

Mental Illness: Romanticized v. Reality

We aspire to be like the admirable protagonists from our favorite television shows, who each have a certain something about them that makes them special, yet when we come across people like them in real life, we see them differently. With the increasing number of people carrying mental illness diagnoses, the validity of their societal labels is a relevant issue that needs to be addressed. Though creating a platform to rectify society's judgements may seem like a step in the right direction, television shows have instead perpetuated the damaging stereotypes of the mentally ill. This is made explicit through a comparison of the entertainment industry's interpretations of mental illnesses and real accounts from individuals who have been personally impacted by mental illnesses, alongside an analysis of our subjection to stereotypes. The romanticized representation of mentally ill characters in fictional television shows is harmful to society because it encourages hasty generalizations, stimulates people's ignorance of the reality of living with a mental illness, and leads to a loss of self-esteem in those who suffer from mental illnesses.

In contemporary television, mental illness is frequently portrayed as an appealing superpower rather than a debilitating medical condition. For instance, in *House M.D.*, Dr. Gregory House owes his astounding professional accomplishments to his symptoms of clinical depression. House's disrespectful treatment of patients, his disinterest in establishing relationships with them, and his personal principle, "Everybody Lies," exemplifies his lack of empathy and pessimistic attitude toward human nature. These character traits, in collaboration with his Vicodin addiction, keep his focus in check; living a detached and chemically stimulated life makes it easier for him to concentrate on and therefore excel in his work: diagnosing the unsolvable. Another example comes from *The Big Bang Theory*'s Sheldon Cooper, who is a

caricature of obsessive-compulsive disorder. When he is at his friends' doors, he must knock three times before saying their name, repeating this process an additional two times. He also has a specific seat in his apartment that he must sit in, which he provides an extraordinarily in-depth rationale for. Regardless of how strange his quirks are, Sheldon's rigidity makes him attentive to detail, which contributes to his high intellect. These small screen productions function as highly influential sources of information dissemination, so when they choose to portray the most radical examples of mental illnesses, they are corrupting the minds of their audiences who rely on them to be an outlet to the rest of the world. Though some may argue that the inclusion of these characters turns mental illnesses into something positive, these success-inducing cases are rare. Television shows incorporate them to add layers of drama and humor, however, it leaves their audience misinformed.

The on-screen depiction of living with a mental illness is far from the reality. In Elissa Washuta's autobiography, *My Body Is a Book of Rules*, she offers her own perspective as a young woman with bipolar disorder. Contrary to popular belief, at no point did Washuta's mental illness prove to be beneficial to her life, rather, it took physical and emotional tolls on her. Washuta lost 35 pounds and became underweight, and her "daytime sedation and low motivation began to interfere with her studies" (Washuta 11). Her ability to function became dependent on prescription medications, to the point where she established a God-like view of her psychological drug of choice, claiming "the Lamictal gave, and the Lamictal hath taken away; blessed be the name of the Lamictal" (56). On top of it all, Washuta's unusual shifts in mood led her to make poor decisions, such as being intimate with random men and excessively drinking, even when she knew the risks. Although her experiences drastically differ from those portrayed on television, they more accurately represent the common effects of mental illnesses.

Simple-minded people are quick to adhere to stereotypes for easy attitude calibrations about everyone around them. However, “this kind of naïve categorizing ignores the unique and interesting differences among people” (Corrigan 57). The term “mental illness” encompasses a diverse range of symptoms and diagnoses. As a result, mental illnesses work on a case by case basis; everyone who suffers from them does not experience the exact same things. With this in mind, it is unjustifiable to continue these rash generalizations.

The stereotypes prolonged by popular television shows have fueled the general public’s ignorance regarding mental illness. “Cognitive researchers have shown that our ability to perceive and understand the world is often fooled rather than driven by fact” (Corrigan 27), which should motivate us to question the reliability of the sources through which we receive information. However, the widespread acceptance of seemingly factual stereotypes has led them to become the basis of our judgements of the people around us. In her analysis of the formation of stigmas, Sharon Packer says that “if an individual differs in one or several attributes from other members of the category available to him/her and if the aspects in which he/she deviates are found to be less desirable, these attributes constitute a stigma” (165). When someone is deemed to have just another “average” case of mental illness, where the detrimental health conditions are more prominent than the rewarding abilities, they no longer fit society’s ill-informed idea of what constitutes a “real” mental illness. For Washuta, “[her] eighth-grade guidance counselor suggested a bipolar diagnosis, but everyone else said it was teen angst” (50). Because her symptoms did not comply with her peers’ pre-existing beliefs as to what comprised a mental illness diagnosis, Washuta was inaccurately labeled as a troubled teenager rather than someone suffering from severe emotional instability. Even though the majority of society is not

qualified to make any sort of medical judgements, their opinions still resonate with the people they are directed towards.

When someone who suffers from a mental illness internalizes the prejudices held against them, they begin to lose self-esteem. It is demoralizing enough to know they are disconnected from “normal” people, but when their mental illness is not acknowledged by others because it does not fit the stereotypes, they are left to perceive themselves in a less favorable manner. In his analysis of the effect of self-esteem issues in people who suffer from mental illnesses, Patrick Corrigan states that they “search their life history to find out what they did wrong that brought on this damnation” (117). This is true of Washuta’s case; she looked back through her past, researching the lives of her ancestors and recalling how she was raised, to determine why things played out for her the way they did.

Popular culture’s newfound fascination with mental illness has opened the topic to an unprepared world. In the past, society consistently glossed over the existence of mental illness, but now that attention has been brought to it in the media, it must be acknowledged. However, the primary sources for the basis of people’s opinions are exaggerated stories of mentally ill characters in fictional television shows. Like any new societal issue, it has become a victim of stereotyping, as people try to find its rightful place in their communities. With the lack of existing knowledge about mental illness, people are left uneducated and resort to using the stereotypes to understand those around them. Unfortunately, these generalizations have a negative impact on people who suffer from mental illness, as they begin to feel poorly about themselves because of the way they are classified. With a better understanding of mental illness circulating the nation and heightened support for the change in the representation of mental illness in television, this chain of misinterpretations can be eliminated.

Bibliography

Corrigan, Patrick W., et al. *Challenging the Stigma of Mental Illness: Lessons for Therapists and Advocates*. Wiley, 2011.

This book, co-authored by a group of writers with expertise in clinical psychology, describes how stigmas regarding mental illnesses are formed and how they affect those who suffer from them.

Lorre, Chuck and Bill Prady, creators. *The Big Bang Theory*. CBS, 2007.

This show follows a group of introverted physicists on their trek to be more social. One of the main characters, Sheldon Cooper, owes part of his brilliance to his obsessive-compulsive disorder.

Packer, Sharon. *Mental Illness in Popular Culture*. ABC-CLIO, 2017.

This book highlights instances of mental illness in the entertainment industry, ranging from television to fine arts to music. Sharon Packer, a practicing psychiatrist, discusses the effects of the exaggerated representation of mental illness in popular culture on the general public's interpretations.

Shore, David, creator. *House M.D.* NBC, 2004.

This show follows Dr. Gregory House as he leads a team of diagnosticians at Princeton-Plainsboro Teaching Hospital. His symptoms of clinical depression contribute to his ability to formulate diagnoses for the most complex medical issues.

Washuta, Elissa. *My Body Is a Book of Rules*. Red Hen Press, 2014.

This book details Elissa Washuta's struggles with her Native American identity, her sexuality, and her bipolar disorder. Since it is an autobiography, it is a credible source to depict the reality of living with a mental illness.