p. 98), but there is nothing blunt and nonspecific in its metaphorical representation.

The most conspicuous group of metaphors in our sample is PAIN IS A LIVING BEING, dominated by zoological imagery. The approach itself is not original, as animals have been an inspiration for pain discourses since ancient times [Nagornaya, 2017]. However, the animal kingdom is so diverse and animal behavior so varied that the potential of zoological metaphor is almost inexhaustible. Moreover, it might be especially convenient for teenagers as it is easy to understand, relatively simple to apply and hospitable to experimentation.

Its most interesting instantiation in our sample is based on the image of a truly intimidating animal, whose natural ferociousness, coupled with its aggressive mood, metaphorically refers to the intensity of pain: *My headache was a growling grizzly with sharp claws* (Gemeinhart, p. 49). Although the grizzly is never explicitly mentioned again, the protagonist’s headache is consistently described in a way that suggests a big predator: *fierce pain trying to push its way out through my eyes* (Gemeinhart, p. 98); *The headache was sharpening its teeth on the inside of my skull* (Gemeinhart, p. 57).

In parallel with the zoological metaphor, Gemeinhart employs the weapon metaphor, which is another traditional means of conceptualizing pain [Nagornaya, 2012]: *The ache in my head had grown. It stabbed at my skull* (Gemeinhart, p. 18); *My head was*

a broken drum that was still getting pounded with a mallet (Gemeinhart, p. 71).

The interesting twist is that animal and weapon images can be combined within the same context to make up mixed metaphors: *The headache was gnawing on my brain with rusty razor teeth* (Gemeinhart, p. 64). Although mixed metaphors are not uncommon in discourses of pain [Nagornaya, 2013], their presence in teen sick-lit is still notable as it testifies to their conceptual validity and universal comprehensibility, which are questioned by many a scholar.

In the other novels, the personification metaphor is represented with its anthropological variety, suggesting the symbolic presence of a malicious, perversely minded human being: *Later, he would describe it <the pain> as a one-legged fat man wearing a stiletto heel standing on the middle of his chest* (Green, p. 221). A tamer version of this metaphor is based on profiling certain aspects of human behavior, such as the presence of will and the ability to impose it on others: *The pain was always there, pulling me inside of myself, demanding to be felt* (Green, p. 142).

The narratives under study contain a scattering of other metaphors, exploiting the traditional fire imagery, as well as images of explosion and forceful impact. We will provide only one example, notable for its dramatism, which is an extended collision metaphor, describing the effect of chemotherapy: *I felt as if a truck had run over me. Then reversed, tipped sideways, and landed on top of me. There was nothing to do but be pinned underneath* (Betts, p. 18).

A sizeable proportion of the metaphors describe sensations that are not pain per se but are a source of intense bodily discomfort. Chief among them is nausea, which is one of the most infamous and torturous side-effects of chemotherapy. In “The Honest Truth”, for instance, alongside the various motion metaphors (*lurching / rolling / rising / somersaulting / churning / turning / kicking stomach*) and pressure metaphors (*clenching / squeezing stomach*), we find a more complex recurring image of a flopping fish: *my stomach flopping like a fish in the bottom of a boat* (Gemeinhart, p. 22); *my stomach was flopping like a fish in a net* (Gemeinhart, p. 119). Intensified with a fish simile, the conventional flopping stomach metaphor acquires a new dimension: irregularity

of motion, lack of consistent and predictable dynamics, which reinforces the idea of unbearable discomfort.

Among the conceptual forms that convey the emotional state of the cancer patients, of particular originality is the floating metaphor in “Wink”, which describes the sense of confusion and incredulity that comes upon the announcement of the cancer diagnosis: *At that point, my head ever so gently dislodged from my neck and began to float toward the ceiling* (Harrell, p. 51); *It was that floating feeling again* (Harrell, p. 54); *Apparently when bad things happen, you feel like you’re floating* (Harrell, p. 54). What gets salience here is both lack of control typical of this type of movement and the loss of grounding which is metaphorically linked to impossibility of reasonable thinking¹. The floating image further acquires a more concrete shape becoming a balloon: *my balloon head kept slowly rising toward the fluorescent light above me* (Harrell, pp. 51-52). This context demonstrates metaphor dynamics, its ability to appear in different forms while remaining within the same conceptual domain. Incredulity sooner or later gives way to realization, whose suddenness can be so shocking that it may invite very dramatic metaphors. In “Wink” it is metaphorized as an unexpected attack, which has a devastating impact on the newly diagnosed cancer patient: *This came on like a sneak attack. I was fine and then it kind of pounced out of my brain, like... Boom*” (Harrell, p. 139). Another context introduces the attacker, using the age-appropriate image of a boogeyman – an imaginary evil creature universally feared by American children: *that conversation jumped out of my brain like the boogeyman* (Harrell, p. 136).

We have presented only a few metaphors, which convey “*the absolutely inhuman nihilism of suffering*” (Green, p. 281) the most forcefully. We do believe, however, that this line of research deserves greater width and depth as it deals with an extremely important aspect of cancer experience, which is largely overlooked.

“Ancient and inglorious war”: military metaphors

Although the war metaphor has largely fallen out of discursive favor giving way to the

journey metaphor, it appears to flourish in teen sick-lit. Its popularity and frequency in this genre can be accounted for by several factors:

1) the protagonists are often shown in the acute stages of their disease when they have to mobilize their physical and mental resources in order to overcome the crisis. Journey metaphors here would be two meditative and will deprive the patients of the necessary agency: *So his cancer’s back. He’s beat it before. Mark’s always been a fighter* (Gemeinhart, p. 79);

2) military metaphors can be a much more efficient tool in interpersonal communication, especially when it comes to giving instructions and commands: *Come on, Helga. Show some spine and fight back* (Betts, p. 72). Obviously, phrases like *Travel!* or *You must travel!* would be inadequate. The same is true for encouragements and compliments. While *You are such a fighter!* sounds meaningful, *You are such a traveler!* is absolutely ridiculous. Cf.: “*We’re all proud of you, Zac. <...> A real battler*” (Betts, p. 99);

3) war as a metaphorical scenario might have a particular appeal to the rebellious nature of teenagers, for whom conflict is the current *modus vivendi*: *She’s alive, despite everything, kicking and screaming and swearing. Fighting, still* (Betts, p. 209).

War metaphors often occur in the narratives only to become the object of bitter criticism on the part of cancer patients, who find them inadequate and rebut their potency. The arguments provided are semantically valid, as they pinpoint the conceptual weaknesses of the military metaphors and reflect the attitudes of those for whose benefit they were supposedly coined. The most common arguments against the war metaphor in our sample are the following:

1) it unduly romanticizes cancer patients ascribing to them features they might not actually possess: *I’m not a fighter and I’m probably not very brave. I haven’t saved a kid from drowning, or sailed around the world. Playing three hours of Xbox a day doesn’t make me a hero* (Betts, p. 48);

2) it does not reflect the true character of the cancer experience. Being a cancer patient requires a great deal of passivity and a frugal use of physical and psychic resources, rather than constant readiness to fight back: *Sleep fights cancer* (Green, p. 108);

3) it is highly clichéd and as such is annoyingly meaningless and unrelatable. Consider the irony in the following context: *Like, you are familiar with the trope of the stoic and determined cancer victim who heroically fights her cancer with inhuman strength and never complains or stops smiling even at the very end, etcetera?* (Green, p. 173);

4) it is often represented with stock phrases that are seen as semantically redundant: *Twelve-year-old leukemic Michael had passed away. He'd fought hard, Lida told me, as if there were another way to fight* (Green, p. 129);

5) when used in obituaries, it steals all the limelight and diminishes the personality of the deceased: *when I died they'd have nothing to say about me except that I fought heroically, as if the only thing I'd ever done was Have Cancer* (Green, p. 100);

6) it alienates the patients from their own body: *"What am I at war with? My cancer. And what is my cancer? My cancer is me"* (Green, p. 216). This piece of criticism, however, gives rise to a remarkable metaphorical innovation, when cancer is referred to as *"a civil war with a predetermined winner"* (Green, p. 216).

The omnipresence of war metaphor in cancer discourses and abundance of research into it spares us the need to analyze all the contexts of its use in our sample, as many of them are typical. Patients are represented as fighters or battlers, cancer is an enemy or attacker, going through the treatment is fighting, those who are in remission are winners or heroes, trying to get better is fighting back, the medical personnel (nurses, technicians, psychologists) are squads of reinforcements, refusal to hope for the better is being defeatist, relapsing or dying is losing, etc. Those are the usual and highly conventional metaphorical mappings for cancer describing *"the ancient and inglorious war against disease"* (Green, p. 311).

However, there are some noteworthy examples that demonstrate the conceptual potential of war metaphor and possible ways of its further development.

The first one exploits a largely invisible aspect of the war scenario, which is recruiting

a person for a war. It maps on to the beginning of cancer patienthood. In "Zac and Mia", by a thorough choice of verbs and their juxtaposition the protagonist emphasizes the compulsory character of his involvement in the metaphorical fight against cancer and rebuts his own heroism. Of particular interest is the fact that power and authority here are assigned to cancer, while typically this role is reserved for professional oncologists: *I never signed up for this war. Leukemia conscripted me, the fucker* (Betts, p. 49).

In the same novel, the characters play with the war scenario experimenting with different types of competitive opposition, thus working within a wider violence frame. It is a perfect example of the so-called co-construction of metaphor [Nagornaya, 2021], when communicators collaborate in creating the optimal image for a certain phenomenon and construe it in incremental steps, testing and discarding different ideas: *"Because you're such a fighter, Zac." "Like Muhammad Ali?" "Well, maybe. <...> No, not really. It's because you never complain." "I get it. More like Hulk Hogan, then." "Maybe more like a fighter at war," Patrick suggests. "So this room is, like, Afghanistan, and my leukemia is the Taliban *?"* (Betts, pp. 47-48).

The inner logic of metaphorization is noteworthy: the creative process is triggered by the war-associated term *fighter*. The protagonist deliberately downplays this meaning by moving the word into the sphere of sport. After its semantic status is restored by his interlocutor, the protagonist compromises, but suggests a rather specific civil war scenario when the power is captured by extremists. The context can be regarded as an example of metaphorical creativity at the conceptual level: it represents a blend of the sport and war domains, on the one hand, and suggests a new expansion of the war domain, on the other hand.

A more modest example of metaphorical creativity is the context in which the persistence of cancer and its resistance to therapy is represented as establishing a military base within a patient's body – an action which

* A terrorist organization whose activities are prohibited in the Russian Federation.

suggests long-term strategic thinking: *Perhaps the cancer has established a beachhead in his brain* (Betts, p. 186).

Thus, war metaphors appear highly relevant to the conceptualization of cancer in teen sick-lit and can even get an extra lease of life through modification and renovation.

Conclusion

Although we have been able to present only a fraction of our sample, we can still trace certain patterns in teen sick-lit that are relevant to the metaphorical representation of cancer. First and foremost, there are at least four different aspects of cancer experience that are hospitable to metaphor. Those include interpretations of cancer as a disease, reflections on the nature of cancer patienthood, depictions of diagnostic procedures and treatments and descriptions of physical and emotional conditions of patients. Their differentiation, although never undertaken before, proves expedient as it shows that there are metaphors that demonstrate a strong inclination to reflect only some aspects of cancer experience. Thus, the journey metaphor in teen sick-lit is exclusively found in descriptions of procedures and treatments and appears invalid for the conceptualization of the other aspects, which contradicts the idea of its versatility and partly explains the difficulties that its supporters face when trying to promote it in public discourses of cancer. At the same time, war metaphors are universal and are liberally applied to all the listed aspects. Secondly and specifically, cancer experience is represented with a much more varied arsenal of metaphorical means than might seem. The cultural availability of the well-tested war and journey metaphors does not preclude a creative use of conceptual means that best suit individual experiences of cancer. Finally, our evidence suggests that war metaphor, although rejected by many and proclaimed obsolete, has not yet exhausted its conceptual and communicative potential and can be further developed.

NOTE

¹ Cf.: *have / keep your feet on the ground* – to keep a sensible and practical attitude to life (Macmillan

English Dictionary for Advanced Learners. Oxford : Bloomsbury Publishing Plc., 2002. 1690 p.).

REFERENCES

- Bowdle B.F., Gentner D., 2005. The Career of Metaphor. *Psychological Review*, vol. 112, no. 1, pp. 193-216.
- Demjén Z., 2016. Laughing at Cancer: Humour, Empowerment, Solidarity and Coping Online. *Journal of Pragmatics*, iss. 101, pp. 18-30.
- Elman J.P., 2012. “Nothing Feels as Real”: Teen Sick-Lit, Sadness, and the Condition of Adolescence. *Journal of Literary & Cultural Disability Studies*, vol. 6, iss. 2, pp. 175-191.
- Elman J.P., 2014. *Chronic Youth: Disability, Sexuality, and U.S. Media Culture of Rehabilitation*. New York, NYU Press. 258 p.
- Frank A., 2013. *The Wounded Storyteller: Body, Illness & Ethics*. Chicago, The University of Chicago Press. 282 p.
- Hendricks R.K., Demjén Z., Semino E., Boroditsky L., 2019. Emotional Implications of Metaphor: Consequences of Metaphor Framing for Mindset About Cancer. *Metaphor and Symbol*, vol. 33, no. 4, pp. 267-279.
- Kövecses Z., 2015. *Where Metaphors Come from: Reconsidering Context in Metaphor*. Oxford, Oxford University Press. 232 p.
- Kumbier A. Trauma Club: The Chronic Popularity of Illness Lit. *Bitch Media*. URL: <https://www.bitchmedia.org/article/in-sickness/the-popularity-of-illness-lit>
- Lakoff G., Johnson M., 1980. *Metaphors We Live By*. Chicago, University of Chicago Press. 193 p.
- McDaniel L., 2000. *Dawn Rochelle, Four Novels*. London, Starfire. 544 p.
- Mukherjee S., 2011. *The Emperor of All Maladies: A Biography of Cancer*. London, Fourth Estate. 597 p.
- Nagornaya A., 2012. Orudiyaya metafora kak sredstvo obyektivatsii vnutritelesnogo opyta [The Weapon Metaphor as a Means of Objectifying Inner-Body Experience]. *Vestnik Leningradskogo gosudarstvennogo universiteta imeni A.S. Pushkina* [Pushkin Leningrad State University Journal], vol. 7, no. 2, pp. 84-96.
- Nagornaya A., 2013. Smeshannaya metafora kak sredstvo verbalizatsii interotseptivnogo opyta [Mixed Metaphor as a Means of Verbalizing Interoceptive Experience]. *Vestnik Orlovskogo gosudarstvennogo universiteta. Seriya: Novye gumanitarnye issledovaniya* [Orlov State University Bulletin. Series: New

- Research in the Humanities], no. 5 (34), pp. 146-151.
- Nagornaya A., 2017. Obrazy zhivotnykh v diskurse vnutritel'snykh oschuschenii [Animal Images in the Discourse of Inner-Body Sensations]. *Yazykovoii obraz v kommunikatsii: sbornik nauchnykh trudov* [Language Image in Communication. Collection of Scientific Papers]. Moscow, INION RAN Publ., pp. 56-68.
- Nagornaya A., 2021. Ispolzovaniye metafor v psihoterapevticheskoi praktike [The Use of Metaphors in Psychotherapy]. *Sotsialnye i gumanitarnye nauki. Otechestvennaya i zarubezhnaya literatura. Seriya 6: Yazykoznanie. Referativnyi zhurnal* [Social Sciences and Humanities. Russian and Foreign Literature. Series 6: Linguistics. Review Journal], no. 4, pp. 97-120.
- Peet M. *Teen Fiction and the Shadow of Cancer*. URL: www.theguardian.com/books/2013/jan/26/teen-fiction-cancer-taboo
- Perusek D., 2012. Cancer, Culture, and Individual Experience: Public Discourse and Personal Affliction. *Ethos*, vol. 40, iss. 4, pp. 476-506.
- Pragglejaz Group, 2007. MIP: A Method for Identifying Metaphorically Used Words in Discourse. *Metaphor and Symbol*, vol. 22, no. 1, pp. 1-39.
- Rabinow P., 1996. Artificiality and Enlightenment: From Sociobiology to Biosociality. *Politix*, no. 90 (2), pp. 21-46.
- Rosenberg S.A., 2020. *Overcome the Challenges of Cancer Care: How to Avoid Pitfalls on the Path to Healing*. Washington, Rowman & Littlefield Publishers. 180 p.
- Semino E., Demjén Z., Hardie A., Payne Sh., Rayson P., 2018. *Metaphor, Cancer and the End of Life: A Corpus-Based Study*. New York, Routledge. 314 p.
- Sontag S., 1978. *Illness as Metaphor*. New York, Farrar, Straus and Giroux. 87 p.
- Spelman E.V., 1997. *Fruits of Sorrow: Framing our Attention to Suffering*. Boston, Beacon Press. 224 p.
- Steen G.J., 2007. *Finding Metaphor in Grammar and Usage: A Methodological Analysis of Theory and Research*. The Netherlands, John Benjamins Publishing Co. 436 p.
- Testoni I., Parise G., Zamperini A., Visintin E.P., Toniolo E., Vicentini S., De Leo, 2016. The "Sick-Lit" Question and the Death Education Answer. Papageno Versus Werther Effects in Adolescent Suicide Prevention. *Human Affairs*, vol. 26, no. 2, pp. 153-166.

SOURCES

- Betts – Betts A.J. *Zac and Mia*. New York, Clarion Books, 2013. 301 p.
- Gemeinhart – Gemeinhart D. *The Honest Truth*. New York, Scholastic Press, 2015. 240 p.
- Green – Green J. *The Fault in Our Stars*. New York, Penguin Books, 2012. 318 p.
- Harrell – Harrell R. *Wink*. London, Puffin Books, 2020. 336 p.

Information About the Authors

Alexandra V. Nagornaya, Doctor of Sciences (Philology), Professor, School of Foreign Languages, National Research University Higher School of Economics, Staraya Basmanaya St, 21/4, 105006 Moscow, Russia, anagornaya@hse.ru, alnag@mail.ru, <https://orcid.org/0000-0002-6821-0835>

James Chike Nwankwo, Postgraduate Student, School of Philology, National Research University Higher School of Economics, Staraya Basmanaya St, 21/4, 105006 Moscow, Russia, jamescul36@gmail.com, <https://orcid.org/0000-0002-0343-2883>

Информация об авторах

Александра Викторовна Нагорная, доктор филологических наук, профессор Школы иностранных языков, Национальный исследовательский университет «Высшая школа экономики», ул. Старая Басманная, 21/4, 105006 г. Москва, Россия, anagornaya@hse.ru, alnag@mail.ru, <https://orcid.org/0000-0002-6821-0835>

Джеймс Чайк Нванкво, аспирант Школы филологии, Национальный исследовательский университет «Высшая школа экономики», ул. Старая Басманная, 21/4, 105006 г. Москва, Россия, jamescul36@gmail.com, <https://orcid.org/0000-0002-0343-2883>