

From: Stigma and the Mentally Ill, Proceedings of The First International Rosalynn Carter Symposium on Mental Health Policy- Atlanta, Georgia, November 15, 1985, pp. 18-29.

Powers Untapped: Enhancing Mass Media
Depiction of Mental Illness
Thomas E. Backer, Ph.D.

We often criticize mass entertainment media for their insensitive, inaccurate portrayals of human problems like mental illness. Some of this criticism is surely justified. Network television stereotypes or ignores mentally ill people; feature films are a garden collection of crazed killers and glamorous psychopaths.

Yet creative and positive uses of these awesome communication tools also are taking place today, covering an increasing range of illnesses and societal difficulties. Progress is erratic, to be sure, often enabled by commercial motivations, egos, passing trends, the glare of publicity, even by happy accidents. Still, some media executives and creative people are using television and film to tell stories that combine commercial entertainment with awareness-building, education and even efforts to promote pro-social behavior.

Those of us concerned with reducing the stigma of mental illness can ignore these efforts, but we would do so unwisely. Lessons already have been learned about how to perform the alchemy of blending social and commercial motives, lessons that for the most part have not yet been applied to the topic of mental illness. My purpose here is to crystallize a few of these lessons in the form of power sources. These are ways "everybody can win" in the more accurate and sensitive depiction of mentally ill people and their life situations in TV shows and films, through collaborating with the mass media rather than merely criticizing them, and through an understanding of how the mass entertainment media actually work.

This focus on the practicalities of collaboration does not mean ignoring the research on public concern about the hurtful stereotypes and negative images. I make no pretense that using these power sources is the only solution, or that their use will obliterate the tragedy of stigma that impacts on all mentally ill people and their families. But there is already evidence from other uses that these approaches can make a difference in increasing human understanding, and sometimes even in stimulating action. They are here today, and they can be used today if we build partnerships with our colleagues in the media, and amongst ourselves, to do so.

A Small Collection of Trintabs

Concentrating on how we can use these power sources is worthwhile, in part because they are relatively inexpensive and don't require major structural changes to work. They are what Buckminster Fuller calls "trintabs"--the small sails that direct the wind onto the main sails of a ship and thus guide it. Disproportionate leverage is the result. To illustrate the kinds of action I'm talking about, I'll cite a few examples, concentrating on entertainment television programming of the last five years. Many of these will be familiar to you; a few may be new.

Adam, a TV movie about missing children, actually caused missing children to be found by broadcasting their pictures at the end of the show. This in turn started a national trend with missing children pictured on the air, and even on milk cartons and grocery sacks ("Toppling the Last Taboo, 1984).

The Day After made its points about nuclear war to the largest audience ever to see a TV movie, over 100 million people. Educational materials to assist viewers in reacting to the show were distributed nationwide. A network news analysis show immediately followed the broadcast, and the film became a world-wide media event whose far-reaching impacts on attitudes and beliefs are still being studied by social scientists (Schofield & Pavelchak, 1985).

Something About Amelia, at its broadcast the 12th-highest-rated TV movie ever, almost by itself raised national consciousness on the subject of incest ("Toppling the Last Taboo," 1984). Mental health groups all over the country coordinated both television and live community events in conjunction with the show, and the ripple effects of these are still being felt.

Such successful "movies of the week" have caused all three television networks to designate executives or entire departments to handle these "social issue" films, or "docudramas," which are particular favorites with local affiliate stations because of the community goodwill they can generate.

Diff'rent Strokes, a popular situation comedy, aired an episode about child sexual abuse, managing to treat a delicate subject with compassion and even with humor--and causing another storm of national publicity on this long-buried subject.

Sexual Abuse of Children: Beyond the Secret, a Home Box Office cable television documentary, provided public education through its interviews with professionals, victims, and even the sexual abusers themselves. It generated more than 16,000 telephone calls to a child sexual abuse hotline immediately after the show.

David Jacobs, the executive producer of Knots Landing and other popular network shows, two years ago decreed that no actor on his shows will get into a car without being shown on-camera fastening the seat belt before pulling away. Tens of millions of people get this reinforcing message every week, and not in a public service announcement they may "tune out." (Jacobs received an award from the Department of Transportation for this, given him by President Reagan.)

An episode of a short-lived TV series, Mr. Merlin, about children's fears of being in the hospital, was coordinated with publication of an issue of Junior Scholastic on the same subject, distributed to millions of schoolchildren. The program won awards from the PTA and other groups for providing education on this emotion-laden topic parents often fear to discuss.

Michelle Lee, star of Knots Landing, became nationally active in the drug abuse field, partly because of her character's drug problem that was a storyline on the show. She insists that her character will not be shown taking a drink on camera--"I'll have a diet soda" is her line instead--and because she is a star, no one has argued with her about this.

The Caucus for Producers, Writers and Directors, a powerful group of senior creative people in television, wrote a memo in 1983 called "We've Done Some Thinking," urging their membership to cut down on the amount of alcohol drinking shown on TV. The memo ultimately was distributed to thousands of creative people in Hollywood. A follow-up study showed that there was a considerable decrease in drinking behavior displayed on 22 key hours of primetime television programming (Caucus for Producers, Writers and Directors, 1985).

And There Were Times Dear, a dramatic film about Alzheimer's disease, was created by Linda Hope and Nancy Malone (with financial support from many media figures, including Linda's father Bob) specifically for use in fund-raising regarding this disorder. The film will later be sold to cable television and to foreign markets to recoup

its financial investment. The first fund-raiser generated \$40,000 for the Rhode Island Alzheimer's Disease and Related Disorders Association, to start the Rita Hayworth Crisis Intervention Center (Connelly, 1985; Archerd, 1985).

A TV movie about AIDS, An Early Frost, was broadcast in tandem with efforts by AIDS education projects in major cities to facilitate "Early Frost Parties." People met in private homes to watch the show and discuss it afterwards. The distinctive feature: the "parties" deliberately mixed gays and straights to promote dialogue about attitudes and beliefs in both directions.

There are many more examples that could be given, of course. The several kinds of mass media events just cited here have become almost commonplace, with well-tested strategies such as informational booklets, 800 telephone numbers, media kits, and local or even national news and information shows presenting professional or consumer opinions about the topic of the entertainment event. (I'm not even including here all the special news and information segments not connected with some entertainment shows, appearing on everything from The Today Show to Phil Donahue to the 6 o'clock evening news.) From these experiences come a wealth of ideas and techniques that could be applied to the subject of mental illness. I'm going to discuss just five of them.

The Power Sources

Power Source No. 1: Community-based Public Information Campaigns for Television Movies

TV movies have become common ground for covering social problems, what programmers refer to sarcastically as the "disease-of-the-week" trend. Networks, local TV stations and producers are increasingly interested in developing public information campaigns to accompany these programs because they result in free publicity, goodwill--and most importantly, in higher ratings. Often the media reach out to human service professionals to help coordinate community meetings, develop informational materials, arrange for an 800-number hotline to permit viewer followup, and participate in news and information programs that expand on the subject of the dramatic story (see Backer, 1985a and Backer, 1983 for a fuller discussion of these activities).

Power Source No. 2: Executive Producers and Senior Creative People in the Mass Media

Shows like Diff'rent Strokes have addressed social issues mainly because their creators are people like Norman

Lear who have achieved the enormous power of commercial success and want to put it to certain social uses. Norman Lear's staff has actually kept a listing of the social issues covered on his shows, which now runs some four pages. David Jacobs can dictate many things about the content of Knot's Landing because he is the producer of a top-20 show.

The intervention, of course, has to be low-cost and relatively non-intrusive, but many issues can be covered in ways analogous to the seat belt example. The crucial variable here is the staggering power of repetition--messages delivered week after week to 30 or 40 million people. And the messages are delivered by familiar faces in the context of entertainment--something even commercial sponsors, with all their millions in ad budgets, can only partly duplicate.

Power Source No. 3: The Celebrity Performer

If Michelle Lee refuses to drink alcohol on the air, no one will insist she do so. A star-producer like Bill Cosby has even greater power to set what does or does not happen on his show. Sometimes performers can even dictate the main content of an episodic show or a TV movie if they believe strongly enough in a particular topic to fight to get in on the air. Moreover, performers, or other public figures such as First Ladies Rosalynn Carter or Betty Ford, can be ideal choices as national spokespersons for a cause, helping to galvanize media attention in one place.

Power Source No. 4: Associations of Media Professionals

Small, powerful groups such as the Caucus or the Alliance of Motion Picture and Television Producers can throw considerable influence behind a given cause, and of course influence their individual members as well. The Alliance, for example, recently sponsored a major fund-raising event for media education of the public about drug abuse, and also is heavily involved in efforts to combat substance abuse within the entertainment industry (Backer, 1985b).

Power Source No. 5: Mass Media Fund-Raisers

The most obvious recent examples of media impact on human problems weren't even mentioned previously--the Live Aid concert and "We Are the World" album and music video. These are actually not new traditions--during World War II, artists from Kate Smith to Vladimir Horowitz used their performing skills to raise millions of dollars in war bonds. What's new is the staggering power of modern high technology

to get many millions of people involved simultaneously--Live Aid focused more minds and spirits on a human issue than any other event in history.

The Issue of Mental Illness

Use of these power sources to reduce the stigma of mental illness, to educate the public, or to raise funds for mental health research and treatment, has been very limited. Mental illness is still an issue "in the closet," but so were most of the issues mentioned previously--just a couple of years ago. Now that effective national leadership is emerging to fight stigma and improve the quality of life for mentally ill people and their families, we urgently need to look at what has already been achieved in the mass media regarding these other human problem areas.

It is clear that we still have far to go. It is undeniable that the mass media are a hugely important channel of information and understanding about mental illness for the public. Television, in fact, is the single most significant information source on the subject for the average American. But it is equally undeniable that television and film typically portray mentally ill people in stereotyped, inaccurate ways, often depicting them as violent, uncontrollable and hopeless figures. Family issues, the rehabilitation of mentally ill people, and the current research on the causes and cures of the illness are largely ignored (Byrd & Pipes, 1981; Byrd, McDaniel & Rhoden, 1980; Winick, 1978; Gerbner, Morgan & Signorelli, 1982).

For example, CBS recently telecast Murder by Reason of Insanity, a TV movie that perpetuated the harmful myth that all mentally ill people are violent. Its depiction of the notorious Berwid case in New Jersey doubtless left many in the audience ready to bolt their doors against insane killers like Adam Berwid, who was released erroneously from a mental hospital and promptly murdered his wife. Apparently no technical consultation was sought about the issues of stigma and accurate portrayal before the program was completed, and no modifications were made in the show despite members of the National Alliance for Mentally Ill writing many letters to CBS regarding this broadcast. Interestingly, though, the network did insert a viewer advisory about the lack of connection between mental illness and violence at several points during the broadcast. It also sent a representative to a subsequent meeting of a New York AMI chapter, and also has expressed an interest in producing a movie-of-the-week that is more sensitive about the issues of family concern with mental illness.

Some other signs of progress are on the horizon. For several months I had been consulting with the Alan Landsburg Company and NBC Television on the production of a TV movie, 72 Hours. The central figures of this story are a mother and father who struggle with accepting their son's mental illness and with finding out how to help him and themselves. At the climax of the story, they visit a family support group, and learn for the first time that they are not alone.

We hope this film will, for the first time, portray sensitively what happens to a family when severe mental illness strikes. The producers and writers of this TV movie have been scrupulous in seeking consultation on issues of stigma as well as on technical matters such as the side effects of antipsychotic medications. Presently we are hoping for active collaboration with the National Alliance for the Mentally Ill in developing a comprehensive public information campaign to accompany the broadcast of 72 Hours next May.

Further, NAMI has recently initiated a national media watch through its Public Awareness Anti-Stigma Committee, chaired by Dr. Davis Pollock. This committee, like several media watch efforts coordinated by ex-patient groups, looks carefully at portrayals of mentally ill people in the mass media. Media watch "kits" have been sent to the more than 500 local chapters of the organization, for their use in monitoring local television as well as national media.

Using the Power Sources

Applying the five power sources I've mentioned, and the many specific examples of how the mass media have treated other human issues, to the topic of mental illness, will take some coordinated action. I can only touch here on a few of the many resources and experiences available. More than half a hundred television movies have been broadcast on various human problems, and many other mass media presentations offer good ideas for us to consider. My own initial suggestions come in the form of one specific recommendation for action and three more general "rules" about working with the mass media.

The recommendation is to bring together, for a conference with mental health professionals and representatives of family and ex-patient groups, those who've been involved in innovative collaboration with the media regarding other human problems. The media professionals, social scientists, health care professionals, and consumers who've helped to create what happened with Something About

Amelia or The Day After or An Early Frost, just to name a few, can teach us much about how to do things right where mental illness is concerned. That will surely include learning from the mistakes made in these other areas. The result of such a conference might be a national media management program somewhat similar to what groups such as the Entertainment Industries Council or the National Council for Families and Television have been doing in the substance abuse area--that is, an ongoing program of activities rather than "one shot" efforts tied to a particular TV program or film. Existing media efforts such as that of NAMI might be an ideal home base for such an ongoing program.

In coordinating these activities, the most important rule to remember is that our interventions are likeliest to work when we can show clearly that delivering a certain message also will get higher ratings or help sell more tickets at the box office. We have to be sure our efforts to de-stigmatize mental illness enhance (or, at the very least, don't retard) the commercial purposes of the mass media. We might refer to this as the "ride the horse in the direction its already going in" rule.

Now this may seem obvious, but too often energies are wasted by well-meaning people who lobby for the media to do things that are "non-commercial," to put out messages in a preachy or academic way, to force-feed hard truths to an audience used to having everything softened. Such disregard for the reality of television as an entertainment medium is self-defeating for two reasons: (1) If nobody watches your program, it doesn't matter how good or important its message is; (2) If it looks like nobody will watch it, it simply won't get on the air on commercial television. "Riding the horse" means acknowledging the reality.

The second rule is "know your friends." There is a small cadre of executives and creative people working in the mass media who do have social consciences, and who appear time and again when there are media-related conferences or events on any human issue, whether it be mental illness, AIDS, or care for the elderly. Finding out who these people are and getting at least some of them involved in the cause of de-stigmatizing mental illness will help lend power and credibility to the cause. Both formal and informal contact can help--meetings with powerful producers or celebrities, asking for help on given projects, developing ongoing collaboration with those who have an interest in the subject and are willing to give it a part of their lives.

For example, in 1984 the National Institute of Mental Health funded a conference on mass media depiction of mental illness and its role in defusing stigma (Baker, in press[b]). Several people in the room today were participants in that conference. When deciding whom to invite to this meeting, I quickly came upon many of the same names I've been working with for years on issues of substance abuse, physical disability, and the elderly. In reviewing who came through with contacts, assistance and their own personal participation, it was clear that the majority were "the faithful," the media professionals who had previously demonstrated their commitment to human issues.

These people in turn can place us in contact with other media professionals and organizations, which brings us to the third rule, "use the power of personal contacts and networking." Making the telephone call to the right person is, we all know, the shortest distance to getting almost any problem solved. In many cases, the value of personal contacts is in being able to quickly find out who is the right person to contact, and sometimes to have a verbal "letter of introduction" as well. Often such rapid contact is essential in the fast-moving world of the media-- otherwise your letter may get answered after the program has already aired, or some other opportunity has already passed.

And as all good networkers know, part of the secret to networking is to reciprocate. We professionals and citizen-advocates must make ourselves available for technical consultation and information-sharing with our media colleagues. Defensiveness or hostility helps no one. Collaboration and sharing builds bridges that can be used later when they're needed. Recognition through awards and honors helps in that process too. NAMI recently has initiated a media award, for example, and there is plenty of room for other mental health organizations to do the same.

And the Future?

Since a lot of the trail-blazing has already been done, we have in front of us a remarkable opportunity now to develop and carry out an ongoing, collaborative campaign with the mass media to reduce the stigma of mental illness and to increase positive community action for providing support to mentally ill people and their families. It seems clear that mental illness is another "disease-of-the-week" topic that will receive increased exposure on television in the next year or so, perhaps with some increased treatment in feature films as well. Our choice is to fight or ignore this trend, or to ride with it and try to influence the

outcome in a positive way. Drawing together what we've learned from other social issue areas will certainly help in this task.

And there are opportunities coming up through technological developments as well. Cable television, satellite TV and videocassettes offer extraordinary chances for tailoring messages about mental illness to fit particular audiences. The Hospital Satellite Network, for example, can reach tens of thousands of people through targeted broadcasts to 200 hospitals throughout the U.S.; local audiences can be brought together in the conference rooms or auditoriums of the Network's hospitals. Videocassettes such as Strong Kids, Safe Kids utilize commercial entertainment techniques (stars such as Henry Winkler, state-of-the-art computer graphics, etc.) to provide educational messages about child sexual abuse. At UCLA we worked with NAMI on a videocassette about services for families of the mentally ill, Living on the Edge, which is now being seen all over the world. We are developing more videos on related subjects. Cable television provides many chances for both local and national programming, some of it important educational material that would seldom be commissioned for commercial broadcast television.

We know that the mass media influences attitudes, beliefs, and behaviors, perhaps as effectively as any learning tool on earth. We know that television is the single most important source of information on mental illness for the average American. And we know from decades of social psychological research how we can use the media to influence opinion and action. What we who care about mental illness and its stigma lack is full access to the mass media tools. The power sources suggested here are ways to increase that access. Using these power sources won't cause the negative images of mental illness to disappear, of course, or promote all the needed action, but tapping into these media powers can make a difference in reducing stigma and enhancing quality of life for mentally ill people and their families.

References

- Archerd, A. (July 11, 1985). Just for variety. Variety, p. 3.
- Baker, T. E. (in press[a]). Drug abuse prevention and the entertainment industry. Prevention Networks.
- Backer, T. E. (Ed.). (in press[b]). Proceedings: Portraying mentally ill people in films and television shows. Rockville, MD: National Institute of Mental Health.
- Backer, T. E. (1985a). Holistic media. Consulting Psychology Bulletin, 37, 14-17.
- Backer, T. E. (August, 1985b). Substance abuse and the entertainment industry: A leadership challenge. Paper presented at a special conference sponsored by the National Institute on Drug Abuse, at the American Psychological Association annual convention, Los Angeles.
- Backer, T. E. (1983). Consulting with media organizations: New opportunities for psychologists. Consulting Psychology Bulletin, 35(2), 28-31.
- Byrd, E. K., McDaniel, R. S., & Rhoden, R. B. (1980). Television programming and disability: A ten-year span. International Journal of Rehabilitation Research, 3, 321-326.
- Byrd, E. K., & Pipes, R. B. (1981). Feature films and disability. Journal of Rehabilitation, 80, 51-54.
- Caucus for Producers, Writers and Directors. (1985). Alcohol guidelines for the television industry and results. Television Families, 8, 22.
- Connelly, B. (November 8, 1985). Letter printed in Variety. p. 19.
- Gerbner, G., Morgan, M., & Signorelli, N. (1982). Programming health portrayals: What viewers see, say and do. In D. Pearl, L. Bouthilet, & J. Lazar (Eds.), Television and behavior. Rockville, MD: National Institute of Mental Health.
- Schofield, J., & Pavelchak, M. (1985). The day after: The impact of a media event. American Psychologist, 40, 542-548.

Toppling the last taboo. (January 9, 1984). Newsweek.

Winick, C. (1978). Mental illness and psychiatrists in movies. In C. Winick (Ed.), Deviance and mass media. Beverly Hills, CA: Sage, 1978.