Mental illness and the media
The 13th Royal College Christmas Lecture for Young People

Stigmatising opinions about mental illness are more common among young people than older people (Yarney, 1999). Whether the media should carry responsibility for this was the subject of the College’s 13th Christmas Lecture for Young People. Over 300 school children gathered in central London to take part in a debate on the role of the media in the portrayal of mental illness. Alison Lowe introduced the debate by illustrating how common mental illness is. She invited everyone to look at the eight people sitting around them before adding, “in your lifetimes at least one of you will see a psychiatrist.”

A year after the launch of the College’s anti-stigma campaign, Changing Minds: Every Family in the Land (Cowan & Hart, 1998), younger family members were invited to consider the motion:

“This house believes that the media are responsible for the stigma, prejudice and ignorance which surrounds mental illness.”

The four speakers who accepted the challenge of the debate were all practising psychiatrists, as well as having personal experience of working with the media.

For the motion

The two speakers proposing the motion used examples from television and the cinema to illustrate how and why the media stigmatise mental illness. The first speaker, Mark Saltzer, described how he had become disillusioned with a media career. “Television is smaller than life,” he suggested, and is unable to cope with the complexity and variety of mental health problems. Informed discussion is edited down to sound bites and mental illness is portrayed as a homogenous concept.

Saltzer then used video clips to suggest that an accurate portrayal of the management of mental illness does not ‘sell’. Television is not interested in realism, he proposed. Instead, it portrays those with mental illness as violent and dangerous in an attempt to increase audience ratings.

Seconding the proposal was Peter Byrne, whose particular interest is the representation of mental illness by the cinema (Byrne, 1998). Byrne contested that the media, as our major source of information about the world, should accept responsibility for their portrayal of those with mental illness. He drew on examples from films to support the motion.

The “dooling maniacs” of the cinema, Byrne suggested, have become society’s “new boogeymen”. The serial killer Freddie Kruger, “the son of a thousand maniacs” from A Nightmare on Elm Street, was instantly recognisable to the young audience. The much filmed tale of Dr Jekyll and Mr Hyde plays on public fears of the danger posed by the mentally ill. Alfred Hitchcock’s

Psycho perpetuates the myth of schizophrenia being a problem of ‘split personality’.

Byrne’s use of film stills and movie posters reinforced his message that “the image has the last word”. He concluded with the suggestion that mental illness is the final prejudice which society has to confront. Racism and sexism are unacceptable, but we lack an equivalent term for the prejudice which surrounds mental illness.

Against the motion

The opposers of the motion acknowledged that the media can present a stigmatising image of mental illness. However, they asserted that the media are not responsible for creating this image. The speakers may have made their audience uneasy by suggesting that the media’s portrayal of mental illness reflects what the public want to see and they cautioned against confusing the medium with the message. Both speakers also invited the medical profession to examine its role in perpetuating the stigma surrounding mental illness.

Raj Persaud argued that the media are often scapegoated for society’s problems. He cautioned psychiatrists against emulating politicians who blame the media in order to divert attention from their own responsibility. In his experience, psychiatrists tend to be suspicious and antagonistic towards journalists. The media work under tight deadlines and are often unable to find a reasoned and rapid medical comment on a story. Hence, journalists will turn to other, less appropriate sources of information when discussing mental illness.

Persaud urged the psychiatric profession to devote more energy to its relationships with the media. He pointed out the power of the media to influence behaviour, citing the rise in overdoses following an incident of self-poisoning in BBC television’s Casualty (Hawton et al, 1999). However, he suggested that this power should not be criticised, but used to dispel stigma.

Simon Wessely asserted that the medical profession are culpable in perpetuating stigmatising myths about mental illness. The mind-body split in Western thinking influences both public attitudes and medical opinion. Wessely gave examples where physicians had suggested that mental health problems could be explained by a lack of will-power. It would then not be surprising, Wessely asserted, that patients are reluctant to consider a psychological component to their illness if this implies that they are simply lazy.

Wessely argued that such misunderstanding about the causes of mental illness predates the modern media. His description of historical explanations of mental illness
included witchcraft, which resulted in the deaths of over 400,000 people in Britain.

The verdict

Both sides in the debate agreed that the media’s portrayal of mental illness is often stigmatising, but the argument hinged on where responsibility lies. After lively discussion, illustrated with multimedia presentations, the motion was put to the vote. It was carried with two-thirds of the audience voting for the motion and one-third against. Perhaps audience members were reluctant to recognise their responsibility for stigma, or maybe they were persuaded by the proposers’ case.

Comment

The Christmas Lecture for Young People is an important College initiative. This year’s debate enabled complex arguments to be aired in an engaging and entertaining way. It was a refreshing change from psychiatry’s shades of grey to adopt the black and white adversarial style of the courtroom. The four speakers entered into the spirit of the occasion and the occasional personal jibe was mixed with comment and conjecture.

Regardless of their final opinion, the audience will be more aware of how discrimination in the media can be subtle and undermining. The clear, but persuasive, style of the speakers also carried a lesson for practising psychiatrists. Simple facts are unlikely to change opinions rooted in fear. We have to consider how we deliver our message if we want to change public attitudes. If we are to advocate successfully for our patients in reducing the stigma of mental illness then we must learn the skill of communicating successfully through the media.

References


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