

# Media, mental health and Kashmir

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**Abstract:** *Mental health is crucial to the overall well-being of individuals, societies and nations as it is closely interwoven with their physical and social health. Being a vital component of life, mental health is largely ignored and neglected; it largely goes unnoticed under the garb of social stigma and discrimination. Mental health should be a concern for one and all as no group is immune to the risks involved; though poor, unemployed, migrants and refugees, victims of violence and abused women and the neglected elderly are at higher risk. Millions of people worldwide experience mental health problems, but few seek access to services due to innumerable reasons like ignorance, illiteracy, lack of exposure etc. Stigma and discrimination add to the barriers of seeking care and treatment. In conflict affected areas, mental health is further undermined by the psychological and social impact of political instability and exposure to traumatic events. Availability, affordability and accessibility are the three crucial components in mental healthcare. With growing population and healthcare cost, India is facing a challenge of affordability and accessibility to provide quality healthcare services for masses. The healthcare system in the country stands at a cross-road. Even though the healthcare system in the country over the past many years has taken leaps in terms of becoming a medical tourism destination, the delivery system in both public and private continues to remain elusive particularly to a section of society with high healthcare needs. As such it becomes imperative for various stakeholders to revisit the healthcare policy and identify gaps in the actions taken particularly with reference to sound mental health and well-being. The role of mass media in this perspective is imperative as it facilitates capacity building, information dissemination, awareness generation and shaping people's knowledge, attitudes and behaviour. Media portrayals and reporting on mental health issues are incredibly powerful in educating and influencing the public. When done well, the media can be a tremendous tool in raising awareness, challenging attitudes and helping to dispel myths, but opinionated and sensationalist journalism can overplay the risk of violence, promote fear and mistrust and widen the gap of understanding. Off late social media too has joined the bandwagon of information dissemination and it is changing the entire scenario of the world. It needs to be seen how effective its role can prove in ensuring sound and healthy mental health.*

**Key Words:** *Mental health, stigma, World Health Organization, Millennium Development Goals (MDGs), Media, Social Media and Human Development Index (HDI)*

## 1. INTRODUCTION:

It has been rightly said that a sound soul dwells within a sound mind and a sound body. Health care is assuming an ever-growing importance in human lives as it involves diagnosis, prevention, cure and rehabilitation of patients affected by one or more health related issues. It caters to the needs of the affected and needy population in terms of physical, physiological and psychological illness by offering them treatment and management services. World Health Organization (WHO) defines health as “a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.” It has also been defined as a state of well-being whereby individuals recognize their abilities, are able to cope with normal stresses of life, work productively and fruitfully and make a contribution to their communities. Mental health is about enhancing competencies of individuals and communities and enabling them to achieve their self-determined goals and objectives. Globally, mental health disorders are among the leading causes of illness and disability. Mental health problems lead to decreased productivity and have an adverse impact on the quality of life of affected individuals and their families. Annually, over 450 million people worldwide experience mental health disorders, but few seek access to services. Barriers to seeking care and treatment are accentuated by social stigma, discrimination, lack of understanding and neglect. In populations affected by conflict, mental health is further undermined by the psychological and social impact of political instability and exposure to traumatic events (Kashmir Mental Health Survey Report 2015). The stigma associated with mental health problems poses a huge challenge worldwide. People with mental health problems face significant barriers in attending school, finding employment and creating other obstacles in different spheres of life. Exclusion of children with mental and psychosocial disabilities from education, leads to further marginalization of this already vulnerable group. Poor educational outcomes lead to poor employment opportunities. Mass Media (print media, radio, television shows and the movies) seen as a tool for information dissemination, capacity building and opinion builders mostly focus on

reporting negative events committed by those with mental health issues, promoting stigma and discrimination towards people with mental illness and focuses little towards awareness generation about mental health and the related issues. Generally it is argued that media mostly focuses on stories related to mental health in an exaggerated form and negative tone and these stories/features mostly tend to be sensational with exaggerated headlines. Media should focus on speaking out for patients who may not be able to speak out for themselves and facilitate in improving public education and awareness. Even mental health advocates reiterate that media may be an important ally in challenging public prejudices, initiating public debate and projecting positive, human interest stories about people who live with mental illness. Many forms of mass media, when used well, can counter inaccurate reporting and destructive stereotypes and provide information, narratives and perspective that can transform lives of many people with mental health problems and their families.

### **1.1. MENTAL HEALTH AND DEVELOPMENT:**

While India has shown significant improvement in economic indicators such as Gross Domestic Product (GDP) the country is yet to improve its position on Human Development Index (HDI). According to United Nations Development Programme's Human Development Report, India has reached medium human development and is ranked 131 among the total of 188 countries. The latest report was released on 21 March 2017 and compiled on the basis of estimates for 2015. The promise of 'right to health' is central to every target envisioned under Millennium Development Goals (MDGs). The Government of India launched multiple programmes and development policies like National Population Policy 2000, National Health Policy 2000, National Aids Prevention and Control Policy 2004 and the tenth Five Year Plan to achieve the targets set under MDGs. Healthcare in India has ever since independence been challenged by several issues of affordability and accessibility to quality healthcare. With around a quarter of the population living Below Poverty Line (BPL) and around 70 per cent dwelling in rural areas, providing healthcare to these section of society should be central to healthcare policies. In this scenario the concept of universal health coverage becomes imperative and core to the mental health needs and development of the people. Though mental health care is a basic need for humans, but it is just lately that mental health problems have been recognized as the serious public health concerns. The mental health issues infact affect the productivity and quality of life of millions of people, world over. Poor people tend to suffer from mental health problems at higher rates as access to mental health care is still a huge problem for many (Mental Health And Substance Abuse Problems Among Women on Welfare, 1998). Almost three quarters of the global burden of neuropsychiatric disorders occurs in low and middle-income countries (Chan, n.d.).

While positive mental health is linked to a range of development outcomes including better health status, higher educational achievement, enhanced productivity and earnings, improved interpersonal relationships, better parenting, closer social connections, improved quality of life and fundamental to coping with adversity, poor mental health, on the other hand, impedes an individual's capacity to realize their potential, work productively and make a significant contribution to their community. Its social and economic impact are diverse and far-reaching leading to homelessness, poor educational and health outcomes and high unemployment rates culminating in high rates of poverty. In the majority of countries, people with mental and psychosocial problems are not able to adequately participate in public affairs such as policy and decision-making processes. WHO's Mental Health and Development report recommended that all health services should include a mental health component and mental health issues should be integrated into broader health policies, programmes and partnerships to avoid vertical systems of mental health services and marginalization of financing and human resources for mental health. It further recommended to integrate mental health into services during and after emergencies for people with pre-existing mental and psychosocial problems as well as those who develop chronic mental health issues as a result of emergency with a medium and long term focus on developing community based services.

### **1.2. MENTAL HEALTH CARE IN KASHMIR:**

Jammu and Kashmir has diverse trauma and mental health dynamics. People experience trauma differently in different regions of the state like within the Kashmir Valley that continues to witness perpetuating violence, along the Line of Control and International Border with Pakistan that continues to experience cross border firing and shelling and within displaced camps of Kashmiri Pandits in Jammu. The high burden of mental illness in Kashmir Valley has been reported by mental health practitioners for the past decade or so. Institute of Mental Health and Neurosciences (IMHANS), Srinagar, has experienced an increase in outpatient presentations from an average of 100 per week in 1980 to 850 per week in 2016 (Kashmir Mental Health Survey Report 2015).

Depression, anxiety and Post Traumatic Stress Disorder (PTSD) are the common symptoms developed by traumatic events experienced or witnessed by the people. Nearly 1.8 million adults (45 per cent of the adult population) in the Kashmir Valley are experiencing symptoms of mental distress, with 41 per cent exhibiting signs of probable depression, 26 per cent probable anxiety and 19 per cent probable PTSD (Kashmir Mental Health Survey Report 2015). The report claimed to provide a summary of the results of the first mental health survey conducted in all the 10 districts of the Valley. The result of the survey that was restricted to adults indicated that on average an adult

living in the Kashmir Valley has witnessed or experienced 7.7 traumatic events during his/her lifetime and exposure to multiple traumatic events was closely linked with all the mental disorders. Poor health, unemployment and financial issues were some of the problems faced by adults living in the Valley and prayer, talking to a family member or friend and keeping busy were the main coping strategies adopted by Kashmiris. Education was shown to have a protective effect with individuals reporting lower education outcomes more likely to have mental distress and individuals with secondary or tertiary education shown to have a significant decreased risk of showing signs of mental distress. Most were unaware of mental health services and 'Peer' and 'doctor' were the providers most commonly mentioned. Respondents reported seeking care from both doctor and peer concurrently following the treatment of both service providers (Kashmir Mental Health Survey Report 2015). The gap between treatment need and provision in Kashmir is multifaceted and complex. Lack of awareness of psychiatric services, travel time, cost and distance to services and poor physical infrastructure were some of the barriers identified to seek treatment (Kashmir Mental Health Survey Report 2015). The report called for community-based service delivery and community awareness programmes and the need for training of healthcare providers to facilitate early detection and management of mental disorders and the implementation of effective psychiatric referral systems. The rate of mental distress is higher among women than men and there is a higher prevalence of mental distress among people with poor education outcomes than those with secondary or tertiary education. Individuals who have been divorced, widowed or separated are more likely to be identified as having mental distress than unmarried. Over 60 per cent of individuals reporting mental distress also report poor physical health (Kashmir Mental Health Survey Report 2015).

Natural disasters (94 per cent) followed by conflict-related trauma (93 per cent), death of a loved one (71 per cent) and a life trauma (76 per cent included life-threatening accidents and illness) were the most common traumatic events experienced. Approximately 1.6 million adults (41 per cent) in the Valley are living with significant symptoms of depression, with 415,000 (10 per cent) meeting all the diagnostic criteria for severe depression. An estimated one million adults (26 per cent) in the Valley are living with significant symptoms of an anxiety related disorder. Nearly 01 in 05 adults (19 per cent) or 771,000 individuals in the Valley are living with significant PTSD symptoms, with 248,000 (06 per cent) meeting the diagnostic criteria for PTSD (Kashmir Mental Health Survey Report 2015). Violence, whether past or current, is another important part of the picture of mental health problems. Abused women are more likely to suffer from depression, anxiety and low self-esteem than those who have never experienced abuse (Mental Health And Substance Abuse Problems Among Women on Welfare, December 1998). Poverty carried an added risk for depression and women are more likely to be poor than men. Poor mental health including depression, anxiety, panic disorders and PTSD continues to rob society of the productive work and lives of countless individuals.

### **1.3. MASS MEDIA AND THE MENTAL HEALTH:**

The bulk of knowledge about mental illness comes from mass media, which is one of the primary source of information for the public. Research suggests that most media portrayals of mental illness are stereotypical and negative. Consequently, people gain an unfavorable or inaccurate view of those with psychological disorders simply by skimming a few sentences or picking up a remote control. Some of the common, inaccurate and misleading media stereotypes of people with mental illness suggest that people with mental illnesses are criminal or violent. But studies show that not only are individuals with mental illness less likely to commit violent crimes, they are actually more likely to be victimized. Many news outlets depict such people as devoid of social identity, aggressive, irrational and dangerous, while experts say that not only do patients often recover from psychiatric illnesses, but they can live healthy lives with the help of medications, therapy and support networks (Fawcett, 2015). Though most of the health information is gathered from media news and entertainment, some programmes perpetuate myths and misinformation, but when used well, many forms of mass media including newspapers, radio, television and internet can counter the inaccurate and destructive stereotypes and provide information, reassurance and perspective that can transform the lives of mentally ill people and their families. Studies consistently show that both entertainment and news media provide overwhelmingly dramatic and distorted images of mental illness that emphasise dangerousness, criminality and unpredictability. They also model negative reactions to the mentally ill, including fear and rejection, which impairs their self-esteem and overall recovery. As such it is high time to shift attention from further cataloguing of media representations of mental illness to the more challenging prospect of how to use the media to improve the life chances and recovery possibilities for the people living with mental issues (Stuart H, 2006). Researches further suggest that media tends to use harsh words such as 'psycho' and 'maniac' as the headline when referring to people with mental health problems and the same have a tendency to influence the public perception. There is a strong relationship between negative portray of mental health and public attitude towards people with those conditions (Essays, UK. March, 2015).

As such media should stick to facts and stop producing negative information in relation to mental health and the related concerns. Besides, other things to be kept in mind while working with such people include language of the content, emphasizing on style and structure, focusing on case studies and providing accurate and relevant information. While media should focus on choosing the right language to describe people with mental health problems, it should also understand that using inaccurate terms can reinforce stereotypes and stigma. Adding 'human element' in the story



makes it more appealing and interesting. As such voices of people who have experienced mental health problems should be included and their narratives used in their words, wherever possible, to represent their experiences and give a voice to their concerns. Above all mass media should provide accurate information about mental health problems and it should facilitate in breaking down myths about mental illness and encourage people in distress to seek assistance.

#### **1.4. SOCIAL MEDIA AND MENTAL HEALTH:**

Of late social media has made inroads in our society and is changing the world altogether. It is changing how people with health issues connect with each other, how health practitioners link up and how people who use health and care services and practitioners interact. During old days people operated in their (limited) fields of influence and built relationships with people they were in direct contact with but now they can learn from, share with and build linkages with others having same interests or issues within their own localities or across the world. With the development of technologies, social media allowed people to upload content themselves such as blogs, pictures, sounds and video clips, share the content widely through Facebook, Twitter, LinkedIn and so on and enabling others to leave comments, add to the material and share them more widely. Many researchers have shown that the impact of social media does not just influence the younger generation only, but all age groups who have taken to its use. It has risks as well as advantages. The study found that the digital landscape has put increased pressure on teenagers today and the social media was harming the mental health of teenagers as the teenagers who engaged with social media during night were damaging their sleep and increasing their risk of anxiety and depression. As the teenagers need more sleep than adults, so night-time social media use could be detrimental to their health. Research has shown that teenagers need 9.5 hours of sleep each night but on average only get 7.5 hours. Lack of sleep can make teenagers tired, irritable, depressed and more likely to catch colds, flu and gastroenteritis (Udorie, 2015). Undoubtedly, social media forms a vital part in our day-to-day life – helps to stay informed and connected, but it has innumerable adverse effects as well. Spending too much time on social media can adversely affect social life such as spending less time with family, friends and relatives and it can also lead to eating disorders and cause body dissatisfaction (Stonecipher, n.d.). Considering it an issue that touches so many lives, it is no wonder that mental illness is often featured in entertainment media and the interpretations of how people live with mental illnesses occasionally make waves for reasons good and bad, observed *Mental Health in Media and Entertainment* (August 2017), adding that mental illness is common as one in five adults have a mental health condition within a given year. Because of the relative dearth of mental health media depictions, some applaud TV shows or movies for showing mental illnesses at all. Others fear that media portrayals may have unintended consequences and add to stigma (*Mental Health in Media and Entertainment*, August 2017).

Mental illnesses involve changes in thinking, emotion and behaviour and are associated with distress and problems functioning in social, work or family activities. There is nothing inherently wrong with depicting mental health in entertainment media. In fact, realistic examples of the ways people live with mental illnesses can be a powerful way to fight stigma. Harnessing the power of storytelling would enable to adequately represent people with mental issues and that could be a powerful way to combat stigma. Consequently, storytelling could be explored and media that accurately depicts mental health conditions can be compelling, lucrative and respectful. However, mental health misrepresentation in media can fuel stigma, leading to discrimination against people with mental illnesses and barriers to treatment. Numerous international studies have examined the portrayal of mental illness in newspapers and the majority of these have found their overall presentation to be negative and reflective of stigmatising attitudes. Most commonly, this negative framing has been found to manifest itself in mental illness being conflated with violence, crime, unpredictability and dangerousness (including harm to self or others), and/or representation of people with mental illness as passive victims deserving of pity (Pirkis & Francis, 2012). The study further observed that unlike traditional news and information outlets, where media professionals are predominantly responsible for generating material, the internet is the domain of the general population as it is more volatile and interactive medium that has implications for the amount of information produced as well as for the nature and quality of that information. There is a tendency for different types of news and information media to present mental illnesses in a way that promotes stigma and/or perpetuates myths about mental illness by presenting information in an exaggerated manner. But at the same time there is some evidence that reporting practices have improved over time.

Essentially, the media is always with us, constantly giving us information. The media thus plays a vital role in shaping people's attitudes about the world they live in, as well as the people they interact with on a daily basis. On television, it appears that those with a mental illness cannot become productive members of society. Mentally ill characters are portrayed as alienated with no family ties, no occupation, and no social identity (Smith, 2015). The study further observed that the manipulation of the camera angle on television can exemplify the feeling that mentally ill individuals are alone. It added that mentally ill characters are filmed alone with close-up shots, reinforcing the idea that they are supposed to be isolated. This sense of isolation creates the stigma that mentally ill individuals are solely defined by their illness. Talking about the stigma and the media, the paper stated that stigma exists when elements of labelling, stereotyping, separation, status loss, and discrimination occur together in a power situation that allows them. A study conducted by Lawson & Fouts (2004) examined how mental illness stigma was reflected in Disney films.

They chose Disney films such as Dumbo and Alice in Wonderland, because Disney is the major world producer of animated films viewed by children and the movies are known to be 'timeless,' impacting several different generations of children. Both examined 34 films and found that 85 per cent of Disney films in their sample referenced mental illness and discovered that verbal references to mental illness in the films were greater than the references that children may experience in real life. The most significant finding was that there were no mentions of positive attributes with mental illness. Both movies and television shows showcase the idea that mentally ill individuals are violent and they should be avoided.

According to a study conducted by the American Press Institute (2014), 61 per cent of people surveyed used print media as source of their news, which ranks print media behind television (87 per cent), but ahead of sources such as cell phones (56 per cent). In terms of mental illness stigma, it appeared that news media was widely used to make an impact on people's attitudes. Wahl, Wood, and Richards (2002) examined mental illness references in print media in 1999 and examined 300 articles from major newspapers such as *The New York Times*, *The Washington Post* and *The Boston Globe*. They observed 'dangerousness' as one of the most common themes in the articles with 26 per cent involving crime or violence being committed by someone with a mental illness. They also found extremely negative headlines in reference to mental illness and according to them headlining an article in negative manner portrays the idea that mental illness was the only reason the individual committed the crime, thus, linking mental illness with violence.

## 2. CONCLUSION:

Though mental health care is a basic need for humans but people with mental health problems have largely been ignored and stigmatized. The prevalence of mental health conditions, their economic impact on individuals, their affected families and communities and the associated discrimination and the societal exclusion further stigmatized the issue. As such there is a need to integrate mental health care into overall health care plans and other social services development programmes that would help to deliver better and more coordinated care and address the exclusion and stigma they are generally faced with. Establishing strong linkages between various social services programmes, media, planners and policy makers and those associated with mental health issues would go a long way in addressing the related issues. Stigma related to mental health is extremely prominent in the media and it is visible in various forms of media programmes. This stigma mostly showcases an extremely negative picture of both those with a mental illness as well as those who help treat mental illness. The media often portrays the idea that those with a mental illness are unpredictable and socially discriminated. Societal barriers that stigmatized people with mental and psychosocial issues be strongly discouraged and various poverty alleviation programmes and employment generation schemes and initiatives reach out to people with mental health issues so that they live a decent life. Civil society initiatives for people with mental and psychosocial issues promoted and supported so as to facilitate their participation in decision-making, policy, planning, legislation and other development programmes. Public and policymakers, academics, health professionals and media be educated about importance of mental health and how to work more effectively and rigorously on such issues. Conducting research on media effects and effectiveness of media programmes and campaigns on reducing stigma and unnecessary sufferings should also be taken on war-footing basis.

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