Analyzing YA in Practice

"I check my bag, make sure I have my wallet, keys, phone. I zip it up, and then I unzip it and check it again. Wallet, keys, phone — those three things everyone needs before going out, and yet my brain takes it a step further. I know my wallet and keys are there, but as soon as I zip my bag, I question it. I start wondering whether I can believe my brain, my eyes. So I do it again. It's a strange feeling, knowing you're doing something illogical, being unable to stop yourself."

– Rachel Lynn Solomon, *We Can't Keep Meeting Like This* (35)

Rachel Lynn Solomon's *We Can't Keep Meeting Like This* follows the story of our eighteen-year-old Quinn — as told from her perspective — over the course of one summer, where she is forced to reckon with untended wounds from her childhood, an unfinished relationship, and whether or not she belongs on the path she has always been *told* to follow. Quinn is many things — a harpist, a cat-lover, a daughter, a sister — but she is also a girl who struggles with Obsessive Compulsive Disorder (OCD). Rather than granting it only a brief, off-handed mention, Solomon writes Quinn's OCD with an immediacy reflecting the realities of anxiety disorders.

The first way Solomon achieves this is through the first person present narration of the text. We are *inside* of Quinn's mind; we *are* Quinn. "*I check my bag, make sure I have my wallet, keys, phone*"; Quinn is the "I," but so are we, too, the reader. Now, Solomon could have stopped the scene here. She could have made this a brief detail that moved Quinn out of the house and onto her errand. However, Solomon keeps Quinn (and us) in what should be a brief, inconsequential moment far longer. This one thought—one sentence—spirals into two thoughts, into a whole paragraph. And we are inside Quinn's mind for it all, following along her thought process as if it were our own.

Solomon's sentences are quick and simple, much like the action Quinn is performing. Quinn remarks: "*I know my wallet and keys are there, but as soon as I zip my bag, I question it.*" The structure of this sentence imitates the flow of thoughts. Notice, Solomon does not break up

the thoughts. This is one action: Quinn sees her wallet, keys, and phone in her bag, zips it, and immediately questions it. It all happens in quick success because of this one thought. There is no pause between knowing her items are in the bag and the question of whether they are there. The anxiety is immediate, as exemplified by Solomon's tagging on, "*I question it*," with a comma rather than making it its own sentence. If the anxiety was an afterthought to the action, then Solomon might write: "I know wallet and keys are there. I zip up my bag. However, as soon as I do, I question it." Quinn's anxiety, though, is constant and immediate; the sentence structure imparts that anxious feeling to the reader.

Quinn is conscious of the near absurdity of her actions. However, knowing and *knowing* are two different things when it comes to OCD, which Quinn tells us when she says: "*I start wondering whether I can believe my brain, my eyes."* This tells a reader, who might not be familiar with OCD, that this kind of anxiety is not resolved by knowledge because it causes you to question your own senses and knowledge. Quinn can confirm that her wallet, keys, and phone are in her bag, but that isn't the problem. It's trusting her mind. Quinn explains: "*It's a strange feeling, knowing you're doing something illogical, being unable to stop yourself."* Here, Solomon switches from "I" to "you," in a direct reference to the reader. She could have written: "It's a strange feeling, knowing *I'm* doing something illogical, being unable to stop *myself."* This is the logical structure, given the book is written in the first person. Instead, Solomon takes the sense of immediacy she's already created one step further, by making this sentence not about Quinn, but about us. It is an invitation to empathy. Instead of Quinn being the only one knowing she is doing something illogical, but being unable to stop, we, the reader, are drawn into this experience—and implicated in the described emotional state. It is *you* who feels this emotion; it is you "*doing something illogical, being unable to stop yourself."*

This narrative shift does one other thing, too. Quinn characterizes her feeling as "strange." Foreign, not entirely hers. That shift to the "you," detaches herself from the action, placing it on us. It makes that action exactly what she feels it to be: "Strange." Not hers, but *yours.* This yours is both us, and not us. Both Quinn, and not Quinn. And that is what it feels like to live with a brain that is not entirely *yours*, leaving you wondering whether you can believe it or not, but at the same time, "*knowing you're doing something illogical, being unable to stop yourself."* It is an accurate representation of mental health struggles, written by an author who, herself, has struggled with these very same issues and whose writing, by virtue of its accessible language "has this duality of helping people understand what it's like to have that brain and also helping people see that there are other people who have these exact same obsessive thoughts and compulsive behaviors" (Solomon 36:07). It is the language that accepts what is occurring and paints it as it is, leaving readers with a feeling of understanding of and oneness with Quinn's struggle, even if they have never, themselves, experienced it.