

## Indie insanity – misrepresentation of psychiatric illness in mainstream Indian cinema

Indian cinema has progressed in the recent past. Many directors have broken the mould of the typical “masala” film and their cinema resonates with real life. However, the representation of psychiatric illnesses and psychiatrists in Indian films still reflects the populist melodrama.

Indian films often follow a template comprising elements of heroism, romance, villainy, song and action sequences randomly strung together without any attempt at showing reality (1). In this background, psychiatric illnesses lend themselves to a colourful portrayal. Psychiatric patients are often depicted as “psycho-killers” in mainstream Indian films. They show traits of psychosis, dissociative personality, dis-social personality disorder and poly-substance abuse. These individuals are devious, fiendishly clever and capable of maintaining an intact alter-ego which the people closest to them cannot penetrate. For instance, the Tamil film *Nadunisi Naygal* caricatures a patient with schizophrenia as a serial killer. Conversely, psychiatric patients are at increased risk of being the victims of homicide, perpetrated by their “sane” counterparts (2). The few murders committed by mentally ill individuals are often characterised by lack of secrecy, planning or a clear motive (3).

On the large screen, psychiatric patients who are not homicidal maniacs are either a source of comic relief or serve as objects of horror and pathos. Their symptoms are often shown as transient mood swings associated with complete amnesia, three-dimensional “audio-visual” hallucinations or childish regression. The Tamil film *Three* showed all the above symptoms as representative of bipolar disorder in the protagonist, who finally ends up killing himself, to save his beloved from his “madness”.

Aetiology of mental illness is another area of gross misrepresentation. While the “nature versus nurture” debate is well known, vernacular films implicate life events as the cause of all psychological symptoms. Raving cinematic insanity is produced by stressors ranging from childhood adversities, being jilted by one’s romantic interest or a blow to the head, as in the Hindi film *Tere Naam*.

While doctors are often reduced to caricatures in Indian films, psychiatrists are further relinquished to the realms of the bizarre (4). Psychiatrists are sometimes rendered as naively comical characters, devoid of common sense. More sober representations of psychiatrists depict them as incompetent jargon-spouters administering intrusive and ineffective treatments. The Hindi film *Kyon Ki*, set largely in a psychiatric hospital, depicts different psychiatrists engaging in unethical behaviour ranging from singing romantic duets with patients, rendering them brain dead by dubious scientific procedures to mercy killing them in secret to relieve them of “unbearable” symptoms. A recent film *Kick* even depicts a “psychotherapy session” providing a prelude to a song and dance number between the patient and the therapist set in a bar.

The cinematic “management” of psychiatric patients involves

seclusion and often includes highly sedative and debilitating drugs. In *Kyon Ki*, a “joint-therapy” session by two psychiatrists focuses on helping patients re-live traumatic life events through a song sequence. Such interventions lead to dramatic resolution of symptoms and cure through reunion with loved ones. In other cases, a bleak prognosis is depicted with life-long institutionalisation or death through suicide. While such turn of events may lead to box office success, they do not reflect reality.

Specifically, electroconvulsive therapy (ECT) has been portrayed cinematically as a form of torture used by the medical community as a means of punishing the patient or as a means to induce insanity among healthy individuals (5). As in *Kyon Ki*, ECT is mostly administered cinematically without consent and is completely unmodified. Patients are depicted as developing mental disturbance with the treatment and are seldom shown to benefit from ECT. Such a depiction of a potentially safe, life-saving intervention, will only serve to decrease its acceptance among patients and their caregivers.

Films tend to influence the masses and such depiction reinforces stigma and misconceptions about a vulnerable population. Sometimes, however, actors do their homework before performing such roles. For example, *Taare Zameen Par* portrayed dyslexia with sensitivity and scientific credibility. Such films get critical acclaim as well as commercial success.

In the UK, the “Time to Change” campaign has addressed the misrepresentations of psychiatric illnesses by the media. This campaign has reported success in reducing discrimination experienced by individuals using mental health services (6). Similar efforts are required in India to discourage gross misinformation and misrepresentation. Film-makers should treat these subjects with the respect and sensitivity they deserve.

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