The Impact of Bipolar Media Representation

by FLISS BAKER

Mental Health in the Media

Trigger warning: Reference to suicide, eating disorders and self-harm.

“Fliss Baker Has Bipolar Diagnosis, Currently Experiencing Depression”

OR

“Bipolar Sufferer on Another Downer”

I know which headline I’d like to be associated with. Isn’t the impact of language and use of words amazing? I feel honest, empowered and ‘normalized’ in the first statement, whereas the second immediately removes my identity, turns me into a victim and weakens me as a person.

The question is, which one sells? We are drawn to sensationalism and the media feeds what we crave. But negative media reporting in mental health has a detrimental impact on lives and this is something we need to change.

Changing attitudes towards mental health is an uphill struggle. Not only are we raising awareness and educating but we are attempting to change the use of common, stigmatizing language. The words ‘mad’ and ‘looney’ have long been associated with traditional mental institutions, which scream strait jackets and sedation. ‘Psycho’ and ‘schizo,' shortened words for the acceptable diagnoses ‘psychosis’ and ‘schizophrenia,' symbolize danger and instil fear. We are referred to as ‘sufferers’ and ‘the mentally ill’ but throughout our challenging lives we can in fact manage well and we do recover.

We are currently on a mission to equalize mental health on a par with any other medical problem. My bipolar diagnosis is incurable and unpredictable and I regularly see health professionals, however, does this define me? Does this stop me from being the charismatic, kind and quirky girl I was pre-diagnosis and still am now? The world would be appalled to read slurs about diabetes or cancer in the media, so why should mental health conditions be any different?

Yet mental health is often related to crime and violence, particularly in newspapers. In October 2013 UK newspaper *The Sun* printed the headline ‘1,200 Killed by Mental Health Patients,' which caused uproar. Statistics show mental health patients are ten times more likely to be *victims* of crime, not perpetrators, and the lack of consideration of other factors make for inaccurate reporting.

As much as I disagree with some reporting of mental health in the media I’m not sure yelling and blaming is the best resolution. I was once ignorant to the hidden world of mental health, using stigmatizing language and passing judgement. I even ridiculed a colleague once who was off work with depression because I had been lumped with her workload.

I wasn't a bad person. I lacked empathy because quite simply, I didn't understand. It is not just the media who need to listen and learn, but it is you and I also. I once wrote to a magazine desperate to raise awareness, but my writing was graphic and a potential trigger to others. Thankfully the journalist was sensitive and didn't expose my vulnerability. We all feed each other and there must be a mutual acceptance of what is fair treatment and responsible.

Next page: the role of the internet and insensitive reporting of suicide.

The Role of the Internet

As I write this article the TV is on in the background, an internet browser window is open, my phone is next to me and a newspaper is in sight. We cannot escape the media and we shouldn't. It is important to know what is going on in the world, however, every single word, report and advert fills our brains with messages and constructs our perception of the world.

The internet is a key facilitator in this. It is an amazing invention, but also a dangerous one, where there is less content control than in TV and newspapers. This allows opinions to often override facts. Facebook, Twitter, chat rooms and blogs give a platform for speech, which can have both positive and negative effects.

When I was diagnosed with an eating disorder back in 2008 I can't describe the panic and fear I had around food and related discussion. I thankfully received professional treatment and attended support groups, but I purposely avoided chatrooms. While some may find them supportive we must remember, people cannot diagnose nor give professional advice and there are many pro-sites.

I recently did some research online and within minutes I found Twitter accounts, blogs and chat rooms designed to share tips and encourage negative behaviours. My personal 'trigger' warning was immediately flagged. Feeling part of an understood community, particularly when dealing with a secretive illness, is wonderful but we must take care of our personal safety and we should primarily always talk to our doctor or a trusted person.

Insensitive Reporting of Suicide

Studies show that extensive reporting on celebrity suicides has been followed by an increase in suicide attempts. The Mental Health Commission of Canada (MIHCC) has identified suicide rates as a significant concern, so it is imperative that the media are vigilant in their reporting.

One of the biggest cases was the reporting on the suicide of Ivy Li, a famous singer in Taiwan. Media coverage included details of the methods used and as a result suicide rates rose for the next four weeks.

Our much loved Robin Williams' suicide also gave cause for concern. U.S. Police gave unnecessary detail and British journalists even breached what is known as the 'Editors Code', which states that "when reporting suicide, care should be taken to avoid excessive detail about the method used." I followed the reports closely and felt affected even though I was not experiencing suicidal thoughts at the time.

I was also disappointed by a Vanity Fair article written back in 2008. They covered the tragedy of a famous artistic couple who took their own lives within a week of each other. The content was interesting and well written; however, the insensitive headline "The Golden Suicides" was unnecessary and glorifying. They made the mistake of associating suicide with creativity and brilliance, and suicide should not be reported in a positive light.

Next page: the guidelines that often go ignored.

Harassing People in Crisis

It is sad that so many of us wait in anticipation of a crisis. Think back to Britney Spears' troubles in 2008. Yes, she was famous and yes, it was unexpected, but ultimately we watched a young, wide-eyed girl in distress being taken away in an ambulance.

Most recently Amanda Bynes has been reported with mental health problems and has been followed around by news and camera teams, desperate to witness a ‘meltdown’.

My times of crisis have been frightening and traumatizing and I can’t imagine the additional stress of being hounded by the press. If a person is known to have mental health issues, the risk of self-harm or suicide is real. No one needs to be an expert to see that the girl needs help and support. Where do we draw the line?

The Guidelines That Often Go Ignored

There are media advisory services and charities that produce comprehensive guidelines for journalist reporting, and they state that tone, content and imagery must always be carefully considered. Some of these guidelines include the following:

- Reduce news items linked to violence
- Provide quality, accurate information sensitively
- Increase sensitive and authentic fictional portrayals
- Consult people with mental health problems
- Don’t speculate

In reference to suicide, the National Institute of Mental Health recommends we use terminology such as ‘complete suicide’ or ‘taking one’s life’ instead of commit suicide, which associates it with crime. We must also be aware phrases such as ‘successful suicide attempt’, puts a positive spin on something that is both tragic and preventative.

What I find concerning is that many of these guidelines are breached every day and others not enforced nearly enough. Is it time for a media shake-up with more qualitative guidelines that are clearly distributed and accessible to all? Do we need quantitative targets in relation to increasing the consultation of those with mental health issues?

Ultimately I believe we need more enforcement with penalties, forcing the media to follow best practice at all times. It is too much of a public health risk not to.

The media has the power to improve public understanding and attitudes towards mental illness, but that power can only be used in a positive way if the industry gets on board and realizes the importance and severity of their reporting.

Taking a Stand

We must also continue to stand up and speak out to reduce stigma, particularly in relation to social media where control is more difficult. We don’t have to accept poor portrayals of mental health. We all have mental health and it is imperative we all keep ourselves well to reduce the risk of illness. For those that do have mental health diagnoses it is imperative we are treated with respect.

We must all be responsible and mindful of what is communicated because we really do have an impact on others and when dealing with invisible illnesses in mental health, the responsibility is only greater. We cannot blanket the free will of speech but we can flood the market with positive, constructive and informative messages – and I believe good will ultimately conquer the bad.