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# The Stereotyped Image of Mental Illness and How It Can Be Eliminated

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**The Stereotyped Image of Mental Illness  
And How It Can Be Eliminated**

**Presented by  
Larry Latham**

**To Fulfill  
The Requirements  
For  
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## The Stereotyped Image of Mental Illness And How It Can Be Eliminated

One out of every ten people in the United States will at some time be hospitalized for a mental illness. Billions of dollars each year are spent on books about personal adjustment,<sup>1</sup> Mental illness is not something that the public can be ignorant about.

Our adversaries are not demons, witches, fate, or mental illness. We have no enemy whom we can fight, exorcise, or dispel by "cure". What we do have are problems in living—whether these be<sup>2</sup> biologic, economic, political, or sociopsychological.

This paper is concerned with understanding why the public views mental disorders as it does, and how a more optimistic perception can be attained.

### The Mental Health Movement

Every person throughout his life is confronted with tensions, anxieties, and frustrations. His life is a constant struggle for food, warmth, achievement, affection, sex satisfactions, recognition, and economic and emotional security.<sup>3</sup> The mental health movement is concerned with helping people confront these struggles successfully.

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<sup>1</sup>James C. Coleman, Abnormal Psychology and Modern Life (Glenview, Illinois, 1964), p. 3.

<sup>2</sup>Thomas J. Scheff, Being Mentally Ill (Chicago, 1966), p. 55.

<sup>3</sup>Herbert A. Carroll, Mental Hygiene; The Dynamics of Adjustment (Englewood Cliffs, 1956), p. 19.

Mental health facilities are overcrowded,--a fact that is not hard to believe when one realizes that at least one-half of all hospital beds are occupied by the mentally ill. Understaffing exists in all grades of personnel. Millions of people need medical help for mild mental disturbances.<sup>4</sup>

Modern trends in society demand the services of the mental health factions despite the unpopularity of the program in various areas of the United States. The "speed" of modern living alone accounts for frustrations never before noticed in psychological investigations of the past. Modern living has also hindered families from caring for their own family members who might be experiencing mental problems.

Traditionally the state's financial responsibility,--now industries, communities, and international organizations are interested in supplying funds to support projects aimed to improve human relations. Absenteeism, accidents, alcoholism, inefficiency, and physical illnesses result in a ten billion dollar annual deficit to American Businesses and Industries.<sup>5</sup>

Mental health programs are designed to inform the general public about mental illness in order to reduce ignorance and fear. Their purpose is to educate the public to an awareness that most emotional and mental disturbances

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<sup>4</sup>Ibid., p. 7.

<sup>5</sup>The National Association for Mental Health, Inc., (New York, 1972). (Pamphlet)

are no longer hopeless; the earlier they are detected and treated, the better the chance of recovery.<sup>6</sup>

Misconceptions Concerning Mental Illness

In some instances, such as the report by the New Mexico Mental Health Consultation Program of 1968, the mental health program has met criticism and disdain.

Is the mental health movement a "foreign belief system that threatens to brainwash Americans to accept anti-American values against their will?"<sup>7</sup> Several people of Albuquerque, New Mexico—including farmers, physicians, small businessmen, housewives, clergymen, lawyers, and scientists—believed this way. They saw the community mental health program as a branch of a larger organization whose aim was to destroy America by reaching into every school, church, court, and home.

School testing and counseling services were not seen as helpful additions to school systems, but rather as systems to corrupt young minds by an un-American ideology regarding parent/child relations, attitudes toward authority, treatment of deviates, peer-group relations, attitudes toward sexual behavior, and so on.<sup>8</sup>

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<sup>6</sup>Ibid.

<sup>7</sup>Charles R. Griffith, and Lester M. Libo, Mental Health Consultants; Agents of Community Change. (San Francisco, 1968) p. 155.

<sup>8</sup>Ibid.

The medical doctors of New Mexico denied the importance of the psychological dimension of illness and felt that they could handle their patients' emotional problems without outside help. To them psychiatry was an alien doctrine.<sup>9</sup>

Public opinion of the movement is changing. But, it is not changing at a very rapid pace. Sure, the importance of the movement is becoming recognized at a large extent, but the general public still has a few misconceptions about mental illness itself.

Nearly everyone has a fear of becoming mentally ill, and sees a "disorder" as a disgrace to life. Since mental illness has long been associated with demon possession or being filled by evil spirits many people view it as weird or unnatural. On the contrary, people who visit psychiatrists are from all walks of life. They have experienced nervous symptoms or emotional problems which they cannot handle themselves,--so they seek professional help.<sup>10</sup>

There is no single cause of mental illness that can be isolated and cured. Sexual practices, inheritance, evil spirits, or high intelligence levels do not produce mental illness.<sup>11</sup> Adjustments to others and ourselves will assure us of effectiveness and happiness in life. Learning how to live in today's complex social situations can ward off many of the problems of adjustment.

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<sup>9</sup>Ibid.

<sup>10</sup>Coleman, pp. 12-13.

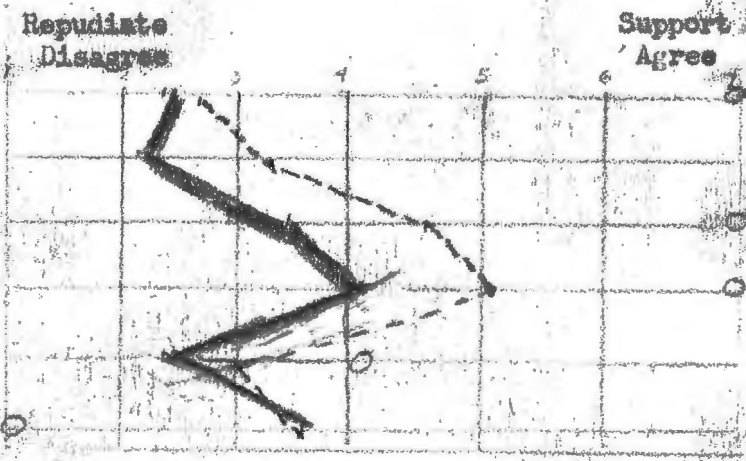
<sup>11</sup>Ibid.

Stereotyped imagery of mental disorders is learned in early childhood. Children learn in their first years of elementary school the term "crazy" and its connotations. They learn to "play crazy"; such role-playing in itself exhibits their knowledge of the social stereotypes they have learned from their parents and peer-groups.<sup>12</sup>

J.C. Numally, Jr., did a recent study that gives a small picture of how mental illness is highly stereotyped in the mass media.<sup>13</sup> He did a systematic and large-scale content analysis of television, radio, newspapers, and magazines which revealed an image of mental disorders that was overwhelmingly stereotyped. The graph on page 5 presents a comparison of the views of the mass media, among mental health experts, and in the general public.

**Mentally Ill persons:**

- Look and Act different
- Lack Will Power
- Avoid Morbid Thoughts
- Need Guidance and Support
- Are Hopeless
- Are Nonserious



<sup>12</sup>Scheff, p. 64.

<sup>13</sup>Ibid, p. 69.

— experts  
 ..... public opinion  
 O mass media

Unlike physical illnesses, a mental illness seems to automatically give a person certain attributes. Thousands of people have heart ailments or diabetes yet they can live and act like normal people. They are also considered normal. A person does not have to be entirely free from physical defects to be classified as normal.

The same should be said of mental illness. Almost everyone has experienced headaches, insomnia, fatigue, diarrhea, constipation, or depression. These are symptoms of anxiety and if allowed to continue could lead to a neurosis. A solution to the anxiety or a compromise quickly alleviates the problem. This is normal behavior.<sup>14</sup>

Society, however, seems to be blind to the issue of mental illness. Too often a person is considered to be either sane or insane, normal or abnormal. Even a person who has received treatment at a mental hospital and then released has the mark of being "abnormal".

A person who has undergone any type of psychiatric treatment has several obstacles to face on his release from a mental institution. First of all he has to face the "stereotype of the insane" that the public has. He may find it hard to get a job. He may even find that it alienates him from certain religious, economic, or political groups. Others see him, not merely as a person who has undergone

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<sup>14</sup>Louis Kaplan and Denis Baron, Mental Hygiene and Life (New York, 1962), p. 33.



treatment for an illness, but as a person who has "lost his mind" and is no longer to be trusted or given responsibility in any position requiring such.

Secondly, a person who leaves the mental hospital scene may carry with him a deep scar that can never be erased. Being declared mentally incompetent abridges several rights of an individual: He can no longer make a will, be married or divorced, adopt a child, be a fit parent, make a gift, be fit for military service, vote, participate in any type of professional capacity, or make a contract, deed, or sale.<sup>15</sup> People may think that a short-stay mental hospital patient and a "mentally incompetent" are one in the same. This may account for a lot of the prejudice that the public has against people who have spent short periods in mental hospitals.

The mental health program has met with some success. Fifty or even twenty-five years ago, any person being released from a mental institution would have been classified as a deviant. Most psychologists and psychiatrists today feel that the mental patient now has much better chances of passing back into his nondeviant status.<sup>16</sup>

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<sup>15</sup>Scheff, p. 188.

<sup>16</sup>Ibid., p. 195.

Making a Better Image of Mental Illness

Mental disorders or behavior oddities should not be treated as illnesses,--neither should mental hygiene educators teach such. Instead, it should be pointed out that these conditions of behavior oddities are only normal reactions to life's stresses. Teaching that such disorders are diseases or illnesses may in fact cause alarm in the students, and thus increase the demand for psychotherapy. Perhaps that is why the more treatment facilities are made available, the larger the number of persons seeking their help.<sup>17</sup>

Anyone involved in the mental health movement should always state their purpose in two suppositions. First, they are concerned with assisting an individual to cope with his problems; and secondly, they want to provide an emotional climate which will facilitate the process of adjustment. A good emotional climate is made up of conditions and experiences that help a person attain stability and security. If all mental health workers could follow these two points, perhaps they could reduce tensions and anxieties that are continually disrupting many people's personalities.<sup>18</sup>

Mental health organizations are mainly involved in disseminating information, and therefore have a very small effect against the engraved stereotypes of mental illness that the general population has. Television has attempted

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<sup>17</sup>Ibid., pp. 195-196.

<sup>18</sup>Kaplan, p. 34.

to "clean up" the various stereotypes it presents of the mentally ill person,--mainly by eliminating a lot of the slang references to mental illness such as "goof ball", "flipped", "nut", and "loony". However, there has been no attempt to change the visual imagery.<sup>19</sup>

Mental Health Associations stress the improvements that have been made in recent years in the treatment, facilities, and staffs available for the mentally ill. They are also in the process of reorganizing and redistributing their mental health services in an attempt to reach new innovative directions, such as new sources of manpower.<sup>20</sup> The workers in such organizations may include consultants, administrators, and community planners. Perhaps they can eventually reduce the fear and distrust that the public has had of mental institutions in times past.

For once in the history of the world, society has created an interest in the individual in that they are concerned about the mental-well-being of the individual and not of the society as a whole. The entire mental health movement is not concerned with helping the whole nation achieve good mental health as such, but, instead it is concerned about helping individuals!<sup>21</sup>

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<sup>19</sup>Scheff, p. 78.

<sup>20</sup>Milton Shore, and Fortune Mannino, Mental Health and the Community: Problems, Programs, and Strategies (New York, 1969), p. xv.

<sup>21</sup>Kenneth Soddy, Cross-Cultural Studies in Mental Health (London, 1961), p. 71.

The future holds many promising rewards for those who are interested in helping further the mental health movement. A realistic view of mental illness is the first step toward developing good mental health. Support mental health organizations today!

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