Writing Dora: 
Creating Community Through 
Autobiographical Zines about Mental Illness

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ABSTRACT

This paper explores zine writing by people with mental illnesses as a form of community building that challenges dominant, stigmatizing representations. The ways in which zine authors disrupt doctor/patient, consumer/producer, and reader/writer boundaries is investigated as providing insights into alternative ways of identifying and forming mental health communities. The author argues that these zines, as part of an underground disability arts movement, position mental illness as a segment of a larger disability culture. In its conclusions, this article suggests that it is imperative for art educators to complicate their understandings of culture and disability in order to recognize disability as a complex culture.

INTRODUCTION: IN THE MIRROR OF POPULAR CULTURE

After class one of my students who was preparing to do a presentation on the popular representation of mental illness in an upcoming class stood on the outskirts of the classroom shifting her weight from side to side until the other students finally left. She came seeking advice on how to negotiate her personal experience of mental illness during her presentation. She thought that the other students had largely not had similar experiences and that they had gained much of their understanding about mental illness from television more so than from their own interactions with others. Students approaching me wanting to talk about their own experiences with mental illness has become increasingly more common after I “came out” about my own experiences of living with bipolar illness. However, what struck me the most in this conversation was that when she mentioned that she had been hospitalized, she whispered. There was nobody in this room except for her and me, and still she whispered as we stood in front of a closed door.

WHY DO WE WHISPER OUR STORIES?

Should I whisper my own? Following my initial diagnosis and hospitalization for bipolar illness in the spring of 2004, I searched for an understanding of this aspect of my identity. While I was in the hospital, I asked many questions trying to gain a better understanding of what might lie ahead for me and finally a doctor, who was probably tiring of my questions, suggested that I read Kay
Jamison's (1996) memoir, An Unquiet Mind. After receiving the copy my husband searched to find in our local bookstores, I was particularly taken with Jamison's story: "Within a month of signing my appointment papers to become an assistant professor of psychiatry at the University of California, Los Angeles, I was well on my way to madness; it was 1974 and I was twenty-eight years old" (p. 4). I had just signed my own contract for my first position as an assistant professor, also at the age of twenty-eight, and I felt an immediate connection with Jamison's story. Her narrative represented the experience of living with bipolar illness rather than simply a medical account or a reinforcement of stigmatizing representations. Perhaps this was the beginning of my ongoing search for other stories through which I could form a community, extending beyond the confines of geographical location, with others impacted by mental illness.

I began my search for other stories within the zine community and particularly within what are called personal zines (perzines), which are small independent publications in which people share autobiographical stories. I have read personal zines for many years and have already come to appreciate the honest and private narratives that zine authors share about their life experiences. Two zines, Miranda Hale's The Pleiades and Rae's Suburban Gothic, were especially meaningful for me because of the ways that the authors wrote about their own experiences of living with mental illnesses. These two zines were a significant personal motivator and encouraged me to tell my own story in a zine I titled 27 Days.

In this paper, I will explore how autobiographical zines represent a critical and artistic practice that addresses cultural stigmatization. These zines mark an intersection of dominant narratives about people with mental illnesses and the narratives that people tell about their own lives, and provide insight into how autobiographical and independently circulated writing confronts stigmatization, creates community, and unsettles limiting dominant discourses. I identify zine culture and zine writing about personal experiences with mental illness as a critical practice at the intersection of the consumption and production of popular culture, and position zines as part of the disability arts movement. Likewise, zines about mental illness help to situate mental illness as part of disability culture.

I begin with an exploration of the zine itself, its production, and its cultural meaning and then examine the ways in which personal zine narratives about mental illness challenge binaries such as doctor/patient and consumption/production. I then explore the ways in which zines can be understood as part of the disability arts movement and the implications for disability culture. And in conclusion, I suggest that it is integral for art educators to complicate understandings of culture so as to recognize disability as a complex culture.
WHAT IS A ZINE? THE CHARACTERISTICS OF ZINE CULTURE

At the most basic level, differences emerge between magazines and zines in regards to zines’ production and circulation. While magazine production is often motivated by profit, value within zine culture is located in the construction of a discursive space through which to challenge dominant cultural narratives and, in so doing, to form new communities that trouble the limitations of geographical, social, and cultural boundaries. As Zobl (2004) described, the “mainstream media fails to provide a venue for many people.... In response, some have taken the tools of cultural production into their own hands” (p. 156).

Zines are about creating connections with people. In addition to the connections created through the actual reading of others’ zines, zinesters come together in virtual spaces such as online message boards and listservs, as well as at zine festivals and conferences. These personal connections with others are important. Therefore, in purchasing, reading, and writing to a zinester, I am constantly aware that someone wrote it, that someone touched it, and that someone sent it. As Atton (2002) described:

Zines are created precisely for people to communicate through them – they are multiple objects created by different producers to reflect and construct a complex of social realities. There is an emphasis on the act over the result, at least to the degree that success is not to be measured by quantity of response or circulation. (p. 67)

Zines are constructed as a kind of call and response. Zinesters include their own mailing and email addresses in their zines and encourage those that read their work to dialogue with them. On this level, the roles of readers and writers are blurred. As Atton (2002) described, “the very format of the zine— with design and production values that owed more to the copy shop than the printing press—encouraged readers to become editors themselves” (p. 23). As a form of call and response, zine cultures are often described as vehicles for creating community amongst people who are in multiple geographic locations. Steve Duncombe (1998) wrote, “The narratives give keys to decipher a world that lies below the straight world, in front of ‘normal’ society’s eyes but invisible to their gaze. Zines offer a shadow map of America” (p. 434). Anita Harris (2001) identified the location of young girls and women’s zine cultures in the underground as a political choice. She suggests the location of girls’ zine networks underground should not be seen as a “failure of access to or possibilities with the public,” but rather as an “active choice” on the part of these zinesters (p. 130).

Zines can be understood as a third space as Licona (2005) proposed in “Borderlands’ Rhetorics and Representations: The Transformative Potential of Feminist Third-Space Scholarship and Zines.” She borrowed the term “third
space” from Sandoval’s discussion of “third-world feminism as ‘third space’ feminism” (p. 105). Licona has written,

Third space can be understood as a location and/or a practice. As a practice it reveals a differential consciousness capable of engaging creative and coalitional forms of opposition to the limits of dichotomous (mis)representations. As a location, third space has the potential to be a space of shared understanding and meaning making. Through a third space consciousness then dualities are transcended to reveal fertile and reproductive spaces where subjects put perspectives, lived experiences, and rhetorical performances into play. In third space sites, representational rhetoric moves beyond binary borders to a named third space of ambiguity and even contradiction. (p. 105)

Similarly, Perez (1999) described feminist third space as an “in-between space” in which the “decolonizing subject” negotiates “new histories” (p. 5; see also Licona, 2005). According to Perez this is an interventionist site through which alternative consciousness can arise. When understood through the theoretical frames of feminist third spaces, the blurring of consumer/producer boundaries becomes central to our understanding of zines as an artistic practice and culture. Third space is a site of meaning-making and not simply meaning-consuming. Zinesters’ forms of production offer both an alternative popular culture that is more disruptive than assimilationist and a form of alternative histories.

It is this collective body of historical and contemporary representations that form the backdrop upon which the contemporary zine narratives about living with a mental illness that I examine are situated. Miranda Hale began publishing The Pleiades in 2002 and has since published sixteen issues. Miranda Hale’s zine is a perzine in which she shares a variety of narratives about her life. She has written about her experiences living with an anxiety disorder, obsessive-compulsive disorder, and bipolar illness. When asked why she writes about her experiences with mental illness, she replied:

I believe that it’s important to write about aspects of ourselves that we’re not supposed to speak about—things that are stigmatized or judged negatively by society.... In order to remove the stigma and shame of dealing with mental illness or any other stigmatized quality/aspect of self, we must write/speak about them clearly, openly, and without shame or fear. Only then will these things come out of the metaphorical closet and become a more acceptable, less shameful thing to talk about. (Personal interview, October 25, 2005)

Rae began publishing Suburban Gothic in 2003 and has since published seven issues. Rae has also created a perzine in which she includes multiple narratives from her everyday life. In her zine she shares her experiences with depression and borderline personality disorder. She described why she chose to write about her mental illness:

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I have three main reasons for writing about mental illness in my zines. The first is that honestly, it helps me cope. It helps me sort things out, in my head and on paper. Secondly, by writing about mental illness, I aim to break the silence surrounding mental illness and break down the stereotypes. Giving voice to it through my zines provides a more real alternative depiction of a person with mental illness than something ridiculous like a Jim Carrey movie. It’s my way of fighting back, and saying that I won’t let mental illness or the stigma and stereotypes about it silence me. Thirdly, I want to open and encourage dialogue on the subject. That also ends up helping to break down stereotypes and stigma, but it also contributes to an awesome support community, particularly among people who make zines. I wish I’d known about zines before I was hospitalized, because part of what made my own “craziness” so bad was feeling like there was nobody I could trust, nobody who felt the same way I did and had similar experiences. (Personal interview, October 10, 2005)

Zine culture is a space in which people can write freely about matters of personal importance and form communities with others with similar experiences. As Rae stated, zines can be catalysts for dialogue:

[Sharing stories and experiences and voices has the benefit of making connections, and in making connections, you don’t feel so alone in your life, even when it’s at the absolute worst. Knowing that someone else feels and thinks the same things you do and has experienced similar things can give you the courage to tell your own stories as well, and the more people tell their stories, the more awareness is spread throughout society. (Personal interview, October 10, 2005)

This kind of dialogue was a personal motivator as I made the decision to write my own zine. Reading zines was no longer enough and I wanted and perhaps needed to more actively be a part of this community. Zine culture made me realize that I was part of a larger disability culture. With great reservation, I published my first zine titled 27 Days in 2004, which is based on twenty-seven days of journal entries from a time I was hospitalized.

ZINE CULTURE,
THE DISABILITY ARTS MOVEMENT, AND DISABILITY CULTURE
Zine culture can be understood as part of the disability arts movement and a larger disability culture. In conceptualizing the disability arts movement, it is important to recognize the contributions of zine culture and other “underground” artistic practices, which are often left out of the discussion (Barnes & Mercer, 2001; Hevey, 1993; Swain & French, 2000). The disability arts movement refers to work created by “disability artists” who differ from “disabled people doing art.” The work of “disability artists” “offers a critical response to the experience of social exclusion and marginalization” (Barnes & Mercer, 2001, p. 529).
Often the creative work of disabled people has been situated within therapeutic discourses that focus more on the role of art as rehabilitation than art as critical intervention. In regards to people with mental illnesses, we especially have had our forms of creative production appropriated and co-opted within discourses of psychiatric art collections and Outsider Art. The crucial difference remains that disability art focuses on the experience of impairment and offers forms of self-representation within a dominant culture that most often represents disabled people. As Hevey (1993) wrote:

In the history of disability representation...we find a history of representation that was not done by us but to us.... Disabled people have been the subject of various constructions and representations throughout history but disabled people have not controlled the object—that is, the means of producing or positioning our own constructions or representations. (p. 423)

Zine culture is an important contribution to conceptualizing the disability arts movement and disability culture more broadly. The definition of disability culture, like most cultures, is debated, contested, and multiple. Susan Peters (2000) argued that disability culture is syncretic, involving a coming together of three worldviews of culture: culture as historical/linguistic, socio/political, and personal/aesthetic. The historical/linguistic view of culture emphasizes a common language, a historical lineage that can be traced textually, evidence of a coherent social community, political solidarity, acculturation within the "family," generational/genetic links, and pride and identity in segregation. The socio/political view involves a coming together of disabled people "to form a community based on cultural notions of solidarity, but not necessarily with a unified voice" (p. 593). The personal/aesthetic worldview suggests that it is through "personal interpretations of life experiences [that] an individual creates a cultural identity as disabled.... The body becomes a metaphor for culture, where culture is created from whole body experiences, and the disabled body is the interpretive force for cultural identity" (p. 594).

In Barnes and Mercer's (2001) chapter, "Disability Culture: Assimilation or Inclusion?", they argued that the disability arts movement and self-representation are particularly important to disability culture given the ways in which disabled people have been represented especially in popular culture. However, in forming their argument they exclude examples of representations of mental illness from their discussion. This is a common problem across discussions of the disability arts movement and disability culture that overlook mental illness as a disability centering instead on the theorization of disability in relationship to physical disability. Therefore, zines about mental illness are an important example of an art form that focuses on the critique and disruption of dominant forms
of representation of mental illness and are an important contribution to the disability arts movement. As Finkelstein and Morrison (1992) argued:

Only by ensuring an integrated role for disability arts and culture in the struggle can we develop the vision to challenge narrow thinking, elitism and dependency on others for our emancipation. To encourage the growth of a disability culture is no less than to begin the radical task of transforming ourselves from passive and dependent beings into active and creative agents for social change. (As cited in Barnes & Mercer, 2001, p. 529)

This desire to become an “active and creative agent for social change” informed my decision to write my own zine, which was a collection of writing and visual works.

SHOULD I LOWER MY VOICE?
When I first published my zine, I adopted the pen name Dora. For me Dora represented the silencing of women with mental illnesses. Freud’s Dora became her diagnosis. She was not a person with “hysteria,” but rather she became “hysteric.” As a woman with a mental illness, Dora represented my history, present, and possible future and reflected the irony of trying to speak when everything said becomes viewed as a “symptom” of my “abnormality.” As Kuppers (2007) wrote, “once a patient is labeled with a condition, her utterances are not necessarily regarded with the same degree of openness as a nonlabeled patient might expect” (p. 60).

My use of the name Dora also represented fear. I feared publishing this autobiographical zine using my given name because I was concerned about how being identified as a person with a mental illness would impact my personal and academic life. Would my students continue to respect and seek out my perspectives and judgments? Would my colleagues think me capable of surviving a life in academia? Would my research be called into question within the rational discourses of academia? For these reasons among others, I remained in the closet and continued to “pass” as a “normal” person. I felt like a silenced person and Dora was a fitting name.

However, writing and publishing my zine enabled me to share my story with others and empowered me to begin the process of challenging in my writing and teaching the very things that imposed limitations and fostered my fears. So, while I tried to separate my zine from my academic life, in the end the zine did something I did not imagine. It changed my academic life.

POPULAR CULTURE, STIGMA, AND WHISPERING SUBJECTS
In the mirror of popular culture, people with mental illnesses are dangerous, aggressive, homicidal maniacs, people who should be kept out of a community.
The mirror of popular culture is large including television, films, magazines, newspapers and places such as haunted houses. In the mirror of popular culture, they are child-like, unable to perform everyday adult roles, lost and confused, unemployed, homeless, and without a family or friends. In the mirror of popular culture, they are untrustworthy, a social outcast, a sinner, and a savant. Within medical discourses, they become their diagnoses. And when they protest, speak up, or come out, they are often called an anomaly, an exception to the rule, because they don't resemble what people think mental illness looks like. Perhaps, the only thing that is worse than staring into the mirror of popular culture, is when people with mental illnesses believe that those representations are who they are or who they will become.

Autobiographical zines about mental illnesses are situated within this culture of stigma where the body is literally and metaphorically marked as abnormal. Zinesters' texts are about and in response to their own stigmatization. While stigma is defined literally as a wound and a mark of disgrace, in the context of dominant representations of mental illness, stigma is a form of cultural wounding. The decision to speak up, to question, and to critique is to brand oneself; it is a form of public self-mutilation, a positioning of oneself on the side of the irrational, an act that alone might be seen surely as a form of “madness.” However, this is exactly what the zinesters discussed in this paper do. Miranda Hale, Rae, and I elect to speak up in a cultural atmosphere that dictates that it is better to “pass” than to “come out.” Each of these authors in varying ways writes as a means through which to make change in their worlds. As Miranda, author of the Pleiades stated: “only when we write/speak about [these issues] clearly...will these things come out of the metaphorical closet and become a more acceptable, less shameful thing to talk about” (Miranda Hale, Personal interview, October 25, 2005). Rae also suggested that zines can become a means through which to critically address issues of cultural stigmatization:

I feel like people really don’t understand mental illness at all. It’s such a stigmatized thing, and the popular portrayals in the media are so sharply polarized to one ridiculous extreme or the other—either a deranged, homicidal psycho, or a big funny joke. (Rae, personal interview, October 10, 2005)

If stigmatization is a cultural marking of the body, then the personal stories shared in zines represent a cultural re-marking of the body and a form of healing as cultural critique. As Miranda Hale described, “Having the courage to say, ‘No, this isn’t okay’ is incredibly empowering, and I think this sense of empowerment is in itself a kind of healing” (Personal interview, October 25, 2005). Therefore, zine writing does not exist outside of or beyond cultural stigmatization. Zines
confront dominant popular discourses and are written through stigmatized bodies and stigmatizing experiences.

At times, zine authors appropriate images from popular culture and material culture that become juxtaposed against their own writing. In Figure 1, Rae (2004) juxtaposes a narrative about her history of taking medication and her beliefs toward medication on a backdrop of Zoloft packaging. The text in this section reads:

My point of view was partly influenced by my upbringing. My mother was a firm believer in home remedies. Her cure for a cold was orange juice and chicken soup. Not Tylenol Cold. My environment with respect to medication was one of 'only when absolutely necessary.' (p. 32)

Rae’s collage-like practice of juxtaposition serves to create questions through the seams formed between her personal narrative and medical discourse. It is a reclaiming of visual and material culture on one’s own terms and for the purposes of one’s own questions.
DOCTOR, ARE YOU LISTENING?
CRITIQUING MEDICAL REPRESENTATION

Zine authors also critique medical discourses as locations of lost agency. In The Wounded Storyteller, Arthur Frank (1995) argued that the ill person's narrative becomes a part of a medical discourse. According to Frank, a doctor's asking, "How are you?" requires the patient "to tell her story in medical terms.... The physician becomes the spokesperson for the disease, and the ill person's stories come to depend heavily on the repetition of what the physician has said" (p. 6). Sharing one's illness narrative constructs a counter-narrative in which patients can acquire agency. Through this sharing of stories, zinesters can reclaim themselves as subjects within medical discourses. Couser (1997) described the collaborative narrative between patient and doctor as one-sided:

[Patients submit their bodies to tests, their life histories to scrutiny, while doctors retain the authority to interpret these data. By means of this process (interrogation and interpretation) the physician reconfigures the sick person's illness as the patient's disease. (p. 10)

In Suburban Gothic #3, Rae openly discusses her experiences with depression including its origins, its evolution in her life, and its consequences in a language very different than that of the typical medical model. Her (2004) zine provides another way through which to understand the experience of depression when she wrote:

Being depressed is like walking around in a half-awake daze, like a perpetual nightmare, where you try to run away but your legs won't move fast enough, like they do when you try to run in a swimming pool's middle section water up to your chest. The harder you pump your legs, the slower you move. Being depressed is like having those kinds of nightmares every night and not being able to ever fully wake up. The nightmare has you in its grip and you cannot escape. (p. 26)

As Otto Wahl (1995) described, "Words have power. Words reflect and shape prevailing attitudes, attitudes that in turn shape social behavior. The words used by mass media to refer to mental illnesses...have such power making it important to consider those words and the ways they are typically used—and misused" (p. 14). Within zine writing the power of words becomes something that can unsettle objectification rather than reinforce it. Zine writing uses language, which is often the vehicle for stereotypes and a root of objectification as a way of beginning a shift from having one's story told to telling one's own story. Within medical discourse the power of writing can be located in one example within the patient's chart in which the patient's narrative becomes translated into medical language raising questions regarding what is lost in translation and what can and cannot exist within medical discourses.
In my (2004) zine, I wrote about my experiences of being objectified and pathologized within the contexts of the psychiatric hospital:

How am I feeling? My [medical] team asks me this question every day. The team is comprised of my psychiatrist, two medical students, one social worker, and periodically a few other people who I can't identify. They all sit silently except for the psychiatrist. A minimum of 8 eyes, 4 separate gazes staring at me and asking: How are you feeling today? How am I feeling? I am feeling like I want to escape your gaze. (p. 8)

The psychiatric hospital becomes emblematic of the pervasive objectification and fear of those with mental illnesses. Shrouded in a veil of curiosity and fear, the psychiatric hospital within dominant discourses is problematically viewed as a loss of self so severe as to require a form of cultural suspension. In many ways, the psychiatric institution becomes a physical and metaphoric location in which the public justifies its objectification of the "mentally ill" Other.

In one sense, my zine became a subversion of the medicalization of my own narrative within institutional discourses. My narrative also "escapes" this institutional context by situating a speaking subject within a deeply engrained cultural practice of isolating and sending people with mental illnesses away. The isolation of people with mental illnesses can be located metaphorically and actually in the cultural practice of, and supporting ideas behind, sending people with mental illnesses to asylums and psychiatric hospitals to live. However, even when not literally confined between four walls, people with mental illnesses experience a daily confinement resulting from the pervasive and devastating experience of stigma.

It is from within the context of these forms of confinement that zinesters' autobiographical accounts of their experiences with mental illness in self-published zines emerge. Subverting one's own confinement is important to how these zines function for the individual author and within larger cultural discourses surrounding mental illness. In one way, zines create community by aiding in forming connections with other people by sharing stories through reading and writing as a form of change and support rather than profit or medical performance.

In my zine, I visually explore the medical discourse surrounding mental health through a juxtaposition of contemporary signifiers and historical images. All three images in Figure 2 use a late 19th century photograph by Londe and Charcot titled "Photophobic Hysteric." This ironic image of a woman pathologized for not wanting her picture taken is juxtaposed with the contemporary images of a line drawing of bread, a hospital bed, and a neuron. Much like the juxtaposition discussed in Figure 1, these juxtapositions serve to raise questions about the interrelationship of contemporary and historical medical discourses of mental illness.
Zine writing about personal experiences with mental illness contribute important objections to both popular culture and medical discourses. Within popular culture, the zine author experiences the multiple and repeating representations of people with mental illnesses that both produce and reinforce existing stereotypes and further the cultural processes that lead to stigmatization. Likewise, within medical discourses, people reconfigured as “patients” often experience the loss of their personal narratives and agency even though they might be asked multiple times by doctors to “share” their stories of the experience of illness.

DISABILITY CULTURE, MULTICULTURALISM, AND ART EDUCATION

Zine writing and the social and cultural contexts within which it is produced and circulates exemplifies that it isn’t simply as easy as speaking up a little louder, ignoring others’ comments, and self-advocating. Rather, zine authors are challenged by how to speak up and use their stories and visual works to confront the very media processes that lead to their own stigmatization. Zines mark a disruption of dominant media production through their insertion of a speaking subject into a media-driven culture that more often represents people with mental illnesses in problematic ways than provides opportunities to hear about their actual experiences. Likewise, while the narrative between a doctor and patient may be collaborative, it is, as Couser (1997) suggested, often one-sided. Writing one’s own narrative begins an important process of challenging who is deemed to be the legitimate voice for an illness and advocates for people with mental illnesses as important voices capable of raising vital issues about their own lives.

However, how is a discussion of zines about mental illness and disability culture relevant to art education and particularly ideas of multiculturalism? What can be learned from this exploration of the motivations behind zine writing, the disability arts movement, and disability culture? The pedagogical potential of zine making has been suggested already in art education (Blandy &
Blandy and Congdon (2003) described the use of zine making in multiple university courses. They found that “creating and distributing zines is a successful pedagogical strategy for encouraging students to participate in postmodern discourse” (p. 44). They described the writing and illustration of zines as “pastiche, parody, irony, and bricolage” (p. 46). Zines, through these postmodern practices, emerged in their curriculum as a “strategy for encouraging the development and distribution of ideas and social critique through images and text” (p. 45). In addition, Klein (2010) discussed the relevance of zine making to preservice art teacher education. She wrote, “zine formats allow preservice art teachers to examine and visualize assumptions, beliefs, and connections between theory and practice utilizing emotional, affective, aesthetic, and cognitive domains” (p. 42).

However, in addition to this pedagogical potential the intersection of zines about mental illness, the disability arts movement, and disability culture raises questions about the definition of culture itself. In 2003, Dipti Desai called on art educators to critique institutionalized understandings of culture. She argued that the exclusion of sexual diversity from multiculturalism pointed to the ways in which the conceptualization and institutionalization of a particular concept of culture made the inclusion of sexual diversity a discursive impossibility. While Desai challenged art educators to articulate “a concept of culture that best serves the complexity of diverse racial, ethnic, social class, gendered, and sexual communities in our society” (p. 147), she did not include disability in this list of diversities. Therefore, a recognition of disability culture within art education through such possibilities as the disability arts movement not only expands the concept of culture Desai articulated, but also challenges us to think about what it is about varying conceptualizations of culture that result in the exclusion of disability culture in the first place.

As this paper has described, zine writing is a critical component of the disability arts movement reflecting the movement’s desire to critique dominant representations of disability and to produce alternative representations. The disability arts movement is also a part of a larger disability culture. This complex culture, the understanding of which emphasizes its hybridity as the intersection of multiple complex identities and communities, is constructed not through traditional kinship and geography, but through a common experience of living as a disabled person. Within art education their remains a tendency, that Desai clearly identified in 2003, to limit definitions and understandings of culture in ways that exclude things like sexual diversity and disability. Zine writing about mental illness represents a complex form of artistic production that challenges both disability culture to recognize mental illness as a disability, and art education to understand disability as a culture.
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