

Stigma and Fear: the 'Psy Professional' in Cultural Artifacts

Abstract

The loss of reason called madness¹ provokes perhaps the greatest human fear, for it is reason that dignifies humanity and separates us from beasts. The 'psy professionals'² - those who prescribe and administer treatments for madness - are frequently portrayed in fiction, film, comics, computer games and entertainments, along with the mad themselves and the asylums that confine them. Overall, these depictions are malign: the reader/watcher/player is encouraged to fear the mad, the madhouse and the mad-doctor. Choosing to use less abrasive vocabulary to name the condition of madness makes no difference to the terror the condition arouses, for the content of many books and games aims to inspire fear. In spite of considerable efforts over many years, the stigma which attaches to mental illness remains firmly in place for patients, while psy professionals also carry their share of "some of the discredit of the stigmatized" (Goffman 1968, p 43) and join patients in a stigmatized group. Popular belief often equates the psy professions with madness (Walter, 1989). This paper explores ways in which the fear of madness, and the stigma which clings to sufferers and their professional carers, is perpetuated by a constant stream of popular cultural artifacts.

Key words: stigma, fear, fiction, popular culture

The negative public perception of 'psy professionals'

While many therapists, doctors and scholars recognize that reading fiction is a helpful adjunct to professional training (Beveridge, 2003; Evans, 2003; Oyebode, 2009; Hurwitz and Vickers, 2006), it appears that a large number of psy professionals may be unaware of their overwhelmingly negative portrayal in popular culture. Recruitment to the psy professions remains problematic and psy professionals frequently complain of the low regard in which they are held, compared with other medical specialists. Rajagopal et al (2004, p 444) found that medical students considered

psychiatrists to be “emotionally unstable, confused and lower in competence than surgeons and physicians”. Robson (2010, np) discovered that “most doctors identify psychiatry as the least respected medical specialty” and “many psychiatrists claim to feel stigmatized within their profession”. Bhugra et al (2015, p 424), acknowledging the perceived lowly status of psychiatry, maintained that this was “reflected in poor resourcing of psychiatric services”, leading to “poor recruitment and retention of psychiatrists” as well as “reduced access, as patients [sought] less stigmatized help”. A significant survey of teaching faculty members in medical departments around the world found “[t]he vast majority of respondents ... held negative views toward psychiatry as a discipline, psychiatrists, and psychiatric patients” (Stuart et al, 2015, p 21).

To counter this prevailing view, psy professionals such as Persaud (2015) and Miller (2012) have published fictions with the aim of offering positive depictions of members of their profession. (On the other hand, the highly-respected US psychiatrist, Irvin Yalom, has produced fictions that he calls ‘teaching novels’ which show psy professionals behaving very badly indeed, presumably showing psy trainees how *not* to behave.) Nevertheless, it remains the case that Sigmund Freud is rarely awarded the scientific status that men such as Einstein and Newton have achieved. Insane, violent Hannibal Lecter continues to challenge Freud for the dubious position of most-well-known psychiatrist in the perceptions of many people. For the sake of both patients and professionals, we need to discover what is happening in popular culture and why so many negative depictions of psy professionals abound.

It seems possible that the historical treatments, such as shock therapies and lobotomy, offer reasons for the cultural anxiety that surrounds psychiatry and allied professions. Bhugra et al note the “dark centuries” when “physical restraints [and] coercion” were employed (2015, p 424). Given a generally more benign, albeit beleaguered, contemporary psy culture, it is important to discover why this historical view is still valid within the popular view of treatment of the mad. Care of the

insane was not part of medicine until the mid-19th century, so there may well have been consequences for the psy professions, arriving as medical latecomers, with the roots of their reputation in the popular notions of Bedlam and Gothic horror. Other medical specialties appear to have offered huge progress, though it is worth remembering that that it is not only the psy professions that attempt to treat intractable problems: there are many physical diseases which remain incurable, motor neurone disease and Parkinson's among them. However, doctors dealing with physical diseases rarely attract the fear that psy professionals often do. For a physician to be feared, he needs to be a maverick criminal, like Harold Shipman.

The psy professional as comedic anti-hero

I have written elsewhere of the demonization of psychiatrists in literary fiction (Hopson, 2014). Comic fictional depictions offer another way of denigrating psy professionals, possibly in an attempt to mitigate the widespread fear of this group. There are some entertainingly dismissive and belittling descriptions of psy professionals in novels. US writer and former clinical psychologist, Jeremy Leven, gives the bereaved narrator of his 1981 novel, *Creator*, the following opinion:

I rank the psychiatrist as a scientist somewhere between the beginning astrologist and the novice soothsayer. I equate his techniques with those of the divining rod, his approach with the sophistication of the handwriting analyst, the palm reader, and the phrenologist.... For me, talking to a psychiatrist is like nailing myself into my own coffin, with the doctor, on whom I've called for help, lounging back in his armchair and dispassionately handing me the nails. (p 39)

Peter Byrne (2000) observed that “[i]n cinema and television, mental illness is the substrate for comedy”. It is also salutary to consider generally the way in which the psy professionals are presented in fiction and important to note that comedy is frequently employed here also as a vehicle

for stories of distressing experiences. Howard Reiss's novel, *A Family Institution* (2011), presents the story of Ira, who traces his dead mother who was institutionalized, raped by an asylum janitor (Ira's father), lobotomized and eventually died within the institution. Surprisingly, given this content, it is a comic novel. Similarly, *The Dice Man* is a comic tale of one therapist's dreadfully abusive behaviour as he rolls dice to determine how to treat each patient. Rhinehart (pen name of author, George Cockcroft, and also the name of his fictional narrator) expresses his joy when the "dice [let] me call my patients sadists, idiots, bastards, sluts, cowards and latent cretins" (Rhinehart, 1972, p 90).

Solomon Posen, the late Australian psychiatrist, noted that, "of all medical specialists in fictional literature, psychiatrists are given the most negative treatment" (Posen, 2009, no pagination). Posen observes that, overall, doctors receive little respect in fiction, but it is the psychiatrists who are the most frequently and venomously reviled. In his paper, Professor Posen made the following statements about psychiatrists:

[T]he majority [of fictional psychiatrists] are shown as villains, lechers, sadists, acquisitive businessmen, or useless charlatans. (n p)

[Other doctors receive negative attention but] not nearly to the same extent as psychiatrists, who are distrusted by the public and despised by other physicians. (n p)

Psychiatry, claims Posen, is widely seen as 'hocus pocus', a discipline lacking in scientific substance. He draws attention to fictions in which psychiatrists are presented as crazy failures who did not make it in so-called 'real' medicine (2009). In his discussion of Joyce MacLver's *The Frog Pond* (1962), he observes that:

Psychiatrists are not only lunatics: they are outlandish lunatics from Vienna and other obscure parts of the globe. They have foreign names and they speak with an accent. (n p)

It is noteworthy that Dick Diver, the psychiatrist in F Scott Fitzgerald's *Tender is the Night* (1934), comments that "[t]he weakness of this profession is its attraction for the man a little crippled and broken" (Cited in Posen, 2009, n p). Walker Percy's *The Thanatos Syndrome* (1987) contains the following damning statement:

In a small general hospital, a psychiatrist is ranked somewhere between a clergyman and an undertaker. One is tolerated [but] one sees the patient only if the patient has nothing else to do. (Cited in Posen, 2009, n p)

This ridicule of the psy professional (here particularly aimed at the psychiatrist) is perhaps one way of dealing with the fear of madness. I shall return to the question of fear below. First, I should like to consider the ways in which the wicked, abusive, brutal or useless psy professional has become a literary and cultural trope. Stories need villains and the fictional psy professional obligingly fills this role. In much the same way that our popular press often presents the mad as murderous criminals (Gilligan, 2003; Parry and Moyes, 2016), our cultural artifacts have repeatedly cast the psy professional in the role of evil abuser or useless charlatan. Psy professional characters and their patients appear in various cultural forms, from literary fiction to horror, and from cartoons and movies to characters in the hugely successful genre of comic books and the booming field of online games.

Positive fictional depictions of the psy professional

Of course, not all psy professionals in novels are villains. Fictions contain a few highly competent individuals, such as W H Rivers in Pat Barker's *Regeneration Trilogy* (1997), Dr Fried in

Joanne Greenberg's *I Never Promised You a Rose Garden* (1964) and Dr James in Mary McCarthy's *The Company She Keeps* (1942) It is interesting that Drs Fried and James are shown almost exclusively within their consulting rooms, mirroring the real patient's limited knowledge of the therapist. In McCarthy's novel, in particular, a full presentation of the client's experience of transference in therapy may be followed by the reader, as Dr James goes through many incarnations in narrator Meg's eyes. Fiction, it is clear, can present the psy professional positively but, it seems, only by presenting the therapeutic process in some detail. In reality, this procedure is usually a very private experience between patient and therapist, although television has made some attempt to demystify therapy in programmes such as HBO's *In Treatment* (2008-2010). In many novels, psy professionals are not seen with patients, but only in their often immoral, personal lives (Murdoch, 1974; Kureishi, 2009). In such texts, it seems that the presence of a 'psy professional' of some kind warns the reader that we are in the presence of a more or less villainous being.

Crime thrillers and the psy professional

Crime thrillers make much use of the psy professional, whose position in this popular fictional form is complex and nuanced. The skills of the forensic psychiatrist/psychologist are required in such texts, but his understanding of the criminal mind typically turns him into a disreputable character. Keith Ablow's thriller, *Denial* (1998), makes use of a deeply unpleasant psy professional, Frank Clevenger, who is a cocaine-user and frequenter of prostitutes. Characterising the psy professional in this way indicates that understanding evil requires a wicked mindset. In his novel, *The Analyst* (2012), John Katzenbach, another writer of gripping thrillers, uses the analytical, deductive powers of one psy professional, Dr Stark, to solve a life-threatening puzzle set by another psychiatrist, Stark's former mentor, Dr Lewis. These thriller plots also suggest the possibility that the psy professional is 'infected' by the mad: only in this way can s/he understand the criminal mind. Nicci French's personally troubled but well-disposed, competent analyst, Frieda Klein, is a rare example of a positively depicted psy professional in a crime thriller series (French).

Anti-hero psy professionals in comic books

A writer on the Menninger Clinic blog, *Say No to Stigma*, commented: “It had never occurred to me that so many comic book villains came from the world of mental health” (Dolan, 2010). And indeed they do. Dolan’s blog post, entitled “Psychiatry: the ultimate arch nemesis?” refers to the many psy professionals in the Marvel Comic and DC Comic universes. These publications have been in extensive circulation since the 1930s and there is a large amount of information about comic book characters and their stories on the internet. The comics have also morphed into a significant presence in films and games. Some of their psy professionals are superheroes, such as Brother Voodoo, although his appearance, with shrunken heads hanging from his waist, is far from reassuring (Tan, no date). However, there is a larger group of comic book villains who trained as psy professionals. These include Ahab, Dr Faustus, Harley Quinn (a rare female fictional psy professional), Hypno, Moonstone, Psuper Psychiatrist, Scarecrow, Amadeus Arkham, Jeremiah Arkham, Dr Bong, Green Goblin, Hugo Strange (Batman’s earliest foe, who first appeared in 1940), Jack Serious, Sauron and Zoom (Lorendiac, 2009). Notable comic book patients include Poison Ivy, Mad Hatter, Clayface, Mr Freeze, Killer Croc, Riddler, Jeremiah Arkham, Amadeus Arkham, Two-Face, Scarecrow, Joker and Harley Quinn. There are obvious overlaps between these two groups, suggesting that psy professionals are barely differentiated from the mad in comics, both occupying a shared stigmatized place. The mad, unsurprisingly, are all villains. The comic book universe has no place for suffering on the part of the insane.

Patients and psy professionals are all depicted in comics and related artifacts as grotesques, with the intention of arousing fear. Games set in asylums involve much physical violence between patients and psy professionals. However, if we consider female characters (patients/villains/psy professionals), another disturbing element is present: whatever their apparent moral status, they are usually sexualized. In the case of Harley Quinn, she is also infantilized, often wearing a short frilly

skirt, with her hair in bunches (Harley Quinn, n d). All of these female characters have improbable Barbie Doll figures. While these representations seem culturally outdated, they also continue the biblical myth of Eve as sexual temptress and mother of all sin. Cultural stereotypes are difficult to erase.

These comic book and on-line depictions remind us the terrifying asylum is the domain of the psy professional. At the time of writing, Wikipedia lists 54 video games set in asylums (Wikipedia, 2016). In the comics, Arkham Asylum figures frequently and, indeed, *Batman: Arkham Asylum* (2009), has been described as “the best superhero video game ever”. Arkham is presented as a sprawling, darkly Gothic place, largely in ruins (vick, 2012). Internet searches for abandoned asylums produce similarly eerie pictures and it is difficult to decide whether real, disused asylums influenced the recent artwork for Arkham, or if the current fashion for collecting photographs of ruined hospitals has been a result of the pervasiveness of images of this famous fictional hospital.³

Abandoned asylums have inspired many photograph collections and books (Davis, 2014: Van Der Velde, 2016). This is justifiable photo-journalism. However, compilers and reviewers tend to stress the hidden mysteries and strange practices these isolated ruins once housed. The *Sun* newspaper’s review of Van Der Velde’s book notes the “[e]erie scenes” in a “chilling new photo series” (Collins 2016). These places, in which horrific treatments such as lobotomy, insulin therapy and organ removal occurred, are generally associated with hauntings by former mad inmates. Photographs of real, ruined mental institutions, often in black and white and under lowering skies, have obvious Gothic overtones (Place, 2004). Internal photographs frequently show long empty corridors (Uncharted Ireland, 2017), suggesting that losing one’s way is likely, physically and metaphorically. Another telling photograph of a bare bed in a bleak cell has “It was more fun in Hell” daubed on the wall (It was more fun..., n d). Yet another picture shows a row of canvas-topped baths in a ruined American asylum (Opacity, n d). Here, patients would have been trapped for hours in

tepid water. This was one of many historical water treatments imposed by the psy professional. There was of course absolutely no scientific basis for such water treatments. Michel Foucault plausibly suggests such treatment may have been an attempt to mirror baptism by water, allowing the mad to be reborn as sane (Foucault, 1988, pp 167-172). In viewing these pictures on internet sites, it is not always easy to distinguish between images of actual abandoned asylums and those that come from comic books, films and games. However, they all add to the notion that psy professionals imprison the mad in these terrible places and torture their patients with water, electricity, germs and a variety of restraining devices (Children's chair, 2013; Restraining chair, n d; Utica Crib, n d).

Board Games and other psy-horror 'entertainment'

In addition to computer games, there are also board games and other entertainments. Amazon has advertised a board game, *Lobotomy*, in which players are invited to:

[t]ake the role of escaped mental patients.... Enter the abandoned mental hospital from your worst nightmares. Each player controls a different crazy character with their own story and phobias which can become reality in any moment. There is one goal: to escape. But it is not easy when you think that all the staff are the evil monsters and the warden is the worst of them. (*Lobotomy*, 2017)

Note that the staff and warden are presented as terrifying psy professionals in this game.

For Halloween 2017, a decommissioned U S hospital, Pennhurst State Asylum, provided a 'haunted' tour. The online publicity screamed "BLACKOUT" beneath the injunction to "Fear the Dark!" This entertainment was publicized thus in the online advertisement:

Pennhurst Asylum is a “Hospital” themed walk through attraction featuring many items and artifacts that are salvaged from the original State School. Located on the upper floors of the old Administration building, which dates to 1908, this attraction features fine detail and realism through a combination of high-tech animatronics, digital sound and highly trained actors. (Blackout, 2017)

The website provided a brief video in which one could see actors playing blood-spattered lunatics in cages and terrifying staff. Pennhurst offers a frequently changing programme of similar tours (pennhurst.asylum.com). Another organization, McGee’s Ghost Tours of Prague, invited visitors on a night time “Mental Asylum Graveyard Tour”, where they could learn about “the agonizing lives of the hospital’s inmates [and] [h]ear the stories of criminals, prisoners and suicides” (McGees, 2007-2015). Such negative, frightening attractions add to the popular notion that psy professionals and their treatments are the epitome and embodiment of terror. They also suggest that the mad remain as spine-chillingly entertaining as those 17th and 18th Century visitors to Bedlam, who paid to see the lunatics.

Another significant internet presence is that of fancy dress costumes, with Halloween outfits frequently referencing both psy professionals and their patients. It has been possible to buy a “Men’s Skitzo Costume”, comprising orange jumpsuit, shackles and Hannibal Lecter style mask (Rubies, 2010). Withdrawn in the UK after protest, customers can still order this item from the USA. A set of blood-spattered scrubs, printed with “DOROTHEA DIX PSYCH WARD” is presumably a carer’s costume, also available from the USA (CBS.17, 2015). Since pressure groups have protested about the sale of such items, websites such as Pinterest have many suggestions for make-up and costumes the party-goer can produce herself. The lobotomy patient seems to be a favourite and YouTube contributor, Sweatpants&Pumps, shows how to produce make-up which includes an icepick in a bloodied eye (2015). It is shocking to compare a picture of children, outfitted for a fancy-dress party

in straightjackets and masks and bearing dressed lobotomy wounds (Best costumes, n d), with a picture of actual child patients in straightjackets, chained to a radiator (Kuroski, 2017). The viewer will, of course, assume that the latter children are restrained at the behest of a psy professional.

In the same vein, coupling Halloween with the mental asylum, *Vogue* magazine published pictures of a 2017 party under the headline, “The Public Hotel is Transformed Into a Terrifyingly Cool Asylum for Its First-Ever Halloween Party” (Ward, 2017). In a conflation of patients and psy professionals, revelers were dressed in blood-spattered white doctors’ coats and had dressings around head wounds. Again, while psy professionals may be concerned that the public have difficulty defining the differences between psychiatrists and psychologists, this crass cultural portrayal puts doctors and patients in the same vilified category.

Discussion

I have attempted to show that there is a mass of negative information about psychiatry and allied professions in widely available cultural artifacts of several kinds. All of these suggest that psy professionals, the asylums they control, the treatments they administer and their mad patients are greatly to be feared. The fact that psy professionals are presented as crazy, abusive, murderous and terrifying is not only very damaging to the professions, but also to patients, who often dread a referral to a psy professional. Madness itself is a frightening experience for the patient, and this is compounded by culturally encouraged depictions of psy professionals as feared, abusive ‘other’. There is a great deal of discussion on the internet about the unwillingness of patients to consult psy professionals (Gladwell, 2017; Robert, 2011; Tracy, 2012). To step outside the hospital ward, the clinic and scholarly journal, is to enter a world in which patients and psy professionals are stereotyped as dangerous and frightening. I suggest below some possible reasons for this.

Secrecy, shame and stigma are important elements in this calumny. Historically, asylums were placed in remote locations and those who were admitted were frequently permanently sequestered from the world of the sane. Their large graveyards, many with unmarked graves, bear witness to this. Such cemeteries remain among the very few reminders that many newly built, luxury flats stand in locations where the mad were once imprisoned. There is, for example, little left of Winterton Hospital in Sedgefield, Durham, beyond the graveyard, the buildings having been demolished to make way for pleasant housing. Particularly poignant is an American cemetery with hundreds of graves marked with metal posts inscribed with numbers only (Scout, 2014).

Secrecy and the fear of stigma are also apparent in the use of author pseudonyms. Sylvia Plath first published *The Bell Jar* (1963) as Victoria Lucas and Aron Schmitz published *Zeno's Conscience* (1923) under the name Italo Svevo. It is, of course, reasonable that patient confidentiality is upheld by maintaining patient anonymity if desired. However, publishers assume that patients who submit articles will not want their names made public. This was my experience with the *British Medical Journal* (Hopson and Holmes, 2011). Just as the old asylums hid their private activities behind façades which suggested grand houses, the use of pseudonyms by authors masks the reality of the lived experience of patients. Psy treatments are still hidden behind walls of privacy and the therapeutic relationship is conducted behind closed doors. I assert that such secrecy promotes fear. More open television coverage of illnesses and their treatments allows viewers to identify with sufferers and carers. A minor breakthrough for psychiatric illness occurred when the four-part series, *Bedlam* (2013), was shown on television with its "unprecedented access to patients and staff". However, if the professions insist on maintaining secrecy, it is impossible for the public to distinguish current treatments from historical brutalities.

There is a considerable internet presence of "psychiatric survivors". I consider myself to be one of these, having experienced asylum incarceration, heavy medication and electroconvulsive

therapy in the 1970s. Now, however, as a result of years of demanding but ultimately immensely helpful psychotherapy, I have a recovery story to tell.⁴ Much has changed and we – patients and psy professionals – need to engage in open discussions of what is positive in present-day psy treatments. Current therapies need not be tainted by historical brutalities.

There is a further damaging message carried by the internet: a vocal movement exists among the psy professions which portrays current treatments as brutal and abusive. This group is engaged in promoting online courses which seem to encourage medication withdrawal for all patients, while offering no substantive alternative. The *Mad in America* and *Rxisk* websites are examples of this problem. They suggest that psychotropic medication is intrinsically bad and patients should make every effort to stop taking it. These professionals appear to distance themselves from culturally vilified psychiatry, presenting an image of aiding the patient abused by the system. I believe this way of addressing the issue is damaging. In order to help patients, openness and honesty in discussions of treatments by all psy professionals should acknowledge the limitations and ‘splitting’ inherent in this kind of partisanship in which the self-styled ‘good’ psy professionals claim to be at war with the ‘bad’.

I also recognize my responsibility as a patient to add my voice to those of psy professionals. I believe those of us who are, or have been, in receipt of treatment should not hide behind pseudonyms. We should confront stigma, along with those who treat us and write about us. The care of good psy professionals is vital to patients and our recovery stories need to be publicized. It is imperative that professionals and patients work together to convey the message that a psychiatric disorder may be disabling, but it does not necessarily prevent living reasonably well. The widespread misinformation about psy treatments that is found in popular culture has to be countered. As Peter Byrne wrote in 2000, while the “media perpetuate stigma, giving the public narrowly focused stories based around stereotypes” it is also the case that the media will “be the means of any campaign that

aims to challenge and replace the stereotypes” (p 66). We must all be aware of the overwhelmingly negative images of psy professionals that have a firm hold on our popular culture. Only then will we be able to take positive action to produce change.

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Jacqueline Hopson

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Biography

Jacqueline is a life-long psychiatric patient, having had many voluntary and involuntary hospital admissions (including some nine months in a therapeutic community in the mid-1970s), a variety of drug treatments and electro-convulsive therapy. She was fortunate in receiving 23 years of psychotherapy with Jeremy Holmes and has subsequently been well for many years. Jacqueline is currently a part-time PhD student at the University of Exeter. Her project involves looking at the way the 'psy professions' are depicted in fiction in Great Britain, Ireland and the United States of America. The following publications relate to this project:

"The Demonisation of Psychiatrists in Fiction (and Why Real Psychiatrists Might Want to Do Something About It)." *Psychiatr Bull* (2014) 38.4 175-9.

"When a Novel Changes a Social System: Mary Jane Ward's the Snake Pit (1946) and the US State Psychiatric Hospital:." *British Association of American Studies*, USSO 2016.

1 Though largely abandoned in scholarly discussion, I make a case for the continued use of the word 'madness'. It is direct, generally understood and lacks the bathos of more circumlocutory expressions. Consider King Lear (Shakespeare, 1.5.43-44) crying, "O let me not have mental health issues, sweet heaven, not mental health issues!" As a life-long psychiatric patient, I claim the right to choose the word which defines my condition.

2 I use this term as a collective noun which includes psychotherapists, psychoanalysts, psychiatrists, psychiatric nurses, psychologists and all other professionals working in related fields of treatment.

3 Horror fiction author, H P Lovecraft, first used the name "Arkham" for his sanatorium, which was based on Danvers State Hospital. Comic book artwork for Arkham Asylum bears some resemblance to the photographs of the abandoned Danvers Hospital.

4 I consider myself very fortunate indeed in having been referred to Jeremy Holmes in my early 30s.