



Comprehensive review of interpretations and Role of Media in elucidating the issue of Mental illness to public

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Received: 6-Dec-2017 Accepted on: 2-Mar-2018 Published on: 7-Apr-2018

ABSTRACT

Mental illness comprises a broad range of problems, with different symptoms. They are generally characterized by some combination of abnormal thoughts, emotions, behavior and relationships with others. The lives of people with mental health conditions are often plagued by stigma and discrimination. Many studies have found that media and the entertainment industry play a key role in shaping public opinions about mental health and illness. People with mental health conditions are often depicted as dangerous, violent and unpredictable. Such prejudices are a result of opinion formation that is largely due to influence of media. The present review focuses on the factors that depict influence of media on attitude formation of public and society. The review further examines the level of awareness for mental illness among public and role of media in creating that awareness and also further assess the scope of media intervention in the field of mental illness. The objectives of the review was to understand the role of media in creating awareness regarding mental illness among public; to understand the availability and portrayal of information regarding mental illness in electronic media and print media; and to understand the potential scope of media intervention for mental illness in India.

Keywords: Mental illness; Mental Health; Media; National Mental Health Programme (NMHP)

Introduction

The terms insanity, abnormality, and psychological disorder, mental illness, psychopathology and emotional disturbance would have a similar meaning for laymen. Since in a general context, these are all applied to behavior that is highly unusual. Most of the times, the general public do not differentiate in either of these terms when it comes to implementing them.

Combining these points, one can define mental illness as disturbance of individual's behavioural or psychological functioning that are not culturally accepted and that lead to psychological distress, behavioural disability, and/or impaired overall functioning (Nietzel, Speltz, McCauley, & Bernstein, 1998).

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Cite as: *Integr. J. Soc. Sci.*, 2018, 5(1), 15-21.

©IS Publications

IJSS ISSN: 2348-0874

<http://pubs.iscience.in/ijss>

In terms of psychological dimensions to mental illness, there are two important dimensions namely feeling and functionality. Feeling refers to levels of psychic distress and pain being experienced by the person. Functionality refers to the lack of capacity to coordinate the flow of resources in a desired or adaptive way. Mental illness is perceived when there are high levels of distress and dysfunction at the psychological level of analysis. (Henriques, 2012).

History of Mental Illness

During the end of 17th century, people with mental illness were viewed as "insensitive wild animals". Harsh treatment like tying the person in chains was seen as a therapeutic action to suppress the animal passions (Laffey, 2003).

But at the end of the 18th century, the way of treatment involved more humane, psychosocial and personalized approaches. Together they constituted what can be called as a moral treatment movement. Some of the pioneer personalities of the movement included Vincenzo Chiarugi, Philippe Pinel, William Tuke, Dorothea Dix (Dalby, 1993).

During the 19th century, which saw a sharp rise in both industries and population, also evidenced a massive expansion of the number and size of insane asylums in every Western country. This process was called "the great confinement" or the "asylum era". During this phase, laws were introduced to compel authorities to deal with those judged insane by family members and hospital superintendents. They were originally based on the concepts and structures of moral treatment. However, they became large impersonal institutions

overburdened with large numbers of people with a complex mix of mental and social-economic problems (Wright, 1997).

Numerous different classification schemes and diagnostic terms were developed by different authorities, which took anatomical-clinical descriptive approach. The term "psychiatry" was coined for the first time during this period. Asylum superintendents, who were later known as psychiatrists, were generally called "alienists" during this phase because they were thought to deal with people alienated from society (American Neurological Association, 2008).

In the later part of 20th century various psychiatric medication gradually came into use, such as "psychic energizers" and lithium. Benzodiazepines gained widespread use in the 1970s for anxiety and depression. Advances in neuroscience and genetics led to new research agendas. Cognitive behavioural therapy was developed. Through the 1990s, various antidepressants became some of the most widely prescribed drugs in the world (Strous & Rael, 2007).

Review of Literature

Causes of Mental Illness

Mental illness is not a personal weakness. Various factors like genetic, biological, psychological, social and environmental factors come together to cause mental disorder (Upadhyaya, 2013).

Mental health problems can have a wide range of causes. In most of the cases there is no precise cause that is underlined for a particular problem. However Biological, Psychological, Sociocultural, and Diathesis-Stress Models provide a more accurate and complete picture of such illness (Baron, 2002). On a wider perspective there are many dimensions to the causes of mental illness which might include biological, psychological and social.

The biological model emphasizes the role of nervous system in mental illness. This approach seeks to understand such disorders in terms of malfunctioning of portions of brain, imbalances in various neurotransmitters and genetic factors. The psychological perspective emphasizes the role of basic psychological processes in the occurrence of mental disorders. For instance, many psychologists believe that learning plays a key role in many disorders. A third view regarding the causes of mental illness is the diathesis-stress model. This suggests for various reasons like genetic factors, early traumatic experiences, specific personality traits—individuals show varying degree of vulnerability to specific mental illness. Whether and to what extent an individual might actually experience such disorders, depends on the environment in which the person lives (Baron, 2002).

Classification of mental illness

One of the most widely used manual for classifying different mental illness is Diagnostic and Statistical Manual of Mental Disorders (DSM). Basically published by the American Psychiatric Association, the manual is designed to help all the mental health practitioners correctly identify specific disorders (Baron, 2002).

Serving as the guide for diagnoses in the biomedical healthcare system, the DSM includes mental health diagnoses that range from more prevalent disorders, such as depression and anxiety, to less common ones, such as schizophrenia (Varcarolis & Halter, 2009).

One of the sources of stigma against mental illness includes the prevalence of newspaper articles that frequently link crimes committed by individuals with mental health issues who have a psychiatric history. In a study it was discovered that many U.S. newspaper stories sampled during 2002 mentioned dangerousness and violence in connection with consumers, and most of these were near the front of the newspaper (Corrigan P., et al., 2005).

The definite general impression of mental illness differs in accordance to cultures and nations. Untreated mental illness significantly costs to society (United for Sight, 2015). According to a report of WHO, it is estimated that mental health problems cost developed nations between three and four percent of their GNP (gross national product) (World Health Organisation, 2017). When mental illness expenditures and loss of productivity are both taken into account, the WHO estimated that mental disorders cost national economies several billion dollars annually (Kessler, Foster, Saunders, & Stang, 1995).

According to a report by World Health Organisation, 450 million people suffer from a mental or behavioural disorder around the world. The number of individuals with disorders is likely to increase further in view of the ageing of the population, worsening social problems and civil unrest. A report by world health organisation also reflects that more than 150 million persons suffer from depression at any point in their lifetime and nearly 1 million commit suicide every year. In terms of specific disorder, it is reported that about 25 million suffer from schizophrenia and more than 90 million suffer from an alcohol- or drug-use disorder (World Health Organization, 2012).

Stigma related to mental illness

Mental illness is one of the most stigmatized conditions in the society. People with mental illness experience all of the key features of the stigma process like they are officially tagged and labeled, set apart from the society, connected to undesirable characteristics, and broadly discriminated in various forms. Several sources of negative attitudes toward people with mental illness include labels; behaviors; attributions; misinformation, particularly regarding the association between violence and mental illness and lack of contact. A central aspect of stigma for people with mental illness is the perception that they are dangerous and unpredictable (Link & Phelan, 1999).

Also, there are numerous negative effects of stigma on people such as difficulties obtaining housing, discrimination among employers hiring practices, loss of family and social support, and self-stigma. The amount of stigma experienced is so powerful that some consumers report it is more debilitating than the illness itself (Wilkinson, 1995).

While stigma certainly impacts quality of life in many different areas, stigma itself has been cited as the primary reason why individuals do not seek out services when they are needed. For instance, the Surgeon General's first comprehensive report on mental health in 1999 identified the stigma and discrimination associated with mental illness as major barriers deterring people with mental illness from acknowledging their mental health problems and seeking treatment (U.S. Department of Health and Human Services, 1999). Many contend that stigma is a major reason most of population in United States of America experiencing mental illness yearly will not seek mental health services (Brown & Bradley, 2002).

Self-stigma can be an essential factor that hampers help-seeking behaviors and the quality of treatment by individuals with mental illness (Ikeme, 2012). Mentally ill persons can internalize the stigma that is prevalent within society and come to believe and act as if the stigma is real and legitimate (Jost & Banaji, 1994). Some individuals with mental illness may believe that they are less valued than others in society and literally underestimate themselves and their potential contributions to society. As a result, individuals with mental illness might avoid employment or choose not to obtain for some task or in a job because of fear of failure, internalized self-stigma, which ultimately translates into self-hatredness (Balsa & McGuire, 2003).

Hence, many people living with self-stigma of mental illnesses have experienced hopelessness sinking self-esteem, diminished self-efficacy and sometimes despair. Numerous aspects of these mental states can lead to suicide. It is considered one of the most devastating outcomes associated with mental illness (Pompili, Mancinelli, & Tatarelli, 2003).

Mental Illness in India

In India, at least 5 percent of the population lives with a mental illness, which is around 50 million of people. These also have a close association with the rate of suicides, cardiovascular health and several days of productivity lost. Nearly half of those with severe mental disease aren't treated properly and of those with less severe versions go uncared for. In Kerala's population, 6 percent had mental disorders and 1 in 5 had emotional and behavioural problems, ranging from mild to severe. According to the government's estimation around 1 in 5 people in the country need counselling, either psychological or psychiatric. Depression, is the most prevalent form of mental illness in India and is estimated to exist in more numbers in urban areas like Mumbai (Koshy, 2015).

Alzheimer's disease was the most common of severe disorders (54 percent) followed by vascular dementia (39 percent). A review of epidemiological studies provided the information that the prevalence of mental disorders in India was 70.5 per 1000 in rural and 73 per 1000 in the urban population. In 1999, a study stated that the prevalence of mental disorders in children and adolescents was 9.4 percent (Koshy, 2016). A 2002 study found that the prevalence rate of mental disorders in the Indian industrial population was estimated to be 14 to 37 percent. Also, WHO statistics say the average suicide rate in India is 10.9 for every lakh people (Koshy, 2015).

Role of Media in providing information on mental illness

It is proved with significant research that the media is the public's most significant source of information about mental illness (Coverdale, Nairn, & Claasen, 2002). It was also revealed in studies that rarely does a week go by, without a reference to mental illness in the media. Media representations of mental illness are so powerful that they can override people's own personal experiences in relation to how they view mental illness (Cutcliffe & Hannigan, 2001).

Hence, media plays a key role in shaping people's knowledge, attitudes and behaviour regarding mental illness. Role of media in providing a understanding to masses about mental health is particularly important, because people's understanding of mental disorders is less than optimal and

stigma and discrimination are common (Pirkis & Francis, 2012).

Media can play a variety of roles. It can be used as a source of information, amusement, recreation as well as anxiety and restlessness. Engaging with mass media cannot only affect our emotions but it is also capable of challenging our intellect. Mass media include books, radio, magazines, newspapers, television, sound recordings and computer complexes. All these mediums are useful for the audiences in their own way. Each medium is a soft face of a big industry, which is further linked with other related industries. Therefore media serves both the industries and its audience through advertising. An idol person automatically has an innate indication of relaxation by means of enjoying and appreciating the television programs. Storylines provide viewers to experience situations otherwise unachievable to them. Media programs possess the ability to affect the nation's ethical and economic principles by taking the advantage of its suggestible viewers. When experienced in a balanced dose, the media programs promote positive attributes, societal goodness and idealism. The balanced consumption of media programs improves the personal and societal happiness (Zillman & Peter, 2000).

Objectives

The main objectives of the study are as follows:

- To study the role of media on attitude formation of general public about mental illness.
- To study the effects of media influence on mentally ill people and their families.
- To examine the effectiveness of media based learning of mental illness in masses.
- To provide some suggestive measures to enhance the role of media in generating positive awareness about mental health scenario in India.

Research Methodology

The study is mainly based on secondary data which has been collected from the various documents, reports, magazines, journals, internet and other sources. For analyzing the data, simple statistical method i.e. descriptive and analytical method is used.

Results

The findings of these studies support the notion that, for individuals who receive their information about mental illness primarily from media, the less tolerant their attitudes towards people with mental illness. The media's representation of people with mental illness as violent, dangerous, and unpredictable has resulted in the mentally ill suffering from societal discrimination. It has increased stigma by perpetuating the negative attitudes for the people with mental illnesses. "Mistaken and negative depictions perpetuate the public's damning image of people with mental illness and sustain continued intolerance and oppression. The media teach people to fear, devalue, and distrust people with mental illness. So people who need understanding are met with rejection and isolation" (Corrigan, River, & Lundin, 2001).

Attitudes towards the people with mentally illness, public recognition of the signs and symptoms of mental illness and how these are shaped through media have been a subject of considerable concern and research effort for many times.

Research indicated that public attitudes toward mental illness are generally negative and have harmful effects on the lives of individuals who are affected by it (Phelan, Link, Stueve, & Pescosolido, 2000). Various studies that have employed surveys and focus groups to examine the sources of community attitudes towards mental illness have found that the media in general are perceived as the root of various negative attitudes and entertainment media may exert a more powerful influence than news media, which results in less tolerant attitudes towards those with mental illness (Liddle, 2005).

Present scenario of mental health issues

The immediate family and relatives of mentally ill individuals face tremendous burden regarding expenses of taking care of the individual. Families and caregivers of individuals with psychological disorders are often unable to work at full capacity due to the demands of caring for a mentally ill individual. They are often burdened with decreased economic output and a reduction in household income (World Health Organisation, 2012). Loss of income and the financial costs of caring for a mentally ill person put these households at an increased risk of poverty. Family members may also experience significant and chronic stress due to the emotional and physical challenges of caring for a mentally ill family member. Also, psychological disorders can exacerbate other public health issues, increasing the burden on national economies and impeding international public health efforts (Investing in Mental Health, 2003).

Role of Media in stigmatizing the mental health scenario

Media can be defined as a medium that are used for the process of Mass communication i.e. whereby mass produced messages are transmitted to individuals or groups of individuals. Various forms of media, like radio and television, newspapers, and magazines etc. reaches and influence people widely across the globe. Everywhere in our lives the vehicles of the media are available. From home, office, and outside, there is hardly any space escaped from media. It is attractive and alluring as well as excessive and repulsive. Most importantly media shapes public opinion.

Media can perpetuate the negative stereotypes associated with mental illnesses. Often, persons with mental illness are depicted with negative attributes like being unlikable, dangerous, aggressive, violent, asocial, untrustworthy and incompetent (Anderson & Bushman, 2002). Media reports of homicides attributed to the mentally ill being depicted in a more stigmatizing manner as if to emphasize that they were different from homicides committed by others. Labelling people with mental illnesses as dangerous and violent reinforces the public view of fear and anxiety toward the mentally ill (Signorielli, 1989).

Thus media play an influential role in shaping people's attitudes about the world they live in and about the individuals who inhabit the world with them. Studies indicated that media portrayals of mental illness are often both false, less researched and negative (Diefenbach D. , 1997). Whether television, film, or newspaper, the media frequently portray people with mental illness as violent, dangerous, unstable, unpredictable, and socially undesirable. Such media coverage may influence public attitudes toward people with mental illness, feeding stigma and bearing harmful consequences such

as coercive public policy changes, discrimination in employment and housing, social distance, avoidance of treatment, and impaired self-esteem (Angermeyer, Beck, & Matschinger, 2003).

Research conducted by Centre for Addiction and Mental Health in 2002 in Canada, in which less than 33 percent seek out for treatment says that "Depictions of mental health practitioners as exploitative, mentally unstable, and unethical that may do irreparable harm to people who are already hesitant to seek treatment, by making the prospect of getting help appear frightening and the help itself appear likely to be ineffective" (Edney , 2004).

Impact of Media on mentally ill

The negative images in the mass media influence not only the general public, but also health care professionals. In spite of being trained the practitioners are often influenced by the misconceptions and negative imagery regarding mental health issues as the public. This influence leads health care practitioners to approach, and thus potentially treat, mentally ill patients with the same negative attitudes portrayed by the media and accepted by the general public (Wahl O. , 1995).

Movies, television, newspaper articles and books often present people with mental illnesses as dangerous or unstable. Notable exclusions like the Academy Award-winning movie, "A Beautiful Mind", most of the novels, films and television pieces continue the representation of people with mental illnesses as unpredictable, child-like, hyper- sexual, dangerous, evil and violent. In popular fiction, "mental cases" commit violent crimes. On television, they are violent and murderous—both in drama and comedy shows. Myths and stereotypes regarding mental illness are promoted by media portrayals of mentally ill people. These portrayals induce fear in the community and lead to irresponsible conclusions being drawn towards mentally ill people (Baun K. , 2009).

Provocative main stream newspaper headlines such as "Terror, mentally ill threaten Games" transforms a health issue into a public safety issue and capitalizes on the fear of violence and irrationality. Persons identified as mentally ill are all too often embraced by the media as the secular version of the devil, transmogrified into the out-of-control madman bent on a rampage of seemingly inexplicable death and destruction. Mental illness on the other hand has been considered as a poor predictor of violence. The majority of people who are violent do not suffer from mental illnesses. As a group, mentally ill people are no more violent than any other group. In fact, researches shows people with major mental illness are two and a half times more likely to be the victims of violence than other members of society. It is estimated that one in every four persons with mental illness will experience violent victimization every year, a rate that is eleven times higher than the rate of violent victimization experienced by the general population. The assumption that every mental illness carries with it an almost certain potential for violence has been proved wrong in many studies (Baun K. , 2009).

The consequences of these inaccurate media portrayals are serious for people who have mental illnesses. For instance, patients with mental illness are usually shown as victims of verbal and/or physical abuse in entertainment media, who when pushed "too far" become dangerously aggressive and even violent (Wilson, Nairn, Coverdale, & Panapa, 1999). Many people with mental health disorders reported that media coverage had a negative impact of their lives, and many

expressed that it increased their anxiety and depression and one-fourth endorsed that they had hostile behaviours from their neighbours due to newspaper reports (Baun K. , 2009).

People who suffer from a mental illness may internalize negative references and develop avoidant coping mechanisms that become obstacles to treatment. Experiences of discrimination and violence can result in psychological distress. Additionally, inaccurate portrayals of mental illness and psychiatry in films may have a range of adverse effects, including promoting inaccurate knowledge in the society, accentuating negative attitudes, increasing the stigma perceived by patients, their families and mental health professionals and causing patients to be less willing to seek psychiatric help (Padhy, Khatana, & Sarkar, 2014).

Media Portrayals and Government Responses

A link exists between negative media representations of mental illness and related social policies. If the public believes that those with a psychiatric diagnosis are either violent or victimized and in either case, unable to care for themselves, government policies will reflect this attitude. Consequently, policy-makers will look more toward containment and control than toward recovery and community living. If public perception of mental illness is based on negative and false imagery perpetuated by the media, governments will react to these false realities rather than to the true needs of people with mental illnesses (Rose, 1998).

In addition, a view that upholds false and negative stereotypes of people with mental illness leads to an increased level of fear in the community, which in turn translates to less support for community care and for individual human rights. This can result in increased legislation allowing, and social support for, forced treatment and hospitalization, as well as increased police power, as the public has been frightened into believing that they are at risk of violence from those with mental illness living in the community. Rather than supporting and welcoming diversity in the community, it's not an exaggeration to say that mental health policy is now motivated by the desire to deal with risky individuals and to assuage the public disquiet (Rose, 1998).

The above view was supported by various studies particularly done in the United Kingdom. These suggested that since the mid-1990s in the United Kingdom, mental health policy has taken on an "increasingly coercive appearance". Studies also showed that there is an implicit relationship between negative and inaccurate representations of mental illness in the mass media and the development of current mental health policies and law in the United Kingdom. And as a result, more controlling mental health policy framework emerged in the 1990s due, to a media-fuelled public feeling of fright and a belief that people with mental illness are morally deficient and thus a danger to society (Cutcliffe & Hannigan, 2001).

National Mental Health Programme (NMHP)

The National Mental health programme was launched by government of India in 1982. The National Mental Health Programme (NMHP) is being implemented by the Government of India to support state governments in providing mental health services in the country. There is a shortage of qualified and trained mental health experts in India. This shortage implies both for District Mental Health Programme (DMHP) and for the whole mental health sector as

well. Recognizing this key constraint Government of India has formulated manpower development schemes under NMHP to address this issue. Under the scheme 11 centres of excellence in mental health, 120 PG departments in mental health specialties, upgradation of psychiatric wings of medical colleges, modernization of state-run mental hospitals will be supported. The expected outcome of the Manpower Development schemes is 104 psychiatrists, 416 clinical psychologists, 416 PSWs and 820 psychiatric nurses annually once these institutes/ departments are established. With the help of programs like DMHP along with added services related to educating and informing masses about mental health scenario of India and world, the issue of ignorance and negativity related to mentally ill people can be addressed. The existing National Mental Health Programme, and its key implementation arm the District Mental Health programme (DMHP), needs significant strengthening. There seems an extreme need to formulate detailed action plans. The systematic method will increase compliance concerning the implementation by enhancing mechanisms of integration. Thus acting as a mechanisms for accelerating human resources, improving drug delivery and logistics mechanisms and devising effective monitoring frameworks of the DMHP. This way the needy population will be able to access the facilities provided for them (National institute of Mental Health and Neuro Science, 2016). Information, education and communication activities, NGO component, dedicated monitoring mechanism, research and training, the scheme like DMHP has the potential to make a facelift of the mental health sector in the country which is essentially dependent on the availability and equitable distribution mental health manpower in the country (Sinha & Kaur, 2011).

The NMHP was taken up as a theme for the World Health Day in the year 2001. It was titled as "Mental Health: Stop Exclusion - Date to Care", Why? (National Institute of Health and Family Welfare, 2014). As the NMHP endeavours to guarantee accessibility and approachability of mental health care for all in the near foreseeable future, particularly to the most vulnerable sections of the population. It aims to encourage mental health knowledge and skills in general health care and social development; to promote community participation in mental health service development and to stimulate self-help in the community (Ministry of Health and Family Welfare, 2015).

Conclusion

The current review has clearly proved that media immensely backs up the way people view a particular phenomenon. This review takes into account the descriptive studies that had taken an opinion poll and quantified the data, in order to show the current trends. These trends have reflected the media influence on attitude formation in a lucid style. Most of the professionals accept that media holds a big share in comprehending the different perspectives of a sensitive issue like that of mental illness. A large part of public frame their opinion based on the facts presented by Media in various news articles and documentaries. So according to the trends reflected from the review analysis, it is evident that, there is a need to sensitize media, so that more and more mental health issues can be highlighted and efforts should be made to create awareness and deliver accurate information over such issues.

Suggestions/ Recommendations

Some suggestive measures to enhance the role of media in generating awareness regarding the sensitive issue of mental health scenario are as follows

- A systematic awareness about the schemes and programs run by government should be created in the mental health care sector.
- Media should sensitively deal with portrayal of any kind of mental health issue.
- People suffering from mental illness should be encouraged to understand the importance of treatment and care facilities,
- Media being an important source of information for general public, should research and analyse before drawing vague conclusions about mental health issues.
- A responsible behavior of political and social scenario alongside media can work wonders to eradicate the stigma related to mental illness in India.

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