

Psychosis portrayed in the media

Media



Impact of Media's Portrayal of Psychotic Illness on Viewers Introduction

Psychotic disorders are the more serious form of mental illness, particularly schizophrenia. Many multidimensional factors have contributed to the social stigma of psychotic mental illness, deeming it a social problem. According to Landsberg and Rock (2010), stigma and discrimination impacts policy and program response to the issue, causing limitations on our financing. As a result, there is a deficiency of resources provided by macro and micro level systems for individuals battling with the illness despite a recent shift in society's perception.

Programs such as National Alliance for the Mentally Ill and the Recovery Movement have been trying to increase public understanding of the illness, advocate for government resources, and emphasize supportive networks such as family, friends, and mental health providers (Hertz, 2010).

Unfortunately, the complexity of this illness and lack of thorough understanding continues to reinforce and sustain the stigma. Additionally, individuals discharged into the community from institutions have not been well supported by micro-level services. As a result, many commit crimes and end up in jail.

Landsberg and Rock (2010) found that many seriously mentally ill patients are in nursing homes, homeless shelters, and jails because of unmet needs. Community mental health centers have more patients than staff can handle (Hertz, 2010). In spite of various attempts, the mental health system is comprised of programs that "don't work", leaving many seriously ill individuals without proper care (Landsberg and Rock, 2010, pg. 258). These wide ranges of factors contribute to viewing serious mental illness as a social

problem that is stigmatized as well. In terms of social stigma, there are several misconceptions.

Hertz (2010) found that the public misperceives people with psychotic illness as homicidal. The truth of research indicates that these individuals are more frequently victims of crime perpetrated by others, or, tragically, by their own hands (Hertz, 2010). Unfortunately, the daunting ways in which symptoms may manifest prevent people from establishing any positive associations with such illness. The media portrays psychotic disorders through different perspectives, ultimately sending mixed messages to audiences about the nature and prospects of the illness.

Landsberg and Rock (2010) stated that movies often picture the mentally ill as violent, negatively affecting our society's willingness to enact needed changes and fund programs. The movies *A Beautiful Mind*, *K-PAX*, and *The Soloist* each portray a character living with a psychotic disorder, particularly Schizophrenia, who also demonstrates strength and resilience in their struggles. The intent of this paper is to discuss characteristics of psychotic illness, critically analyze these movies and their message to audiences, and assess accuracy within their portrayals.

Brief History of Mental Illness as a Social Problem There are conflicting ideologies in terms of how to approach serious mental illness in the United States. While some adopt a "survival of the fittest" perspective and believe affected individuals shouldn't receive assistance, others act as committed advocates for programs to service them. When looking at the recent history of mental health, several attempts at revolutionizing systems were made,

and always seem to only partially work. As a result, more systems that partially work were created.

The 1950's through the 1970's emphasized inpatient hospitalization for psychotic patients without much chance for their self-determination and self-empowerment. Solutions were very problem-focused, and patients received their treatment of insulin shock therapy. Socially, there seemed to be more emphasis on regarding anyone with a psychotic illness as "crazy", and therefore someone to stay away from. The deinstitutionalization movement in the 1970's and the creation of managed care was an attempt to steer away from "putting people away". As a result, many hospitals were shut down.

The problem with this system was the lack of funds allocated towards community-based services. Now that the patient's length of stay at hospitals significantly decreased, patients have been discharged into the streets, and left to their own devices. While many have been receiving adequate services, many are not receiving proper care and result in committing crimes, engaging in other illegal activity, becoming homeless, or just functioning on a very low level. Hertz (2010) stated that the waiting lists for residual programs for the chronically mentally ill are months, if not years long.

This implies the staggering amount of people not receiving proper aftercare. A true solution is yet to be discovered. Background on Psychotic Disorders with an Emphasis on Schizophrenia Schizophrenia is currently affecting nearly 2.5 million people living in the United States, and 29 million people

worldwide (Hertz, 2010). The typical beginning of this illness is during adolescence or early adulthood. Hertz (2010) reported that the onset can be gradual, starting with odd beliefs and mannerisms, while other onsets are acute with a sudden psychotic break.

These research findings imply the complexity in how symptoms manifest, and pose a challenge for practitioners to pinpoint and potentially diagnosis. There exists a social misconception regarding psychotic disorders. Psychotic symptoms may appear in disorders other than Schizophrenia, and the presence of psychotic symptoms doesn't necessarily indicate diagnosis of Schizophrenia. Hertz (2010) stated that withdrawal from reality marks psychosis, containing two major symptoms: delusions and hallucinations.

Schizophrenia is particularly characterized as a thought disorder which builds on these symptoms to include impaired cognitive functioning such as " loose associations of ideas/thoughts and disturbance of affect" (Hertz, 2010, p. 285). There are several types of schizophrenia, and is defined by positive and negative symptoms which indicate the existence or deficiency of functioning. Hepworth, Rooney, and Larsen (2010) found that positive symptoms include delusions, hallucinations, disorganized speech, and catatonic behavior.

According to Hepworth, Rooney, and Larsen (2010), negative symptoms include flattened affect, restricted speech, and limited initiation of goal-directed behavior. The causes of psychotic disorders are ultimately unknown, and many different theories emphasize different contributing factors.

According to Hertz (2010), genetics, heredity, and neuro chemistry

determine varying degrees of predisposition to developing psychosis. This research finding implies that environmental and social stressors play a role as well. A Beautiful Mind

John Nash is the main character in A Beautiful Mind who is predominantly battling with the paranoid subtype of schizophrenia. The movie follows the life of mathematician John Nash who is responsible for creating several ingenious theories such as game theory still used in economics today. He attended Ivy League Princeton University in the 1940's after which he became a calculus professor at MIT five years later. Falling in love with one of his students, Mr. John Nash started a family and continued working on theories and concepts as a product of his mastermind.

Gradually throughout the course of Mr. Nash's academic and intellectual achievements, the movie directed attention to the display and effect of his psychotic illness. Several aspects of Mr. Nash's psychotic symptoms were portrayed through different characters and plot points. His college roommate Charles, Charles's niece Marcee, and Department of Defense agent William Parcher were three characters that were eventually revealed as part of his visual and auditory hallucinations. Agent Parcher also marked Mr.

Nash's delusional thinking when he invited him to crack a special code of their enemy at the Pentagon. Throughout the movie, viewers periodically see Mr. Nash involved with Parcher in various assignments that appeared prestigious and extremely intellectual. In the beginning of the movie, Charles's character was designed for audiences to believe he was real, given the strong and realistic friendship that transpired between him and Mr. Nash.

However, as the years went by and Marcee stayed the same age, Mr. Nash realized she was a figment of his imagination.

Mr. Nash's delusions have put his family in danger on numerous occasions. He nearly allowed his son to drown while bathing him, and accidentally knocked his wife Alicia over when agent Parcher told him to kill her. After Alicia had enough of his behavior, she called the psychiatric hospital where he was admitted to receive insulin shock therapy, a common treatment for psychosis in the 1950's. After agreeing to take anti-psychotic medications, Mr. Nash was released from the hospital. Unfortunately, he ended up stockpiling the medication without taking them, resulting in relapse of his psychotic symptoms. Lesser and Pope (2010) stated that psychotropic medications are effective in ceasing or reducing psychotic symptoms but often have unpleasant side effects. Mr. Nash's detrimental side effects included reduction in intellectual abilities, and impairments to his relationship with his wife. Ultimately, Mr. Nash has learned to manage his symptoms and live with his illness. The message this movie hopefully sends out to viewers is that serious mental illness can affect bright and well educated people, and that recovery is possible.

Moreover, the movie encourages viewers to realize that even individuals with serious mental illness can excel in certain areas of life, if not reaching levels of genius. While the media, as previously stated, typically portrays individuals with mental illness as violent antagonists, Mr. Nash is portrayed as a protagonist despite his mild violence during psychotic episodes. Viewers likely feel compassion for him and want to see him win his battles. The

movie accurately portrayed environmental stressors that may cause unpredictable emotional breakdowns.

Mr. Nash's character was portrayed as getting frustrated and angry when he thought he couldn't fulfill the duties agent Parcher has assigned him. He was worried that the Russians are after him, and felt pressure to crack the code that never existed. Moreover, when he was admitted to the hospital, he perceived doctors to be Russian spies, a reasonable portrayal of paranoid schizophrenia. Luckily, Mr. Nash trained himself to transcend his symptoms by acknowledging, followed by ignoring, their existence.

While it has been stated that the real John Nash only experienced auditory hallucinations, *A Beautiful Mind* seemed to incorporate visual hallucinations for entertainment purposes, inaccurately portraying and exaggerating Mr. Nash's illness. However, accuracy was shown through the many psychotic breakdowns Mr. Nash experienced, demonstrating emotional and physical breakdowns. Although he put his wife and child in danger on numerous occasions, Alicia served as his main support system. Hertz (2010) stated that supportive networks are a critical variable in determining the quality of life of people with Schizophrenia.

In fact, it is arguable that in this movie, Mr. Nash demonstrated more resilience and strength than is realistically common in the United States for people with psychotic illness. Not everyone has access to the kind of support he did given his prestigious status as a mathematician. Additionally, he had the support of his loving wife who never abandoned him and seemed to be the main source of his resilience. K-PAX Prot is the main character in K-PAX

who demonstrates delusional thinking as part of his psychosis. As previously discussed, he didn't necessarily have Schizophrenia.

Prot was admitted to the hospital after claiming to be an alien from a planet called K-PAX. As psychiatrist Mark Powell begins to treat Prot, he learns of his excellent intellect in the subject of astronomy. Stunned by this wisdom, Mark introduced Prot to some astro-physicists who were puzzled by his recollection of traveling from a different planet by a means of light travel. Prot and Mike's relationship grew stronger with each treatment session, and Prot revealed his knowledge of life on planet K-PAX. Prot also had a positive influence on other patients in the hospital who believed he was from a different planet.

Prot began to display erratic emotional breakdowns that were indicative of his psychosis. He had an episode during some of his sessions with Mark, as well as in front of Mike's family when he was invited over for dinner. Prot began to repeatedly mention that he is going back to planet K-PAX on July 27th. Mark started to make connections between what triggers lead to Prot's hysteria. Additionally, he used regressive hypnosis to discover the significance of the date July 27th, suspecting he suffered from significant loss. He learned that Prot has attempted suicide after his family was killed on July 27th.

When that date finally came, Prot was found catatonic, and the ending of the movie was open to interpretation. This movie sends several messages to viewers. One of them includes the strong impact trauma may have on individuals. Prot attempted suicide without success after his family was

killed, marking the onset of his delusions. Hertz (2010) found that suicide attempts are a common and often overlooked occurrence within psychotic symptoms, and often occur during the first psychotic episode when the individual feels bewildered and out of control.

His feelings of bewilderment were likely caused by seeing his family get killed, a realistic reaction to such a tragic occurrence. K-PAX hopefully teaches audiences to realize that many of the severely mentally ill individuals could have experienced significant loss in their lives that was out of their control, leading to their illness. There was nothing substantial provided in the beginning of the movie which aroused sympathy for Prot's character. It is arguable that audiences could have perceived all his discussions about travelling from another planet as him "joking" around with authorities.

He wore black sunglasses, and seriously spoke about life on another planet. However, as the movie showed several emotional breakdowns, it was evident that he has experienced significant psychological trauma of loss. Hertz (2010) stated that psychotic symptoms are often triggered by a significant loss, and environmental stressors can trigger neuro chemical events in the brain. The movie accurately portrayed the concept of surrounding triggers. For instance, Prot was reminded of the tragedy when the sprinklers came on at Mike's house, causing flashbacks of his trauma.

Assessing accuracy of his intense reaction is difficult, for, each individual reacts to triggers to varying degrees. His particular reaction involved crying and an appearance of deep sadness. The Soloist Nathaniel Ayres is the main

character in *The Soloist* who is portrayed to struggle with Paranoid Schizophrenia as his psychotic disorder. The movie follows the life of Anthony Ayres, a man who became homeless as a result of his illness. Journalist Steve Lopez was desperately seeking material for a story to meet a deadline. One day he heard someone playing the cello so beautifully that he felt compelled to follow the music.

As a result, he met a homeless man named Nathaniel who claimed to have attended Julliard for his musical talents. Steve tested his word by calling the school, only to find out that Nathaniel has indeed attended Julliard, but has dropped out after his second year. Steve ended up writing his story on Nathaniel. As their friendship progressed, Steve became more interested in Nathaniel's safety, and wanted him to receive treatment. Flashbacks to the onset of Nathaniel's Schizophrenia were portrayed to answer Steve's questions as to why he is no longer in Julliard and living in a shelter.

In response to the published story, readers responded with sympathy, and one woman even sent Nathaniel a Cello. Eventually, Steve convinced Nathaniel to perform in front of an audience which triggered his auditory hallucinations. The end of the movie displayed Nathaniel continuing to struggle with his illness, but no longer living in a shelter, marking progress. His friendship with Steve and his music seem to help manage his symptoms, according to psychiatrists Steve has consulted with. In addition to serious mental illness, *The Soloist* portrays another social problem that is stigmatized: homelessness.

Hertz (2010) estimated that 60% of people with schizophrenia live in poverty, and 1 in 20 ends up homeless. The movie portrays Nathaniel as someone who has been exposed to treatments such as medications and shock therapy, and doesn't want anything to do with them. It seemed as though he felt he belonged in a shelter as opposed to an apartment where his symptoms emerge. The message of this film is for audiences to realize that homeless people aren't necessarily "lazy", or "can't get a job". Conversely, they may have suffered from symptoms which inevitably led to that lifestyle.

Through flashbacks, Nathaniel was portrayed as a productive and gifted member of society who attended a prestigious musical institution, and tried to start his young adult life living in an apartment. Unfortunately, he was overpowered by his auditory hallucinations, making him paranoid and scared. Hopefully audiences will reorient their mentality and not disregard homeless individuals as those that haven't worked hard enough to attain a job and a place to live. Some of them have truly been overpowered by persistent mental illness.

In terms of accuracy, *The Soloist* fairly portrayed the possible impact of stressors in the environment that trigger psychotic episodes. For Nathaniel, the pressure of performing well in front of an audience triggered "voices" which led him to run away. Additionally, unless an individual is medicated, it is rare for psychotic symptoms to not emerge. In the movie, Nathaniel was not receiving treatment at the time he became friends with Steve, and it was shown through his inability to have coherent conversations with him. Furthermore, he was unable to hold on to an apartment, and even felt comforted by the city street noises.

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His physical appearance was also unkempt and very colorful, reasonably displaying what someone with this disorder could potentially look like.

Comparisons and Contrasts between Films There are several similarities and differences in the way media portrayed these characters suffering from serious mental illness. While the etiology, symptoms, and course of their disorders slightly differed, they all share a strong support system which provided them self-determination and potential for growth, similar to the goals of the Recovery Movement. Hertz (2010) stated that the presence of someone who believes in their recovery increase recovery rates.

Mr. John Nash had the privilege of a supportive wife. Realistically, it may be an exception that an affected individual is a coveted professor with a family by his side assisting his struggles. Prot developed a relationship with his Psychiatrist. It is rare, if not unethical, for a patient's psychiatrist to invite them into their home and introduce them to family members. More importantly, it seems rare for a psychiatrist to invest so much emotional effort into one particular case, especially one that is middle aged and has been in the practice for so long.

Nathaniel formed a strong friendship with journalist Steve Lopez. Most severely mentally ill homeless individuals are not "discovered" by someone who decides to believe in them; most, as previously discussed, are underserved and not receiving proper treatment and care. While the storylines were touching and enlightening, they are very rare. These situations seem to be an exception rather than the rule, making the character portrayals inaccurate in terms of exaggerating the levels of

support. Another important similarity accurately portraying psychotic disorders is the fact that there is no known cure.

None of the characters were “cured” by the end of the movie, but rather found their own ways of coping with symptoms. The ultimate message was moderately accurate when showing psychotic mental illness; every single case should be viewed individually despite the one set of guidelines for diagnosis provided in the DSM-IV. Research has been clear about one thing: psychotic disorders remain etiologically perplexing and challenging to treat (Hertz, 2010). As a result, it is fairly easy for media to “play around” with psychotic illness through characters, since there is ultimately no absolute truth to reference, and thereby deem “inaccurate”.

Since symptoms are a product of the person’s psyche, there seem to be no limits as to how creative psychotic symptoms and reactions may become. Interestingly, all three characters in the films are men. Research found that more men than women are given the diagnosis of a psychotic disorder (Hertz, 2010). Also, each movie emphasizes a different aspect of psychotic illness. *A Beautiful Mind* focuses on illness affecting a genius mind; *K-PAX* signifies the impact of a traumatic loss, and *The Soloist* show how symptoms can lead to homelessness. Conclusion

According to Lesser and Pope (2010), psychiatry critic Thomas Szasz believed that the diagnosis of psychiatric illnesses was socially constructed, vary culture to culture, and is society’s way of labeling individuals when their behavior breaks social rules. Nonetheless, the use of the DSM system prevails in the United States, and many individuals “labeled” under its

guidelines are in need of services, reinforcing mental illness as a social problem. The deinstitutionalization movement in the 1970's as an attempt to serve the severely mentally ill has created a new array of social problems given the lack of funding anticipated for these goals.

Hertz (2010) presented that the sickest people in our society are "lost in the cracks" as they are discharged from institutions to poor and inadequate aftercare. The media provides several portrayals of serious mental illness. The three movies chosen for discussion (A Beautiful Mind, K-PAX, and The Soloist) ultimately portray the strength and resilience possible even for the most seriously mentally ill individuals, when provided with emotional and social resources. Implicitly, hope is not lost, and Hertz (2010) proposed a solution to make a shift in our priorities: making a commitment to even the most disturbed members of our society.

As demonstrated in the three films, two of which were based on real life people and events, individuals with even the most serious of mental illness can show strength and resilience. References Berzoff, J. , Melano Flanagan, L. , & Hertz, P. (2008). Chapter 13: The psychoses, with a special emphasis on schizophrenia (pp. 281-310). Inside out and outside in: Psychodynamic clinical theory and psychopathology in contemporary multicultural contexts (2nd ed.). New York: Jason Aronson. Hepworth, D. , Rooney, R. & Larsen, J. (2010). Chapter 9: Assessment: Intrapersonal, Interpersonal, and Environmental Factors. (pp. 199-226). Direct social work practice: Theory and skills (8th ed.). Pacific Grove, CA: Brooks/Cole. Landsberg, G. , & Rock, M. (2010). Chapter 9: Mental Health. Social policy and social work: The context of social work practice. New York, NY: Pearson. Lesser, J. G. , & Pope, <https://assignbuster.com/psychosis-portrayed-in-the-media/>

D. S. (2010). Chapter 17: Chronic illness and disability. (pp. 437-464). *Human Behavior in the Social Environment: Theory and Practice*. Boston: Allyn and Bacon.