



The role of the media in forming attitudes towards mental illness

BY KISMET BAUN

The often negative ways that the media portray mental illnesses, is something of which many mental health consumers are painfully aware. Distorted and demeaning images of mental illnesses when presented to the public shapes their attitudes and, in turn, influences their behaviour. When those images are unfavourable and inaccurate, as they often are, they contribute to the stigma and discrimination that represent barriers to treatment and recovery. Movies, television, newspaper articles and books often present people with mental illnesses as dangerous or unstable. Despite notable exceptions like the Academy Award-winning film, *A Beautiful Mind*, most often novels, films and television continue the representation of people with mental illnesses as unpredictable, child-like, hypersexual, 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. Slasher movies give birth to multiple sequels. Batman’s foes, the Joker and the Penguin, are “insane.” Even children’s literature is rife with mentally ill villains. In the

Harry Potter books, one character is termed “mad” and hence deemed “a danger to anyone who crosses him.”

All too often, the media use sensational language that tends to perpetuate myths and stereotypes regarding mental illness, promote fear in the community and lead to irresponsible conclusions being drawn. Provocative mainstream 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 that lack of understanding about mental illness can cause. 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. In reality, mental illness is 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, people with mental illnesses are far more likely to be the victims of violence than to be violent themselves.

Current research shows that 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. Mental illness plays no part in the majority of violent crimes committed in our society. The assumption that any and every mental illness carries with it an almost certain potential for violence has been proven wrong in many studies. Recent studies have showed that alcohol and substance abuse far outweigh mental illness in contributing to violence.

A 1996 Health Canada review of scientific articles found that the strongest predictor of violence and criminal behaviour is not major mental illness, but past history of violence and criminality. Such factors as age, gender, substance abuse and educational level are, among others, significantly greater contributors to violence than mental

understanding

disorders. The conditions which increase the risk of violence are the same whether a person has a mental illness or not.

Mental illness is often viewed as a rare phenomenon that happens only to a special group of (flawed) individuals unlike ourselves. But in fact, in Canada, mental illness is the single largest category of disease affecting Canadians. One in five Canadians, or up to twenty per cent of the population, will experience a mental illness at some point in their lives. One in three will suffer from a severe and persistent mental illness, and one in eight will actually be hospitalized. So it is, in fact, not that faceless group over there but it is our neighbours, our friends, our loved ones, and perhaps even ourselves.

Stigma is defined in the dictionary as a “mark or sign of disgrace or discredit.” The word stigma is derived from the Greek word ‘stigmatos’ meaning mark made by a pointed

instrument, a brand signifying the marks that were pricked onto slaves to demonstrate ownership and reflect their inferior social status. The 1999 Surgeon General’s Report on Mental Health identified stigma as one of the foremost obstacles to improved mental health care today, noting that “Stigma tragically deprives people of their dignity and interferes with their full participation in society.” Stigma in relation to people with mental illness can be understood as a combination of problems of knowledge (ignorance), attitudes (prejudice) and behaviour (discrimination). Simply put, stigma refers to an attitude. Discrimination is the behaviour created by that attitude.

Stigma is burdensome. Added to the weight of already painful and sometimes overwhelming psychiatric disorders is the hurt of other people’s disdain, dislike and avoidance. Most mental health consumers admit that the stigma that accompanies the mental illness is worse than



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the illness itself. Not only is it difficult for those with mental disorders to face a world that misunderstands and devalues them, but it is also isolating. Stigma also has the power to undermine the search for treatment. Those who are reluctant to acknowledge their disorders are also likely to delay (or avoid altogether) seeking appropriate (psychiatric) help, because that treatment will itself mark them as undesirable. Fear of disclosure may lead those with mental illnesses to themselves increase their distance from others. Fear of unfavourable public responses and of losing friends, furthermore, often leads to an additional burden—the burden of keeping one’s illness a secret, of bearing it silently, of fearing disclosure.

Mental illness stigma also leads to discrimination in housing and reduced employment opportunities. Lack of safe, affordable, available housing contributes to homelessness, which then adds to the burden of mental illness the challenge of daily survival. Inadequate, unhealthy living conditions and increased stress are hardly conducive to improved mental functioning. Reduced employment opportunities leads to poverty. Poverty affects nearly 1.8 million Ontarians and is both a cause and a consequence of poor mental health. People with serious mental illness may have difficulty over their lifetime securing adequate education and employment, due to barriers such as stigma and discrimination and recurrence of symptoms. These barriers, in turn, affect one’s ability to have an adequate income. As a result, individuals with a serious mental illness often drift into poverty. Shortages of affordable housing, inadequate income, and exclusion from quality education and employment alienate individuals from life in the community. Exclusion from these economic supports significantly increases the risk of chronic poverty.

Attitudes and impressions of the public around issues relating to mental illness are, largely, shaped by persistent negative patterns created and perpetuated by the media. The mass media are far and away the Canadian public’s primary sources of information concerning people identified

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as mentally ill. For better or worse, the media in our society shapes our ideas of what the world and its members are like. Studies have shown that exposure to even just one single shocking media image (one movie or reading one article) of violent mental illness seemed to increase the expectation that those labeled as mentally ill are particularly likely to do physical harm to others and to make the media consumer more fearful of those so labeled.

The end result is that the public begins perceiving those with mental illnesses as a “different” group or kind of people, and it creates further barriers to communication and understanding and sets up the perfect conditions for stigma and stereotyping. It is difficult to feel good about oneself when confronted by constant messages that people with mental illnesses are flawed, dangerous, disapproved of, and disliked. And among the effects of viewing oneself portrayed again and again in a demeaning and unfavourable way are hurt and anger.

We need, as a society, to continue to strive to reduce and eliminate the stigma and discrimination that so many with mental illness experience in their day-to-day lives. Let’s face it—people can and do recover from mental illness if provided with the supports and services necessary to facilitate and nurture a sense of hope, wellness and a belief that tomorrow will be better than today.

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