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News Media Portrayal of Mental Illness

Implications for Public Policy

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Newspapers are a primary source of information about a variety of topics, including mental illnesses. A study of 1999 newspapers revealed that dangerousness is the most common theme of stories about mental illnesses. In contrast, stories of recovery or accomplishment were found to be rare. The ratio of negative to positive stories involving mental illness decreased between 1989 and 1999, but negative stories continued to far outnumber positive ones. The potential influence of these patterns of news coverage on public attitudes and public policy are discussed.

Keywords: mental illness; mental health; media depiction; news coverage; public policy

Mass media are the most common sources of public information about mental illnesses, according to a 1990 survey conducted for the Robert Wood Johnson Foundation (DYG, Inc., 1990). Newspapers were prominent among the media sources mentioned, with 74% of the more than 1,300 survey respondents indicating newspapers as their major source of knowledge about psychiatric disorders. That newspaper coverage of mental health topics can have an impact on public thinking and public policy is apparent in the results of major stories throughout the years.

Investigative reporter Elizabeth Cochrane (better known as Nellie Bly) had herself admitted to Blackwell’s Island in New York. Her subsequent account of the inhumane conditions she observed at this institution, in her 1887 book Ten Days in a Madhouse, led to New York City’s appropriation of an additional $1 million a year for improved care of people with mental illnesses. In 1960, journalist Jack Nelson won a Pulitzer Prize for his account of the poor treatment received by psychiatric patients at Milledgeville State Hospital in Georgia. His news articles not only fueled efforts to improve conditions but influenced the spouse of an up-and-coming Georgia politician, Rosalynn Carter, to become a lifelong mental health advocate. Geraldo Rivera achieved early fame with his 1975 reports of abuses of mentally retarded residents of Willowbrook; his reports, and subsequent investigations, led to the closure of that facility.
Both public and professional behavior appear to have been influenced by the extensive coverage accorded John Hinckley Jr.’s 1981 assassination attempt on President Ronald Reagan and Hinckley’s subsequent trial and acquittal by reason of insanity. In a study of articles about the insanity defense in popular periodicals (*Time*, *Newsweek*, etc.) between 1979 and 1988, Wahl and Kaye (1991) found this to be the case. More than half of the articles on this topic (72 of 131) were published in 1981 and 1982. Similarly, half of all articles on the topic in professional journals during the same 10-year span occurred between 1983 and 1985. The Hinckley trial appeared to spur both lay and professional writings about the insanity defense. Moreover, 25 states changed their insanity defense laws and 26 bills were introduced to Congress pertaining to the insanity defense during or soon after the Hinckley trial (Callahan, Mayer, & Steadman, 1987).

It is not just dramatic events or disclosures that influence attitudes, behaviors, and policies related to mental illnesses. Ongoing patterns of coverage also may influence public opinions and choices in more subtle ways. Some of these patterns were revealed in a recent study of the content of newspaper stories relating to mental illness.

Wahl, Wood, and Richards (2002) used a computer database to search six different newspapers for 1999 stories containing the key term “mental illness.” The newspapers were *The New York Times*, *Washington Post*, *St. Louis Post Dispatch*, *Boston Globe*, *Los Angeles Times*, and the *St. Petersburg Times*. Fifty articles identified by the search were randomly selected from each paper for reading and rating. Each of the 300 articles were rated by three trained volunteers for the themes and messages it presented about mental illnesses; at least two of the three raters had to agree for a rating to be counted.

One theme in particular dominated in stories about mental illness. Dangerousness was by far the most common theme of newspaper articles in all of the papers, individually and combined. Of all stories, 26% involved accounts of crimes and/or violence perpetrated by a person with a mental illness. Moreover, these stories often were introduced with glaring headlines announcing the theme: “History of Schizophrenia Detailed for Man Held in Subway Attack” (*New York Times*, April 30, 1999); “Suspect in Killing Was Repeatedly Released From Mental Institutions” (*St. Louis Post-Dispatch*, September 13, 1999); and “Escaped Killer From Mental Hospital is Shot, Apprehended” (*Washington Post*, December 6, 1999).

These findings are consistent with results from other studies around the world. Day and Page (1986), for example, examined 103 items related to mental illness appearing in Canadian newspapers between January 1, 1977, and May 30, 1984. They reported that dangerousness and unpredictability were the most common traits of the people with mental illnesses in the 44 articles involving a specific person with mental illness. Philo et al. (1994) identified 562 items related to mental health appearing in a variety of United Kingdom media—mostly newspapers—in April 1993. Two thirds of those items reportedly linked mental illness and violence. The New Zealand Mental Health Commission...
(2000) reviewed 810 newspaper clippings related to mental health during 3-month sampling periods in 1997 and 1998 and found that one in five articles mentioned violence.

What, then, are the implications of this repeated news link of mental illness with violence? First, such linkage perpetuates stigma and public fears of those with mental illnesses. In a 1996 study, Thornton and Wahl had people read a story about a person with mental illness who killed a young girl in a public place while on a day pass from a psychiatric hospital and assessed their attitudes toward mental illness after they had done so. Compared to people who had read a different story about mental health (not involving dangerousness), those who read the target article showed a greater tendency to view those with mental illness as dangerous, anxiety provoking, and in need of monitoring and restriction. Sensational stories about mentally ill killers perpetuate public fears and misconceptions related to mental illnesses.

Those fears in turn fuel resistance to community care. Thornton and Wahl (1996) found that exposure to the crime article was associated with lower endorsement of community care options for people with mental disorders. Fear that community safety will be compromised by neighborhood placement of group homes for people with mental illnesses is known to be a significant factor in the NIMBY (Not In My Back Yard) syndrome (Wahl, 1993).

The emphasis on dangerousness in news coverage of mental illness also may fuel employer reluctance to hire those with mental health treatment histories. Employers, fearing that persons with mental disorders will be a threat to the safety of their other employees, will be understandably hesitant to hire them. When the Equal Employment Opportunity Commission (EEOC) released guidelines about Americans with Disability Act (ADA) provisions prohibiting hiring discrimination against people with mental illnesses, one newspaper published a cartoon demonstrating (and reinforcing) these kinds of fears: The cartoon showed a man with a briefcase labeled EEOC speaking to an employer. He is telling the employer, “No you may not ask a job applicant about a history of mental disabilities. That’s discrimination.” The prospective employee standing next to the EEOC representative is wearing a hockey mask and holding a raised axe.

News coverage that fuels fears of those with mental health treatment histories also may contribute to increased coercion in treatment of people with mental illnesses. Pescosolido, Monahan, Link, Stueve, and Kikuzawa (1999) asked members of the general public a number of questions about mental illnesses and its treatment. They found that when a person was perceived as dangerous, almost all respondents endorsed forced treatment. For a person with schizophrenia, the agreement was 95%. For a person with major depression, it was 94%. Even for a person described only as “troubled,” 82% of survey respondents indicated coerced treatment was appropriate if the person might be dangerous. Thus, one public policy result of news links between mental illness and violence may be laws that more easily permit involuntary commitment.
Indeed, an example of this can be found in the enactment of Kendra’s Law in New York (and similar laws since then in other states). When Andrew Goldstein pushed Kendra Webdale onto the New York City subway tracks in January 1999, a flurry of articles and editorials followed. Goldstein was dubbed “The Subway Psycho” and New York City’s newspapers—tabloids and otherwise—published numerous articles both describing the tragedy and demanding that such dangerous people not be allowed to remain free on the streets. One of the outcomes was Kendra’s Law, allowing for compelled outpatient treatment of psychiatrically disabled persons who refused needed treatment. Despite the fact that Andrew Goldstein did not need to be compelled to receive care—he had actively sought treatment before the subway incident—the media frenzy and misplaced emphasis on dangerousness helped to transform his actions into a mandate for coerced treatment.

What was not presented in the newspaper articles in Wahl, Wood, and Richards’s study is also noteworthy. For instance, they found relatively few stories of recovery or accomplishments of people with mental illnesses. Even when newspaper articles did not focus on violence or crime, they tended to emphasize dysfunction and disability. Stories showing people with mental illnesses making some kind of positive contribution to their communities were outnumbered two to one by stories that showed them in a negative light. The tendency to focus on dysfunction is illustrated in one of the series of stories that ran in a Canadian newspaper a few years ago. The series explored the ramifications of cutbacks in the mental health care budget. One man who agreed to be interviewed for the series was a mental health consumer who headed a local consumer self-help group. He was eager to tell the reporter about the creative efforts his group had made to help themselves and others in the face of reduced formal services. When asked about his psychiatric history, the man did acknowledge that he had been hospitalized for bipolar disorder and that he had, at one point, expected to be rescued from his troubled existence by aliens from outer space. However, he stressed that he had not had an episode in 10 years and was now a successful mental health advocate. When the article about him appeared in the newspaper, it was headlined “Ruled by Outer Space” and focused almost exclusively on his symptoms of 10 years ago, with very little about his or his group’s accomplishments.

Another example of how dysfunction is emphasized comes from the obituary page of the Washington Post. Margaret Mary Ray was a woman with schizophrenia who became known to the general public as the stalker of David Letterman. When she killed herself in October 1998 by kneeling in front of a train, her obituary stressed only her illness. In contrast to the obituary that appeared directly below hers—of a woman of approximately the same age—there was no mention of the town where she grew up or where she went to school or what jobs she had. Her obituary detailed only her multiple hospitalizations and her stalking of David Letterman. The obituary below hers concluded, as is typical, with a listing.
of relatives left behind to mourn her passing; Margaret Mary Ray’s ended only with the retelling of a joke about her from the Letterman show.

What is also typically lacking in newspaper coverage of mental illness, according to Wahl et al.’s (2002) study, is the perspective of people with mental illnesses. Rarely were statements, interviews, or opinions of mental health consumers included. Again, these patterns of coverage have the potential to influence public attitudes and policy. A focus on dysfunction and absence of stories of recovery likely contribute to public pessimism about the potential for recovery. Many people, including legislators and other policy makers, continue to believe that those with severe mental disorders are unlikely to recover. The absence of comment from mental health consumers in articles about mental illness reinforces the public suspicions that those with mental illnesses are unable—too disordered, too disorganized, too unreliable—to speak for themselves. Lack of expectation of meaningful recovery may lead, in turn, to reluctance to devote resources to the task of treatment and rehabilitation. Why use scarce resources when the likelihood of success is perceived as low?

Finally, Wahl et al. (2002) observed a dearth of opinions of nonmedical experts in 1999 newspaper stories about mental illnesses. When expert opinions were provided, they came almost exclusively from the medical professionals—from psychiatrists, neurologists, and other MDs. The perspectives of nonmedical professionals about issues related to mental health treatment and policy were largely absent. Exclusive consultation with medical experts led, predictably, to an emphasis on hospitalization and medication for treatment of mental illnesses. Seldom were psychosocial or community interventions described, despite their increasing importance in the recovery movement. Thus, current newspaper coverage contributes to the medicalization of mental illness and the public is led to accept—and provide financial support for—medication and hospitalization as the primary solutions for mental health problems. Similar acceptance and support for psychosocial intervention, rehabilitation, and community treatment will likely be harder to obtain given their absence from journalistic considerations of mental health treatment options.

In recognition of the above limitations, and others, in the public presentation of mental illness, many mental health advocates are working to encourage improvement in news coverage of mental health matters. Numerous organizations in the United States and abroad, for example, have begun Media Watch programs, through which participants monitor and respond to media depictions of mental illnesses. People involved in these programs communicate concerns about specific stories to writers, editors, and publishers to educate them and encourage change. Many of these organizations also have Media Awards programs that recognize journalists for success in presenting mental health issues in accurate, unbiased, and nonstigmatizing ways. There are also programs, such as the Rosalynn Carter Fellowships for Mental Health Journalism, that work with reporters. The Carter Journalism Fellowship program selects six working journalists each year and provides financial and consultative support for them to
complete a proposed project related to mental illness. One recent fellow, for example, completed a series of nine front-page stories in the *Billings Gazette* (Montana) on the challenge of mental health care in rural areas where the nearest mental health professional may be hundreds of miles away. The series included interviews with numerous consumers and family members, as well as a variety of mental health practitioners, and the reporter received a national media award from the National Mental Health Association for her fine work.

The preceding observations about newspaper coverage of mental illnesses and its potential impact on public policy lead to recommendations for both journalists and psychologists. One obvious recommendation for journalists is that they reduce their emphasis on crime stories related to mental illness. The vast majority of people with mental illnesses are neither violent nor criminal and the appearance of individuals with psychiatric disorders mainly in the context of crime is contrary to journalists’ commitment to accurate and unbiased reporting. Moreover, when stories connecting mental illness with violence do appear, reporters can take care that these actions are put in context, for example, citing the research findings that demonstrate that such actions are uncharacteristic of those with psychiatric disorders and not presenting mental illness as the sole determinant of the tragic outcome. Here is a place where psychologists can contribute. They can be willing and able to comment on stories and help to provide the perspective reporters need.

It is recommended also that journalists do not rely exclusively on MDs for expert opinions about mental health matters. There are multiple perspectives in the mental health field and effective interventions beyond medication and hospitalization and it would be good for the public to be better informed about these. Here again, the availability and ability of psychologists to speak with the press is crucial. It would be useful for our professional organizations to expand their offerings of media training that helps psychologists be more confident and more effective in talking with reporters in language they can understand and use.

Reporters also can make greater efforts to talk to mental health consumers and their families. Although some reporters express frustration that confidentiality issues and reluctance to disclose mental illness make interviews with consumers difficult to obtain, many consumer and family organizations have established speaker referral lists of people ready, willing, and sometimes trained to speak to reporters. Psychologists can help with this process by encouraging reporters who contact them to also contact consumers and families. Psychologists might even familiarize themselves with the consumer groups that provide people willing to speak with reporters so that they can be prepared with a specific referral to increase the likelihood that needed consumers’ perspectives will be included by reporters.

Finally, it is recommended that journalists not neglect stories of recovery and achievement. With new medications and innovative community programs, stories of recovery and accomplishment are increasingly available. People with mental illnesses, including severe disorders such as schizophrenia, do recover
and do contribute to our societies in both mundane and remarkable ways. Moreover, reporters may discover that when their stories deviate from the “typical” stories about mental illness—stories of violence, dysfunction, and drug treatment—they will please and attract an even larger readership. At the very least, changed patterns of newspaper reporting on mental illnesses may avoid contributing to the harmful public attitudes and public policies supported by current coverage.

REFERENCES


OTTO F. WAHL, Ph.D., is a professor of psychology and director of clinical training at George Mason University in Fairfax, Virginia. He has been publishing and speaking on the topics of mental illness stigma and the contributions of mass media depictions to continuing stigma for more than 20 years. His work includes numerous research articles and two books: Media Madness: Public Images of Mental Illness and Telling Is Risky Business: Mental Health Consumers Confront Stigma. He serves as an advisor to several organizations involved in public education about mental illness, including the National Stigma Clearinghouse and the National Mental Health Association (NMHA), and works with the Rosalynn Carter Mental Health Journalism Fellowship program to select and mentor journalists in their coverage of mental health issues.