

**AZA HOLMES'S OBSESSIVE COMPULSIVE DISORDER IN JOHN  
GREEN'S *TURTLES ALL THE WAY DOWN***

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**ABSTRACT**

This research examines Aza Holmes's Obsessive-Compulsive Disorder in John Green's *Turtles All the Way Down*. It identifies manifestations of OCD through Aza's intrusive thoughts and repetitive behaviors, which are deeply rooted in her childhood habits. The research aims to achieve three objectives: to identify and describe of OCD in Aza's character, to examine its causes, and to analyze its effects. The scope of this study limits to Freud's psychoanalytic lens and focuses on a textual analysis of OCD main character in the novel. The significance of this study is to offer insight into the complexities of OCD. Descriptive qualitative research design is used to involve gathering and analyzing data that are not numerical, but describes data related to the research topic. The study uses Sigmund Freud's theory of psychoanalysis, specifically the concepts of id, ego, and superego. The findings reveal that Aza's OCD is triggers by both internal conflicts and external stimuli, such as her fixation on contamination and habitual self-injury. Her compulsions, such as repeatedly reopens wounds and drinking antiseptics, highlight the debilitating nature of the disorder. The study underscores how OCD affects her ability to maintain social connections, navigate personal relationships, and sustain her self-concept understanding in coping with OCD. This research contributes to the discourse on mental health representation in literature and demonstrates the value of psychoanalytic approach in unpacking complex characterization. It provides a foundation for future studies on the intersection of mental health and literary analysis, enriching both academic and practical perspectives on OCD.

**Keywords:** *OCD, Aza Holmes's, Sigmund Freud's, Id Ego Super Ego*

**A. INTRODUCTION**

The phenomenon of obsessive-compulsive behavior, also known as Obsessive-Compulsive Disorder (OCD), is classified within the study of abnormal psychology. Furthermore Ramasamy et al., p. (2013, p. 2) it is one of the mental disorders that affects only certain aspects of an individual's personality. In addition abnormal behavior is generally considered deviant because it differs from the behavior of most people. Individuals with OCD are still able to engage in

social activities. However, they are often characterized by traits such as intolerance, being highly introverted, a dislike for humor, increased sensitivity, and difficulty in forming friendships. Therefore, the personality and interactions of individuals with OCD are considered unique and distinct from those of typical individuals. For example washing the hands repeatedly to make sure that they are completely clean, it is a type of cleaning disorder called obsessive compulsive disorder that affects habits in everyday life.

According to Fornaro et al., p. (2009, p. 2) everyday life unconsciously involves obsessive thoughts and compulsive behavior. For example, like going back to ensure that the lights have been turned off and the door has been closed. Despite being aware that there is little chance of contamination, as with refusing to eat with a spoon that has falling to the ground. OCD disorders can occur without someone realizing it.

According to Spielman et al., p. (2020, p. 581) Obsessions are intrusive, unwelcome thoughts and desires, while Compulsions are the need to do repetitive actions or mental activities in people with obsessive-compulsive disorder (OCD). OCD-related issues are typically brought on by life's stresses. This personality disorder develops as a result of stress. The death of a spouse, the loss of a family member, financial difficulties, family disputes, divorce, homelessness, unemployment, a family member attempting suicide, incarceration, and a family member ill are among the ten life events that can cause stress Spurgeon et al., p. (2001, p. 291). Long-term stress can cause disarray in thinking and a loss of mental control. OCD personality disorders are therefore more likely to develop in those who are under a lot of stress.

This issue is also described by John Green in his novel *Turtles All The Way Down*. The novel describes Aza Holmes, who suffers from Obsessive-Compulsive Disorder, as the main character. Her life is dominated by intrusive thoughts, particularly centered around fears of infection. These obsessive worries lead her to compulsive behaviors, such as excessive use of hand sanitizer and a relentless need to open and clean a wound on her finger to prevent imagined infections. Her OCD traps of obsession and compulsion, making her feel disconnected from her own mind and body. Her condition affects her relationships, as the intrusive thoughts often pull her away from the present, making it hard to focus on her friendships and romantic connections. Despite her desire to engage with those she cares about, the intensity of her mental struggles often isolates her, leaving her feeling alone and misunderstood.

The reason becoming the author in conducting this research on OCD experienced by Aza Holmes in the novel *Turtles All The Way Down* because the novel described how a mental disorder like OCD affects a person's daily life. The character of Aza Holmes, serves as example of someone living with OCD, including the challenges she faces in her social, emotional, and everyday life.

## **B. THEOETICAL REVIEW**

As outlined in the DSM-5 (2013, p. 235), Obsessive-Compulsive Disorder (OCD) is defined by the presence of obsessions and/or compulsions. Obsessions are intrusive, persistent thoughts, urges, or images that are unwelcome and

recurring, while compulsions are repetitive actions or mental processes performed in response to these obsessions. Commonly known as OCD, this condition is a complex mental health disorder characterized by cycles of intrusive obsessive thoughts and compulsive repetitive behaviors.

Lack of supervision as a childhood behaviour from parents, can be the formation of compulsive behavior caused by a habit, according to Demaria et al. (2021) Obsessive-Compulsive Disorder (OCD) condition commonly diagnosed in children and adolescents, with family playing a crucial role in the development of the disorder both genetic and behavioral factors. Family accommodation, on the other hand, involves parents actively participating in their child's compulsive rituals. This might include altering routines or helping the child avoid OCD triggers to reduce their distress and the time spent on compulsions.

The use of a psychological approach is to understand the characterizations in the novel. Thus, it can be demonstrated that a psychological approach enables to ascertain the emotions and psychological states of the character. In analyzing the research object, the author of this research employs Sigmund Freud's psychoanalytic approach id ego and super ego to explain the behavior associated with Obsessive-Compulsive Disorder, as it is a foundational concept in understanding human personality. This theory explores the mechanisms behind personality development and the origins of human thought, Giordano, (2020, p. 30).

### **C. RESEARCH METHODS**

This research applies descriptive qualitative method to answers statment of the problem. According to (Furidha Brylialfi Wahyu, 2024, p. 5) Qualitative descriptive data analysis also does not use statistical representation. This method is very effective for understanding certain experiences, viewpoints, or conditions, without relying on numerical or statistical data.

#### **Data Source**

The data are taken from the novel *Turtles All The Way Down*. This novel is write by John Green published on October 10 2017 and has 340 pages as data source. The data are in the words, phrases, sentences, group of sentences or passage that explain about a character who suffers from OCD in the whole story.

### **D. RESULTS AND DISCUSSION**

This section discusses research question formulation regarding Obsessive-Compulsive Disorder. In analyze Aza Holmes' Obsessive-Compulsive Disorder in John Green's *Turtles All The Way Down*, the discussion involves 4.1. Aza's OCD Portrayed in John Green's *Turtles All The Way Down*, 4.2. Cause of OCD, 4.3. Effect of OCD.

#### **Aza Holmes's Obsessive Compulsive Disorder in John Green's Turtles All the Way Down**

Aza Holmes, a 16 years old woman, suffers Obsessive Compulsive Disorder. She has a lot of difficulty going about her day because of her OCD. She is always bothered by her own thoughts about wounds that can cause severe infections if not treated immediately. In addition, she has friends who support her

and help get through the difficult days that she is going through

### Obsession

Obsessions are intrusive and upsetting thoughts, images, or urges that appear in a person's mind unexpectedly and unwelcome DSM-5 (2013). They are persistent ideas that can take over someone's thinking, often sticking around even when the person tries to push them away. These recurring thoughts are tough to shake, making it difficult to feel in control, which can cause significant anxiety or distress. The uncomfortable thoughts that Aza's feeling are a description of the obsession she experiences, causing fear, discomfort about something that interferes with how Aza's lives her day as in the quotation below.

"I felt my stomach begin to work on the sandwich, and even over everybody's talking, I could *hear* it digesting, all the bacteria chewing the slime of peanut butter—the students inside of me eating at my internal cafeteria. A shiver convulsed through me." (Green 2017, : 8)

The quotation above shows how OCD can make Aza's mind disturbed and burdened. When she finishes eating the sandwich she feels the inner workings of her body. The process of her stomach digesting the sandwich don't feel normal to her. It feels strange and unsettling, making her uncomfortable. The way she imagines chewing bacteria and her stomach as an internal cafeteria shows how her mind fixates on these details. It makes her discomfort increase and pulling her deeper into obsessive thoughts. Aza's reaction is more than just overthinking. She also feels a physical response to her obsession. The trembling she feel shows how OCD is not only in her mind but also affect her body, creating a cycle of mental and physical distress. Her focus on digestion turns what should be a natural, unconscious process into something repulsive and difficult to overcome. The intrusive thoughts continue to recur when her friend Daisy comes to sit with her and have a conversation, but Aza is still disturbed by the thoughts that disturb her about the bacteria she ingested. Her focus is broken in the middle of a conversation. it can be seen from the quotation below.

"Aren't you listening?" Daisy asked. *I am listening*, I thought, *to the cacophony of my digestive tract*. Of course I'd long known that I was playing host to a massive collection of parasitic organisms, but I didn't much like being reminded of it. By cell count, humans are approximately 50 percent microbial, meaning that about half of the cells that make you up are not yours at all. There are something like a thousand times more microbes living in my particular biome than there are human beings on earth, and it often seems like I can *feel* them living and breeding and dying in and on me. I wiped my sweaty palms on my jeans and tried to control my breathing. Admittedly, I have some anxiety problems, but I would argue it isn't irrational to be concerned about the fact that you are a skin-encased bacterial colony. " (Green, 2017, : 8)

The quotation above shows how obsession can turn a simple thought into something disturbing. It pulls Aza away from the present moment and loses focus when Daisy speaks to her. She fixates on the thought of her body as a colony of bacteria encased in skin. A thought that seems harmless or trivial to others becomes deeply unsettling to her. The thought of microbes living inside her feels

real, like she can feel them moving. This obsession turns a simple fact into something that make her anxious and uncomfortable. For Aza, this obsession is not just an absurd thought but it affects her physically. She can feel her anxiety through the sweat on her palms and difficulty breathing. The thought of, “50 percent microbes” (Green,2017:8) does not seem scary, but OCD makes it feel much worse. This obsession make her feel disconnected from her body, overwhelmed by the thought of all the microbes living inside her. The fact that there are a thousand times more microbes than people further adds to her obsession. She cannot escape the idea of how huge and uncontrollable it is. Not only that, Aza's intrusive thoughts cause her to hallucinate a little, it can be seen from the quotation below.

“and meanwhile I was thinking that if half the cells inside of you are not you, doesn't that challenge the whole notion of me as a singular pronoun, let alone as the author of my fate? And I fell pretty far down that recursive wormhole until it transported me completely out of the White River High School cafeteria into some non-sensorial place only properly crazy people get to visit“. (Green, 2017 : 11)

The quotation above illustrates how OCD can turn a small thought into a huge spiral. For Aza, realizing that half the cells in her body is technically not hers become an expression of how she feels about herself. Curiosity becomes a mental loop that takes over her focus and distances her from reality. Aza's description of a recursive wormhole explains how the OCD thoughts trap her. The thoughts keeps repeating endlessly, dragging her deeper and deeper into questions that never has clear answers. The more she thinks about it, the more she feels disoriented, until the thoughts completely consume her mind. She feels disconnect from the world around her, as if she has been pulled out of the cafeteria and into a strange, isolated mental space. It is not something she chose but it is a loss of control over her obsession. It shows how the obsession forces her into a cycle she can't escape. Aza's obsession is very difficult to control as in the quotation below.

“All the while, I was breathing in through my nose and out through my mouth, in the manner advised by Dr. Karen Singh, exhaling at a pace “that would make a candle flicker but not go out. Imagine that candle, Aza, flickering from your breath but still there, always there.” So I tried that, but the thought spiral kept tightening anyway. I could hear Dr. Singh saying I shouldn't get out my phone, that I mustn't look up the same questions over and over, but I got it out anyway, and reread the “Human Microbiota” Wikipedia article. The thing about a spiral is, if you follow it inward, it never actually ends. It just keeps tightening, infinitely.” (Green, 2017 : 14 )

The quotation above shows how overwhelming and persistent Aza's obsession is. She tries to calm herself down with the breathing exercises taught by Dr. Singh, but her mind keeps going round and round. The spiraling thoughts she describes show how obsession pulls her deeper into repetitive and disturbing thoughts, tightening its grip no matter how hard she tries to stop it. The endless spiral, makes her feel trap in a loop she can not break. She tries to read Wikipedia articles to find out about her thoughts, even though she knows it will not help, demonstrating the compulsions that accompany OCD. She understands that

checking the same information will only worsen her obsession, but the urge to check is too strong to resist. This action shows the frustrating cycle of OCD as the help she feels after rereading is only for a moment, and her obsession soon returns. Her struggle shows how OCD forces a battle between logic and compulsions. She is aware of Dr. Singh's advice and realizes that her actions will not help, but the disorder trumps her reasoning. She hopes for a reminder of the stability of her obsession she feels distant as the spiral pulls her deeper. The quotation below shows that she wants to get rid of the obsession but cannot.

"Okay." I wanted to say more, but the thoughts kept coming, unbidden and unwanted. If I'd been the author, I would've stopped thinking about my microbiome. I would've told Daisy how much I liked her idea for Mychal's art project, and I would've told her that I did remember Davis Pickett, that I remembered being eleven and carrying a vague but constant fear." ( Green, 2017 : 15 )

The quotation above shows how obsession in OCD can take over Aza's mind, keeping her stuck in a loop that she does not want to be in but can't avoid. She wants to stay focuses when talking to Daisy. She shares her thoughts, but her mind keeps focusing on unwanted ideas about the microbes present in her body. This struggle shows how frustrating and exhausting it is for her. She struggles between what she wants to think and what her obsessive mind is forcing her to stay focuses on she conversation with Daizy. This moment also shows how OCD isolates Aza emotionally. She is physically with Daisy, but her mind is caught up in its own battle. It makes her feel disconnected the weight of her thoughts stops her from fully engaging with others. It creates a chasm between herself and the world around her. It is not just the obsession itself that is painful, but how it stops her from connecting with others and expressing herself. She feels that everything she does is something that has been arranged by other people even though it is not what she imagines, like the quotation below.

"Who decides when the bells ring?" I asked. "Like, the school bells?"  
"You know what, I have no idea. I suppose that's decided by someone on the superintendent's staff.

"Like, why are lunch periods thirty-seven minutes long instead of fifty? Or twenty-two? Or whatever?"

"Your brain seems like a very intense place," Mom answered.

"It's just weird, how this is decided by someone I don't know and then I have to live by it. Like, I live on someone else's schedule. And I've never even met them."(Green, 2017:16)

The quotation above shows how obsession makes her everyday thoughts turn into deep and overwhelming worries. For her the sound of the school bell is not just a normal part of the day but a reminder of how little control over life she feels. She fixates on the randomness of decisions, such as the length of lunch time, as a way to grapple with the uncertainty. She feels in the world the idea that someone she has never met decides her schedule. It makes her uneasy, turning something small into a powerful symbol of the lack of pressure caused by her obsession. Her thoughts reveal how obsessions often center on the need for certainty and control. She not only want to know why things are the way they are,

but also she gets stuck on the idea that these decisions feel arbitrary to define her life. This obsession creates a mental loop, where unanswered questions only make her more anxious. This shows how OCD can take normal aspects of life and make them feel overwhelming and threatening.

### **Compulsive**

Here Aza who performs compulsive behaviors is often aware that actions are unreasonable or unnecessary, but she still feels compelled to do them to get helps, even if only temporarily. In obsessive-compulsive disorder, her compulsive behaviors arise in response to obsessions, which are intrusive thoughts that are difficult to eliminate. She is often bothered by the wound she has. She often opens the wound repeatedly assuming to remove the infection in the wound or she repeatedly removes the band-aid wrapped around the wound. These compulsions not only drain energy, but also interfere with daily life as they are time-consuming and create frustration for Aza, as in the quotation below.

"But sometimes I get worried that there already is an infection, and so I need to drain it, and the only way to do that is to reopen the wound and press out any blood that will come. Once I start thinking about splitting the skin apart, I literally cannot not do it. I apologize for the double negative, but it's a real double negative of a situation, a bind from which negating the negation is truly the only escape. So anyway, I started to want to feel my thumbnail biting into the skin of my finger pad, and I knew that resistance was more or less futile, so beneath the cafeteria table, I slipped the Band-Aid off my finger and dug my thumbnail into the callused skin until I felt the crack open." (Green, 2017 : 10 )

The quotation above shows her compulsive behavior. The id drives her to act on her obsession, even though she knows it can hurt her. The thought of reopening the wound is not just a minor concern. It turns into something she feels she must do. The need to drain the infection becomes so strong. It is no longer about logic, but rather an urge she can't control. When she calls it a double negative, what she means is that the only way to stop the pressure in her mind is to act, to ease the discomfort of not doing something. It is the role of the ego as a way of suppressing the id. At this point, the urges are not just about eliminating the obsession but about feeling trapped in her own mind, where giving up seems to be the only way out. She knows that resisting feels futile. This makes her feel even more confined. She understands that the urge is unreasonable, but it is still impossible to resist. The id urge makes her use her thumb to reopen the wound. It is not only a physical act, but also a sign of battle in her mind. She not only wants to do it, but also feels that it is the only way to ease the tension within her. The way the thought repeats itself, getting stronger until she can't help it, shows how compulsive OCD works. Every time she gives in, it may give her for a moment helps, but it does not last. Her habit of reading an article about a disease makes her compulsive to reduce her fear of her disease, it can be seen from the quotation below.

"I needed to reread that case study of the woman who had no symptoms except a stomachache and turned out to have C. diff. Can't get out my phone right now, though—she'll get pissed off—but did that woman have some other symptom at least, or am I exactly like her? Another twinge." (Green, 2017:110)

The quote above illustrates how compulsions in OCD lead to repetitive actions or mental behaviors driven by obsessive thoughts. She feels an urgent need to reread a case study, which shows how compulsions often arise as an attempt to reduce anxiety caused by obsessions. Her thought process focuses on seeking reassurance that her situation might be the same as the woman in the case study, but this compulsive need for reassurance only reinforces her obsession. The inability to access her phone as Dr. Singh may have been aware of her behavior to search for the article on her smartphone because her habit to relieve her obsession shows how compulsions are not only physical acts but also mental rituals that people feel they must complete to find help. Her fixation reflects how compulsions in OCD are triggered by doubts and fears. That traps her in a cycle of seeking information to ease her distress. This behavior ultimately reinforces her obsessive thinking. Her compulsions often fail to provide comfort, keeping the individual trapped in a repetitive and distressing loop of thoughts.

“It isn’t infected. It bleeds because it hasn’t scabbed over. But it could be. It isn’t. Are you sure? Did you even clean it this morning? Probably. I always clean it. Are you sure? Oh, for fuck’s sake.”(Green, 2017:248)

The quotation shows how Aza's OCD urges can take over her mind and make her feel trapped in a constant loop of doubt. She tries to convince herself that her wound is not infected, but no matter how much she told herself that it is fine. She keeps questioning it. She knows that she has probably cleaned it, but the need to be absolutely sure keeps pulling her back to the same line of thought. This back and forth feels exhausting and frustrating, when she ends her internal argument with, “Oh, for God's sake”(Green, 2017:248). This moment highlights how her obsession, is actually unhelpful. Instead of calming her fears, it actually makes her anxiety worse by forcing her to repeat the same thoughts over and over again. Her mind will not let her move forward because she feels like she hasn't reached the perfect level of certainty. This shows how her OCD compulsions are not just a habit but a powerful cycle that makes it difficult for her to be at peace with her own thoughts.

“I washed my hands, put on a new Band-Aid, but now I was being pulled all the way down. I opened the medicine cabinet quietly. Took out the aloe-scented hand sanitizer. I took a gulp, then another. Felt dizzy. You can’t do this. This shit’s pure alcohol. It’ll make you sick. Better do it again. Poured some more of it on my tongue. That’s enough. You’ll be clean after this. Just get one last swallow down. I did. Heard my gut rumbling. Stomach hurt.”(Green, 2017:248)

The quotation above shows how Aza's compulsive behavior can drive her thoughts to extreme and dangerous behaviors in an attempt to find help from their obsession. Her thoughts being infected takes over her actions. It drives her to drink the hand sanitizer even though she knows that it is dangerous. Her thoughts appear the internal battle of OCD. She knows it will make her sick, but the overwhelming need to avoid infection of her wound overrode her rational judgment. The repetitive nature of her actions suggests how the compulsions are driven by a strong, and uncontrollable urge to satisfy her obsessive thoughts. Her internal dialog reflects the false sense of help promised by compulsions. She tells herself, “That's enough and you'll be clean after this, but that reassurance is while



and comes at a cost”(Green,2017:248). Instead of resolving her anxiety, the compulsion only increases her distress. It leads to further physical discomfort and self-doubt. OCD traps her in a destructive cycle. Compulsions meant to assuage her fears only make things worse, both mentally and physically. Her habit of drinking cleaning fluid is a compulsive trait caused by the id urge to satisfy her obsession.

### **Cause of OCD**

The cause of Aza's OCD is due to her childhood habit of sticking her right thumb nail into her middle finger. She does it repeatedly to feel the sensation of her thumb nail stuck in her middle finger, as in the quotation below.

“Ever since I was little, I’ve pressed my right thumbnail into the finger pad of my middle finger, and so now there’s this weird callus over my fingerprint. After so many years of doing this, I can open up a crack in the skin really easily, so I cover it up with a Band-Aid to try to prevent infection.” (Green, 2017 : 11 )

The quotation above shows how the cause of her compulsive habit is affected her by habit of treating her wound by reopening the wound. The obsession arises when the wound is not treated immediately. It cause a severe infection that can make her stomach hurt from the infection. She thinks that the infection will appear because millions of microbes inside her attack the wound. There is also a cause that triggers her obsession. For examples when she experiences failure in her first year which causes her to feel that there are already people who determines her life path. It is shown in the quotation below.

“I’m fine.”

“You’ve been taking your meds,” she said. Again, not a direct question.

“Yeah,” I said, which was broadly true. I’d had a bit of a crack-up my freshman year, after which I was prescribed a circular white pill to be taken once daily. I took it, on average, maybe thrice weekly.

“You look . . .” Sweaty, is what I knew she meant.” (Green, 2017:16)

The quotation above shows Aza struggle with mental health. She struggles the relationship with medication and her own thoughts to suppress the obsession. The mention of her meltdown during the first year hints at a breaking point in time when stress or some overwhelming experience push her to face challenges in her own mind. Her stressful moments like this can often act as a catalyst for conditions. Her mind's natural ability can process and manage her obsessions. When she picks up on what others are not saying directly “Sweating, that's what I know she means”(Green, 2017: 16) is the moment that shows her keenly aware of other perceptions. This sensitivity relates to her own fear of being judge or not meeting standards. Most stand out is the tension between her inner world and the expectations around her. This tension often triggers her cycle of obsessive thoughts. Every action or every response becomes part of a mental loop that she is trying to stop. It's not just about medication or for a moment awkwardness. It's about how deeply she feels everything, and how those feelings shape her understanding of herself and her place in the world.

The cause of the thoughts suffered by OCD sufferers usually looks trivial. The fear of coming into holding hand with other people makes her feel scared, it can be seen from the quotation below

“You’re watching TV with your mom—this show about time-traveling crime solvers—and you remember a boy holding your hand, looking at your finger, and then a thought occurs to you: You should unwrap that Band-Aid and check to see if there is an infection.” (Green, 2017 : 58 )

The quotation above shows Aza's panic. After Davis looks at her finger and holds her hand, it quickly turns into a source of pent-up fear. Sitting next to her mother, trying to focus on the TV, her mind will not let her rest. All she can think about is the touch of Davis's skin on hers. The lingering worry can cause an infection. Her mind keeps replaying the moment endlessly, She can't avoid about this. This reaction reflects the core of her struggle with OCD. It's not about what's logical. It's about her mind's desperate need for certainty in a world full of unknowns. A simple gesture like holding hands, becomes a source of overwhelming her anxiety. A small doubt develops into an uncontrollable barrage of her fears. She is trapped in a cycle she can't escape.

### **Effect of OCD**

Obsessive-Compulsive Disorder (OCD) can lead to significant negative consequences for those affected. These include disruptions in social interactions that interfere with daily activities. Individuals with OCD may also face physical health challenges and may experience intense urges to harm themselves as a means of relief. Aza's OCD greatly effect her daily life and mental well-being, making it difficult for her to enjoy social activities or maintain harmonious relationships. At times, she struggles to control her obsessive thoughts and often blames herself for the distressing ideas occupying her mind.

“Like, parts of typical romantic relationships that made me anxious included 1. Kissing; 2. Having to say the right things to avoid hurt feelings; 3. Saying more wrong things while trying to apologize; 4. Being at a movie theater together and feeling obligated to hold hands even after your hands become sweaty and the sweat starts mixing together; and 5. The part where they say, “What are you thinking about?” And they want you to be, like, “I’m thinking about you, darling,” (Green, 2017 : 55)

The quotation above shows the OCD can have an effect on a relationship.. For her, things that may seem sweet or normal to others-like kissing, holding hands, or sharing feelings become the source of disgusting. She gets caught up in her thoughts, worrying about whether she is doing or saying the right thing. She becoms more anxious because she is afraid of saying something wrong again. Physical closeness, such as holding hands while watching a movie, does not make her comfortable. It makes her distress. She focuses on things like sweaty palms and how uncomfortable it feels, instead of enjoying the moment. For her OCD does not let her experience things naturally. It makes everything a cycle of overthinking, and feeling like a failure, even in the smallest of moments. The effects of her OCD also sometimes affect her obsession as in the quotation below.

“I feel like I might not be driving the bus of my consciousness,” I said.  
“Not in control,” she said.

“I guess.”

Her legs were crossed, and her left foot was tapping the ground like it was trying to send a Morse code SOS. Dr. Karen Singh was in constant motion, like a badly drawn cartoon, but she had the single greatest resting poker face I’d ever seen. She never betrayed disgust or surprise. I remember when I told her that I sometimes imagine ripping my middle finger off and stomping on it, she said, “Because your pain has a locus there,” and I said, “Maybe,” and she shrugged and said, “That’s not uncommon.” (Green, 2017:104)

The quotation above illustrates how Aza's OCD greatly affects the way she understands herself and the world around her. She says that she feels unable to drive the bus of her subconscious. It is a way of explaining how she is unable to control her thoughts. Obsession rules herself. She makes herself feel like a passenger in her own life. She is unable to stop the constant loop of worry and discomfort. The nagging thinking is about pulling out her middle finger. She wants to stomp on the stump because of the pain center in the middle finger. It is not something she wants to do. It is just her mind's way of trying to process the anxiety about the constant pain in her middle finger. It is the nature of her OCD that twists ordinary experiences into something that she feels unbearable and unavoidable from an obsession. Dr. Singh's response helps her not to feel alone. She shows her that these intrusive thoughts don't make her weird or broken but they have just part of how OCD works. For her, who is already struggling to feel normal, this kind of reassurance can be comforting. Sometime she is not confident and cruel to her life, it is shown in the quotation below.

“It sounds to me like you’re being cruel to yourself.”

After a moment, I said, “How can you be anything to your self? I mean, if you can be something to your self, then your self isn’t, like, singular.” (Green, 2017 : 105)

The quotation above shows how OCD affects Aza’s feeling about herself and how she relates to her own thoughts. Dr. Singh points out that she is being cruel to herself. It highlights her OCD often makes bad statements towards her own thoughts and actions. She not only struggles with the intrusive thoughts caused by OCD, but also blames herself for not being able to stop them. Her answers show she feels confused and disconnected. She questions it is the possibility to be oneself. She feels her mind is divided. One part experiencing anxiety, and the other observes and judges her. This split makes her feel incomplete as if her mind is working against her. Instead of finding peace in her own mind, she feels like she is fighting with herself. She not only brings unwanted thoughts but also changes the way she sees herself. It makes her feel disconnected and lonely it disrupts her daily life. It can be seen in the quotation below.

“Do you feel like your thought patterns are impeding your daily life?”

“Uh,yeah,”I said.

“Can you give me an example?”

“I don’t know, like, I’ll be at the cafeteria and I’ll start thinking about how, like, there are all these things living inside of me that eat my food for me, and how I sort of am them, in a way—like, I’m not a human person so much as this

disgusting, teeming blob of bacteria, and there's not really any getting myself clean, you know, because the dirtiness goes all the way through me. Like, I can't find the deep down part of me that's pure or unsullied or whatever, the part of me where my soul is supposed to be. Which means that I have maybe, like, no more of a soul than the bacteria do." (Green, 2017 : 106)

The quotation above shows her OCD affects her daily life by filling her mind with intrusive and overwhelming thoughts. When she is in the cafeteria, a simple activity like eating triggers a series of obsessive ideas about the bacteria living her. Instead of focusing on the food or her surroundings, she gets caught up in thoughts about her dirty and unclean body. Her uncontrollable obsession triggers questions about the image that she feels as nothing more than a clump of bacteria. This makes her feel as if she lacks something essential, like a soul. Her OCD also turns small worries into much bigger problems. It makes her feel disconnect from herself and unable to find peace. These thoughts take over her mind and stop her from living in the moment. Her everyday tasks feel difficult. Her overwhelming OCD not only plagues her but also controls the way she thinks. She pulls her away from the world around her and into a constant cycle of fear and doubt.

## E. CONCLUSIONS

After analysis of the novel, *Turtles All The Way Down*, it is found out that Aza's Obsessive Compulsive Disorder affect her life, relationship, and her thinking creating a cycle of intrusive thoughts and compulsive behaviors that she struggles to control. Aza's Obsessive-Compulsive Disorder (OCD) significantly affects her daily life, relationships, and thought processes. Her OCD portrayal as intrusive thoughts and compulsive behaviors, such as reopening healed wounds, obsessively changing band-aids, and drinking hand sanitizer to "eliminate bacteria." These habits stem from obsessive fears and childhood experiences. Her condition also effect her relationships, as she struggles to focus during conversations and feels insecure about her wounds and the possibility of infection. Despite these challenges, the support of her family and friends helps her manage her OCD and improve her quality of life.

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