CHAPTER – IV

REPRESENTATION OF THE MENTALLY ILL IN POPULAR CULTURE: SHAPING ATTITUDES, STRENGTHENING STEREOTYPES

1.1 Introduction

Representation ‘re-presents’ what is already there. Representation, as Stuart Hall says, is “an essential part of the process by which meaning is produced and exchanged between members of a culture. It thus involves the use of language, of signs and images which stand for or represent things” (1997, 15). It is the consciously or unconsciously constructed reality which is deeply imbibed within human psyche in a specific cultural context. Hall defines, “Representation … [as] a process of secondary importance, which enters into the field only after things have been fully formed and their meaning constituted. But since the ‘cultural turn’ in the human and social sciences, meaning is thought to be produced-constructed-rather than simply 'found'. Consequently, in what has come to be called a ‘social constructionist approach’, representation is conceived as entering into the very constitution of things; and thus culture is conceptualized as a primary or ‘constitutive’ process, as important as the economic or material ‘base’ in shaping social subjects and historical events, not merely a reflection of the world after the event” (1997, 5-6).

In the West the concept of ‘realism’ created cultural codes and conventions of representation that produced such texts and images that persuaded us to believe in it as universal. But “More recent criticism has claimed that the real as such is unattainable. We only experience it through the mediation of texts, images, and stories. These never mirror reality transparently and neutrally but actually represent it according to the codes and conventions of specific societies" (Cavallaro 2001, 40). The strong faith in alternative healing practices in India is strengthened by popular media. Popular media plays a major role in constructing the different images and structures of mentally ill women in the society. It also helps in creating diverse beliefs regarding psychiatrists and other traditional healers. This chapter will explore the role of media in constructing the image of mentally ill women and related treatments in the societies of Assam. It will also
explore the popular media’s role in constructing perceptions of societies on shaping attitude towards mentally ill women in Assam.

1.2 Popular culture and Mental illness:

Popular culture in the form of print media (such as newspapers, books, magazines and visual media like films) is important in representing the cultural images and texts that shape public attitude in a given area. From the late nineteenth century, popular cultural media, especially visual media, produced and represented different stereotypical meanings of 'otherness' and 'differences' such as hero/villain, white/black, masculine/feminine, British/alien, upper class/lower class; binary opposition of power between two extremes (Hall 1997, 235). Thus, even the apparently “innocent” representation of the hero as belonging to a particular community or group is actually embedded in deep-seated social prejudices.

In spite of increasing human rights interventions in the area of mental health, its representation in popular culture, novels, fictions, newspapers, televisions, radio, films continues on stereotypical lines. In their writings medieval writers used some ‘irrational and superstitious explanations as cure for madness (Harper 2009, 2). The writers of the middle ages expressed the concept of divine punishment as the cause of mental illness. Religious texts such as the Old Testament and the Bible associated mental illness with sin (Harper 2009, 2). Ironically such Medieval beliefs about mental illness persist till date. The stereotypes of mental illness as ‘frightening’, ‘shameful’, ‘imaginary’, ‘feigned’ and ‘incurable’ and patients treated in psychiatric care signified as ‘dangerous’, ‘unpredictable’ ‘untrustworthy’ ‘unstable’ ‘lazy’ ‘weak’ ‘worthless’ and ‘helpless’ are portrayed in popular medieval texts and popular media even in the contemporary period (Harper 2009, 32).

Feminist critics have discussed the representation of mental illness in popular texts. Elaine Showalter in The Female Malady describes the construction of female insanity from a historical perspective which is expressed through, legal, medical and literary texts, paintings, photographs and films. She says that the images of insane women in these texts not only replicate medical and scientific
knowledge but also express the basic framework of a particular culture where femininity and insanity is constructed (Showalter 1985, 5).

Showalter says that female mental illness received a lot of focus in the documentation of the historians and psychologists from the seventeenth century onwards. She opined that actual statistics of mentally ill women was also metaphorically represented. “These dual images of female insanity – madness as one of the wrongs of woman; madness as the essential feminine nature unveiling itself before scientific male rationality – suggest the two ways that the relationship between women and madness has been perceived. In the most obvious sense, madness is a female malady because it is experienced by more women than men” (Showalter 1985, 3). She argued that the larger number of mentally ill women in psychiatric documentation may be interpreted as the result of patriarchal social structure, female roles, their ‘mistreatment by a male-dominated and possibly misogynistic psychiatric profession’ (Showalter 1985, 3).

Showalter, in her essay ‘On Hysterical Narrative’, described the gendered notion of hysteria and the construction of the stereotypical image of ‘hysterical narrative’ and ‘hysteria’ in the society as conducted by women novelists. Women novelists usually use ‘historical narrative’ as confused, disintegrated, vague narrative related with troubled femininity (Showalter 1993, 24). Historical narrative has been used for pessimistic meaning related to studies of ‘hysteria’.

“New women writers in the 1890s, such as George Egerton, Olive Schreiner, Victoria Cross, Charlotte Perkins Gilman, or Rachilde, often used the term ‘hysteria’ to describe the consciousness of heroines expressing their repressed desires in stories they called ‘fantasies’, ‘fragments’ or ‘dreams’ ” (Showalter 1993, 25). Showalter argued in her essay that writers influenced by Freud defined hysteria as ‘deliver of disarranged’ and ‘disconnected narratives’ by women about their life due to repressed sexuality. Showalter describes that Freud had never heard of ‘Dora’ properly and writing the text had just tried to admit his version of her thus making Dora his ‘object’ rather than ‘subject’. “His interpretations of her problem reflect his own obsessions with masturbation, adultery, and homosexuality. Thus the ‘hysterical narrative’ reflects Freud’s hysteria rather that Dora’s. She never becomes a subject, only the object of Freud’s
narrative” (Showalter 1993, 27). The psychoanalytical theory of Freud’s hysterical narratives produced ‘hysterization of women bodies’ and led to the creation of many texts on women hysterias. “Many feminists’ theorists have accepted the idea that women’s writing is a form of hysterical narrative” (Showalter 1993, 28).

Feminists like Julia Kristeva, critiqued the works of Freud in her essay ‘Female Sexuality’ where pre oedipal libido of a girl child has been considered as the cause of attachment with mother which later leads to hysteria. She argued that women’s novels are ‘hysterical’ discourse of chronicle in the classic fictions (Showalter, 1993).

The feminist Mary Jacobus criticized women’s writing influenced by Freud’s hysterical elements as quixotic, impractical and weird. Jacobus argued that these women’s writings were metaphorical with unconscious aspects. She said that in the interest of ‘masculinist psychoanalytical theory’, hysterical femininity had to be suppressed by feminist writers (Jacobus 1986, 201). Showalter stated, “The true feminist reading is ‘hysterical reading’, one which acknowledge both the presence of uncanny and which associates it with the hysterical and feminine. Reading hysteria is a way of reading woman, and reading ‘hysterically’ is a form of women’s reading” (1993, 30). Showalter describes in her essay that the novels or stories of some Gothic writers, such as The Yellow Wallpaper of Charlotte Perkins Gilman, represented hysteria not as silence or depression; but “the story is about the unspeakable representations of female sexuality, madness and animality” (1993, 30).

During the whole of the twentieth century doctors in the clinics analysed and treated case studies mainly through the cases of ‘Dora’ and ‘Anna O’ and literary texts stylized their writings with these case studies. Male doctors predominated and females always played the role of patients in these literary texts. The story of a Victorian novel on female hysteria ended with ‘marriage’, ‘death’ or ‘madness’, but in terms of male narrative in a case study ended with more another activity (Showalter 1993, 32). Thus in the Victorian literature or media, feminist writers used the hysterical image of a woman in a metaphorical way. Showalter writes “Feminist critics should especially be aware that labelling women’s texts, especially feminist texts, as ‘hysterical’ have been long a device of ridicule and trivialization” (1993, 33). 95
The Madwomen in the Attic: The women writer and the Nineteenth-Century Literary Imagination, is a text of feminist criticism written by Sandra M. Gilbert and Susan Gubar where it is mentioned that nineteenth century women writers are repressed under patriarchal culture and their writings are confined under male supremacy.

... [W]omen have not only been excluded from authorship but in addition they have been subject to (and subject of) male authority (1984, 11)

Gilbert and Gubar said that along with writing, women internalized the illusory world where the patriarchal images of women shaped the popular imagination. “By the end of the eighteenth century ... [w]omen were not only writing, they were conceiving fictional worlds in which patriarchal images and conventions were severely, radically revised. And as self-conceiving women are from Anne Finch and Anne Elliot to Emily Bronte and Emily Dickinson rose from the glass coffin of the male –authored text, as they exploded out of the Queens looking glass, the old silent dance of death became a dance of triumph, a dance into speech, a dance into authority.” (Gilbert and Gubar 1984, 44)

Gilbert and Gubar describes that nineteenth century women writers accepted patriarchal discourses and strategies and represented images of women as either evil (‘Ghost, fiend witch’) or good (‘angel fairy and sprite’) (Gilbert and Gubar 1984, 44) in a plot of fallen women with the stereotypical representation of repressed, submissive women. Defining metaphorical images of the monster woman, Gilbert and Gubar say that they are active, irrefutable and infectious, usually related with disease; women as active or intellectual are connected with terrible outcomes in patriarchal discourses. On the other hand, metaphorical literary representations abound of the ‘angel woman’ as passive, usually suffering from illness and living ‘in fear and trembling’ (55). Gilbert and Gubar said that women ‘strive for a voice to speak her dread’. Thus women writers alternately define themselves as “angel women and monster women” (Gilbert and Gubar 1984, 44).

Gilbert and Gubar say women writer’s posses the ‘anxiety of authorship’ as they are unable to become the ancestor of creator. The anxiety is manufactured from ‘complex’ and women’s regular cognisant of their improper image of sex.
Thus ‘anxiety of influence’ that a male poet experiences is felt by a female poet as an even more primary ‘anxiety of authorship’ – a radical fear that she cannot create, that because she never become a ‘precursor’ the act of writing will isolate or destroy her (Gilbert and Gubar 1984, 48-49).

Contemporary women writers have to grasp the misery of the patriarchal texts which offered the female dependency and also have to wheeze the misery of ‘foremothers’ who have explicitly or covertly transmitted the ‘traditional authorship of anxiety’ (Gilbert and Gubar 1984, 51). The ‘female anxiety of authorship’ is profoundly hampering and transmitted not from one woman to another but also from the harsh literary ‘fathers’ of patriarchy to all their ‘interiorized’ female descendants. The contemporary women do now challenge ‘the pen with energy and authority’, they are able to do so only because their eighteenth and nineteenth-century foremothers struggled in segregation that felt like illness, separation that felt madness, darkness that ‘felt like paralysis’ to overcome the anxiety of authorship that was endemic to their literary subculture’ (Gilbert and Gubar 1984, 51). Writing on hysteria, Gilbert and Gubar says that Freud famously began his experimentation on hysteria in relationship between ‘psyche’ and ‘soma’. It is by no means designated as a ‘female disease’; hysteria is defined as ‘female disease’ not only because it derives from the Greek word *hyster* for womb or in the nineteenth century womb was considered to be the ‘cause’ of these emotional disturbances, but because, throughout the nineteenth century this hysteria, like any other mental illnesses, was thought to be the cause of female reproductive system. They have argued that concept of mental illness was based on Aristotle's notion ‘that femaleness was in and of itself a deformity’ (Gilbert and Gubar 1984, 53). Thus Gilbert and Gubar describes the condition and position of women in nineteenth century literary imagination; the story of women kept in subject of the silence; in the garret; in a special corner where no one can reach; complete isolation; objectifying as ‘other’ with special character of monster or angel.
1.3 The ‘Ideal’ Body

Body has become a subject of attention from the latter part of twentieth century with its changing notion in changing socio-economic scenario of the world. The discourse of body differs from medicine, art to fashion. So, body does not only posses its biological image rather it is shaped by a society and is culturally festooned.

…[T]he body has been redefined by the claim that the physical form is not only natural reality, but also a cultural concept: a means of encoding a society’s values through its shape, size and ornamental attributes. Images of the body pervade the structures of signification through which a culture constructs meaning and position for its subjects (Cavallaro 2001, 98)

Different cultures with their different norms have always tried to define body; to set a certain image of body and to perceive a definite identity. “Framing the body is a vital means to establishing structures of power, knowledge, meaning and desire’ (Cavallaro 2001, 98). So image of body is not stable; it differs from society to society, culture to culture. Though the image of body is unstable it plays a crucial role in understanding the world and supposition of social identities (Cavallaro 2001).

Body is at the heart of gender politics. The association of masculinity with strength, active, neutrality and femininity with weakness, passivity is related with representation of body. “The body is central to modern conceptions of gender. Components of gender dichotomy as conceptualized in contemporary Western society- including strength and weakness, activity and passivity, sexuality and neutrality- are linked inseparably to the physical. The very ‘nature’ of maleness and femaleness is intrinsically embodied” (Gimlin 2002, 3). Body itself is the marker of identity. “The link between the body and identity is more explicit among women because for them, more than for men, the body is primary indicator for self to the outside world (Gimlin 2002, 4).

With the concept of 'psychiatrization of perverse pleasure' Foucalt defines that throughout the nineteenth century knowledge of 'corrective technology' by 'pathologization' or 'normalisation' of sexual instincts finally identifies 'the
hysterical women', 'the masturbating child', 'the perverse adult'. Foucault thus believes that the regulation of sexuality is a 'hysterical construct' through 'power' and 'knowledge' (1978, 105).

Embodiment is a process through which ‘something is incorporated’ or a process by which a body becomes an objective of social, cultural and political structure. Physical dimension of body is culturally encoded into different forms as thin body/fat body, feminine body /masculine body, strong body/weak body etc. Body is politicalised and constructed in accordance with gender, social status as class, caste, race etc. Feminist researchers have focused primarily on gendered body due to body ‘visibility’ in certain cultures and issues of normalising power of ‘ideals’ of shape, size and youthfulness of female body. In West during 1970 to 1960s the ideal of female body was light tones and slightly muscled. In late 1970s to early 1980s visual media, fashion magazines, pornography, advertisement represented women’s body putting emphasis on sexuality and reproductive capacities.

Body thus becomes obvious in different discourses of health, fitness and beauty in a powerful way. Gradually the concept of gym and special diet to be slim and beautiful changed to cosmetics and different dietary products. The concept of health meant to look ‘beautiful’ or look ‘attractive’. In the last fifteen years the fitness industry became a part of popular culture with daily activities in fitness club, personal training, and daily exercise classes.

Publications have proliferated and a cursory glance along the magazine racks in newsagent supermarkets reveals an increasing range of magazines devoted exclusively to exercise and fitness with photographs of ‘ideal’ male and female bodies on their cover (Arthurs and Grimshaw 1999, 4)

Laura Mulvey in ‘Visual Pleasure and Narrative Cinema’ describes about the ‘male gaze’ as a politics of gendered viewing of mainstream Hollywood cinema and its theorisation and construction of women’s body as passive object of spectacle. In this essay psychoanalytic theory has been applied to describe how in a society patriarchal attitude shapes the structure of films. She described that female characters in Hollywood narrative cinema was controlled by male gaze in two ways – the female becomes objectified by the gaze of the central male
character and also the male viewers with their own gaze frame the female as their passive object. The first impression of male fantasy for women is as a seductress, demon, vampiric beast and evil with power that should be repressed; on the other hand, fetishism implies male desired embodiment of the female as a desexualised icon that can be worshipped. Thus female body is incarnated according to the desire of male gaze as spectator or protagonist (Mulvey, 2009). “Men look at women; women watch themselves being looked at” (Berger 1972, 46). The women’s body is not only created by the visualization of men but also it is inspired by a special vision of her being looked at by men. Women appearance in society is shaped by man’s visual interest. One might simplify this by saying, 

Men act and women appear. Man look at women […..]. Thus she turns herself into an object and most particularly an object of vision: a sight (Berger 1972, 47)

The male gazes “shapes” the women’s body and makes her conscious of her identity and she continuously learns and adopts feminine roles which can be appreciated by the system of patriarchy. Thus women became conscious about the beautiful body that looks attractive and thin in size, fair in complexion; perfect for media image following vigorous dieting leading to eating disorder. “…Teenage girl’s perception of their bodies in the context of cause (impossibly thin and perfect media image of women) and effects (i.e. low self esteem, rampant dieting, eating disorders)” (Casanova 2004, 287).

In Western countries many teenage girls suffer from Anorexia Nervosa, one of the challenging diseases which occur due to acute consciousness and obsession with the image of the ideal body as projected by media. The rise of capitalism and increasing desirability of material goods gradually made an impact, particularly in Western societies. Culture was mostly concerned with consumer goods, superficiality and women became the commodity to promote these products. Women’s outward appearance, a slim and thin body is considered as feminine. This is the image reflected in films, television, advertisements. Slimness, as such, has become the yardstick of success, intelligence and self confidence. These ideas are adopted in many women’s psyche that they could lead a good life (personal or professional) if they possess thinness (Lawrence, 1984; Orbach, 1989). Susie
Orbach argues in 'Fat is a feminist issue' that eating disorder is disease caused by the influence of extreme illusory media image (Orbach 1989).

Gilbert and Gubar define anorexia as ‘loss of appetite, self starvation’ and agoraphobia as ‘fear for open or public spaces’ which affects adolescent girls as well as ‘middle aged housewives’ as a ‘disease of maladjustment to the physical and social environment’. ‘Patriarchal socialisation’ is considered to be the prime cause of these diseases. Women’s patriarchal condition of confinement in houses, ‘living in privacy’, uncommunicativeness, ‘domesticity’ resulted in ‘pathological fears of public spaces and unconfined spaces’ (Gilbert and Gubar 1984, 53-54).

1.4 Hollywood: Stereotyping Mental illness

Newspapers are an important and influential form of popular media that was generally used in United Kingdom in the twentieth century to publish news on mental health. Anderson said that these newspapers made a significant link between mental illness, criminality and violence (Anderson 2003). The issues of mental illness were misrepresented and very often the news of murder or serious offence associated mental illness with brutality. Anderson argued that these types of reorientation might have occurred due to the lack of proper knowledge on mental illness among journalist or simply because ‘sensation sells’. Anderson said that the headlines of the newspapers are inspired by the titles of the popular films such as ‘The Snake pit’ (1948), ‘Psycho’ (1960), ‘Taxi Driver’ (1976) (Anderson 2003, 298).

Film and television have become powerful popular media, constructing people’s perception on mental illness. Hollywood movies like ‘Psycho’ (1960), ‘Halloween’ (1978), ‘The Exorcist’ (1973) generate negative representations of mental illness in order to create fear or terror in the audience’s mind. In ‘Snake Pit’ (1948) and ‘Bell Jar’ (1979) the representation of schizophrenia is terrifying. Anderson argues that in even in present times “religious ideologies powerfully shape construction of mental distress, both explicitly – demonic possession remains a common ‘schizophrenic’ fantasy, - for example – and implicitly, as manifested in the pervasive stigmatization of madness as shameful” (Anderson 2003, 298).
Thus, in movies the character of the mentally ill is depicted as cruel and demonic.

Swaminath and Bhide describe that films need drama and conflict to hold audience’s attention and mental illness is the most favoured theme because of its association with ‘extreme’ human behaviour including relapses, poor treatment, and chronic nature of illness. Such a theme is also very often connected to different plots of comedy, suspicion, violence, ending with the discovery of a ‘dark secret (Equus)’ or the treatment of ‘falling in love’ (Swaminath and Bhide 2009, 244). The report of Screening Madness recognizes popular films “as reservoir of prejudice, ignorance and fear that perpetuates damaging stereotypes of people with mental health problems. It reveals the evidence that links powerful negative images with public prejudice” (Swaminath and Bhide 2009, 245).

Harper argued that the cultural representation of mental illness strengthens social discrimination such as those of class, caste, race and gender in contemporary Western society. The female victims of mental illness and other marginalized classes are often overlooked in comparison to white middle class males. The understanding of mental illness in Western culture is ‘context dependent’; the treatment of mental illness is done either by glorification or by maltreatment. Hence, mental illness has many conflicting responses from ‘stigmatization and horror to admiration and awe’ (Harper 2009, 9).

Wahl describes that stereotypes of mental illness in media continues mainly for two reasons. Firstly, mental illness can be used for ‘crowd pleasure’ mainly in genres such as horror films that are replete with blood and violence. Another reason for stereotypical representation of mental illness described by Wahl is wrong information of psychiatric diagnoses by film workers (Wahl 1995, 101-131).

1.5 Representation of Mental illness in Indian Films and Television

In India as elsewhere popular media is considered to be the most important tool in spreading knowledge amongst people. The culture of television started with the state-owned national channel Doordarshan and continued with different news, entertainment and infotainment channels such as Star News, Zee News, M TV,
Zee TV, Star plus, Colours along with various regional channels after the coming of satellite channels. By 1990’s satellite televisions occupied a special place in mass media and triumphed over other modes of communications such as print, audio and even the official electronic media.

In developing countries like India the visual media is considered to be most powerful means of communication because it transmits knowledge, values, attitudes, worldviews that can affect a person’s perception and behaviour towards the real world (Chandra 2000).

Visual and print media in India has created the image of a ‘changing modern’ India in people’s mind. Consumerism entered Indian society through the advertisements in televisions which bluntly encouraged people, especially urban women.

Thapan says that contemporary Indian women with the influence of media are confined in ‘a twofold commodification of femininity’ through ‘controlled and passive sexuality’ of Indian women engraved in bodies of ‘good’ women as self-sacrificing, self effacing. Advertisements not only tempt women to identify themselves as commodities but also appeal to them to consume it (Thapan 2009, 24). India is probably one of the few countries in which endorsements of fairness products is extremely common. The advertisements of fairness products like ‘Fair and Lovely’, ‘Fair ever’, ‘Ponds white Beauty Cream” comes around seven to eight times one after another during commercial breaks in Indian televisions with axioms such as to look smart or to get a job, to get married or to attract the attention of someone, it is important to be fair. Tele shopping is a trend nowadays and has become a popular form of media marketing to attract the consumers to sell different products. Some of these such as slimming products, height-enhancing products, fairness products which comes in satellite channels with repeated telecasts are framed by the narratives of persons; how they were unconfident
about their appearance such as short stature, fatness, darkness which obstructed success in every sphere of their life like marriage, job or social meetings and so on. Sometimes celebrities from films and TV soaps are brought in to promote such products. The repeated versions easily influence the viewers. Such selling strategy make men and women internalise these demonstrations and accept shortness, darkness, fatness as the cause of disabilities; as such, they either try to consume these products or suffer mental trauma as a result of possessing a ‘disabled’ body.

Through lending their bodies for endorsement of various products in visual and print media women do contribute to the commodification of their fragmented bodies as lips, hair, eyebrows, legs and so on. (Thapan 2009, 24)

Mental health of women; women’s knowledge, reason, wisdom are usually represented by media as encoded in the physical body. The mind is neglected and given less value than an attractive body. In case of a man looks are virtually insignificant in comparison to a woman. It is not necessary for a wise man to look good. But an ugly woman with an ‘unstructured’ body may be viewed as an abnormality.

Advertisements and TV shows create the stereotypical images of women: ‘beautiful woman’/‘woman with reason’ and ‘ugly woman’ /‘woman with loss of reason’. Through these media portrayals of women, women internalises that a beautiful and attractive body can help in leading a 'normal' life; a woman who does not fit into this category of ‘good looks’ is liable to be discarded as what Gilbert and Gubar refer to as the 'other' women or the 'monster' women (Gilbert and Gubar 1984). This affects the mental health of women and creates a complex; societal pressure can force a woman to adopt different measures to look beautiful by following a strict diet and even fasting; this can sometimes lead to eating disorders.

Television in India has been an influencing agency of mass communication over the last two decades. The TV soaps usually adopt some theme to project values, ethics and norms of the society. These are portrayed through short or long narratives, periodic in organization, transaction with real life circumstances and
typescript. Women nowadays play a visibly central role in the soap operas; it is another matter if they are shown to be able to act independently. Daily soap operas like ‘Pabitra Rista’ in Zee TV, ‘Uttaran’ in Colors, ‘Yaha Mein Ghar Ghar Kheli’ in Zee TV, ‘Yeh Rista Kiya Kehlata Hai’ in Star Plus portray stereotypical and traditional role of the ‘ideal’ woman in society; the ‘ideal’ woman is expected to be of a submissive nature, good housewife, devoted to her husband, religious, self sacrificing and dominated by her in-laws and so on. The female protagonist often remains silent during their problems; they often rely on the male counterparts for their assistance.

Hindi commercial films are undoubtedly the most popular media of mass communication in India. The Bombay film industry is the largest in the world and supported by fifteen million viewers daily. So the impact of film among the Indian viewers is very high. In India the social roles portrayed in the films are strictly dichotomous as well as stereotypical. The male posses the dominant role as women are portrayed in passive, silent and docile object as society demands. Indian films along with the soap operas, in most cases characterise woman as mere fulfilment for romantic situations or representation of sexuality. These metaphorical representations of women often confine them within the shell of invisibility and inaudibility that usually has a negative impact on women viewer’s personality and mental health.

The invisibility and inaudibility of women in society is thus further perpetuated, enhanced and even exaggerated by the media. This however has bearing on women’s self perceptions and self confidence. The cumulative effect of such silencing and erasure cannot but have a negative impact on women’s sense of self–worth, their self esteem and by extension, their mental well being (Joseph 2001, 383)

It is shown in films that women have to pass through a very troublesome path in life; she has to undergo sexual harassment, domestic violence, and becomes a passive and helpless object of other's conspiracy leading to mental illness or suicide. Joseph has claimed that “Women in the audience already experiencing unhappiness and despair could be plunged into further depression by watching or reading about the unadulterated suffering and the seemingly inevitable and
invariably violent death of large numbers of women in the media” (Joseph 2001, 383).

In television, some programmes that are based on real life story are dramatically presented in television channels in an offensive and sadistic manner while framing the scenes of rape, murder, throwing acid on girls, domestic violence and other crimes in the name of maintaining originality and adding freshness to the story. Some such programmes that are aired in Indian Televisions are ‘Sansani’, ‘Savdhan India’, ‘Crime Patrol’ ‘Shaitan: A criminal mind’ etc. These programmes usually represent crimes against women or crime by women in a very offensive way. These shows dramatically represent the original stories in a way that has a negative impact on people's psychology. These days leading news channels in satellite TV gives news related to crimes like rape, sexual abuse, molestation. As such, people are surrounded by the fear and trauma generated by these visual images which aggravate mental disturbance.

On the one side, media represents woman as bold with objectification of body; on the other hand, they are represented as confused, mentally disturbed eventually leading to self destruction. Elaine Showalter in *The Female Malady* said that in the Victorian era such types of gender confusions impacted the mental wellbeing of women (Showalter 1985). It can be argued that such conflicting images of womanhood have a powerful impact on the mental health of women even today.

In some films women are more ‘visible’ than ‘audible’. The so-called popular ‘women oriented films’ like Lazza (2001), Bandit Queen (1994), Damini (1993), Matrubhumi (2003) portray women as victims of rape, dowry death, molestation. Ammu Joseph says that women in Bollywood films are usually portrayed as invisible or inaudible; but if they have to make women visible they take the help of scenes of rape, dowry death etc (Joseph 2001).

Nevertheless, the preponderance of images of the woman as victim can have negative impact on women’s mental wellbeing, especially in the relative absence of more empowering images (Joseph 2001, 383)

The constant representation of sexual violence in films make women feel helpless and hopeless to protect themselves from such types of violence which eventually
lead to increase in stress and anxiety among women and deeply impact the teenage female group.

In Assam many news channels have gained popularity within a span of few years. These channels are adopting the strategy of profit making by airing news stories according to their own agenda. Sometimes the channels misrepresent, fabricate and strengthen stereotypes, incorporating superficial texts on the original story. The satellite news channels mainly focus on attracting the audience, giving less value to news itself. News related to mental illness is usually stereotypical.

On 24th October 2012, News Live a leading news channel of Assam, aired a story of mentally ill man from Tezpur, Assam. The footage had the man in dirty clothes, long bearded and moustached, tied with ropes thereby portraying his dangerousness and inability to conduct him properly as he was reported of being caged by his family members for the past seven years. Such news usually strengthens the stereotypical notions of mentally ill as someone bizarre.

Another leading news channel of Assam, DY 365 aired a programme ‘Mat Bhinnamat’ (Monday, 11th June 2012), where a group consisting of four mentally ill women (said to be ‘normal’ now), one psychiatrists and one person related with Help Aid Non-governmental Organization expressed their views on mental illness. The TV juxtaposed the old pictures of one of the woman sitting in the studio. The picture visualized the women as disturbed and in dirty clothes, untidy hair and unmindful of the outside world. This mentally ‘ill’ woman (now ‘cured’) was silent all through the conversation. Neither they neither expressed anything their own nor were they asked or allowed to answer any questions. Only the Help Aid persons described how they rescued the women, cleaned them, and trained them to lead a ‘disciplined’ and ‘civilized’ life. The psychiatrist talked about his ‘medical’ methods of treatment. Some texts kept flickering across the TV screen: “Some unlucky women; one was repeatedly raped; lost her mental ability; one was living in a cage; one set her own house on fire; one went out at night; but their lives have been changed by the Help Aid group.” These types of representation of the women showing dangerous, bizarre and strange and texts on these women usually helps to create stereotypical notion and stigma on mentally ill. The women in the studio of the TV channel rather might have had to face more discrimination.
and negligence after the programme as they have been objectified on the screen as ‘other’ though an effort has been made to prove that they are ‘normal’ now. The irony is in the fact that none of the ‘experts’ in the studio felt that the ‘mad’ women could narrate their own story even after being ‘cured’ and as such their voices are dominated by the patriarchal voices of psychiatry or the NGOs.

Indian films play a major role in forming general opinion about things. The representation of mental illness in the media fosters negative images of the mentally ill as dangerous. Many misconceptions and treatments of these illnesses with various therapeutic measures as well diseases are wrongly presented in films and televisions (Walker 2008, 46). Walker argued that the mythical or stereotypical representation of mental illness has misled the society. The most common representation in Hollywood films is the treatment of mentally ill patients done by ‘love’ and the image that ‘love can conquer all’. Walker says that it is a myth to treat severe mentally ill patients with ‘love’ or reduce their pain sufferance by, care, love and sympathy (Walker 2008). Many Bollywood movies use the Hollywood concept of treating mental illness with love therapy.

‘Khamosi’ (1969) is one of the block buster Bollywood movies of the past. In the movie the male protagonist becomes mentally ill (the doctor in the film ‘diagnoses’ it as ‘acute mania’). The character of Radha (a nurse) portrayed in the film stereotypically as a motherly, loving, caring and submissive woman who is dominated by the male doctors in the patriarchal medical set up. Radha is asked to offer love therapy to her male patients in order to cure them. Earlier, she had offered treatment to her first male patient and eventually fell in love with him. But the patient after his recovery married another girl and forgot Radha. Radha remained silent. Radha was again asked to offer treatment to another patient suffering from ‘acute mania’. Radha refused to treat the patient because she could not come out of the pain of losing her love through the experience she had with her earlier patient. But she was forced to treat the second male patient by senior psychiatrists. Psychiatrists and other staffs of the hospital ill treated Radha due to her refusal to treat the particular patient. At last Radha was convinced to treat the patient and offered ‘love therapy’ to him. Radha offered love and care like a ‘mother’ and ‘lover’ to the patient. Finally, Radha became mad and was confined
to the mental hospital. The picture represented the helpless condition of Radha as a woman and also as a female psychiatric caregiver; she ultimately failed in her career due to her ‘mental weakness’ as mental illness grasped her. With Radha’s character the stereotypical role of mother, wife and its importance in Indian society has been portrayed. With this character, the massage to the audience has been delivered that it is the prime duty of mother, daughter and wife to deliver care to mentally ill patients where man has no role. Societal stigma towards mental hospitals and towards its stuff has been strongly portrayed in the film. The most damaging aspect of the movie is in terms of its portrayal of mental illness as a contagious disease that can quite easily spread from one person to the other.

In ‘Khilona’ (1970), it is once again portrayed that mental illness could be cured through love and marriage. In this movie the hero commits suicide when the heroine goes mad shows the hero and heroine as the helpless victims of a strict caste-biased society. ‘Kyon ki’ the Bollywood film of 2005, depicted the mentally ill hero being given treatment by a female doctor but ultimately she has a nervous breakdown. ‘Balighar’ (13th May 2012) was telecasted in Assam’s television channel Rong at 7.30 p.m. The plot of the story had a female psychiatrist who took charge of a mentally ill male patient to treat. With the help of another male psychiatrist (her teacher) she offered treatment to the patient with love care and tender feelings. The patient was later cured from his mental illness with her treatment. The female psychiatrist fell in love with the patient. However, she was not allowed to get married to him by her parents. One day the girl’s father rebuked the young man (the patient) for advancing his feeling towards his daughter. The patient committed suicide. The female psychiatrist became mentally ill because of the shock.

In all these above said stories it is observed that female caregivers of the mentally ill male eventually became the victims of love and acquired mental illness suffered by the male. Elaine Showalter says that some of the films in the West have shown females as therapeutic authority of male hysterical patients where treatment including erotic love with the female doctors or nurses, received all the symptoms of male patient; it is portrayed to reprove male dominance in representing gender relations (Showlater 1993). Indian cinema also represents
women as usually emotionally weak and easily dominated by the men folk. Thus, Hindi as well as regional language films portray male domination in patriarchal society by showing the story of female therapeutics acquiring the disease of her lover/patient. The male supremacy over female has been witnessed till twenty first century both in national and regional visual media where women are always subjected to silence or passiveness and governed by male counterparts both as therapeutics or patients. Walker, however, says that ‘love’ is not only the universal remedy to cure mental illness (Walker 2008).

Walker reveals that the mentally ill are represented in media as ‘unpredictable’ and ‘aggressive’; psychiatrists are always depicted as incompetent and ‘manipulative’ (Walker 2008). Horror films always take help of mentally ill to establish the terror and fear in viewers’ minds. Walker said “…..horror films … have used mental illness as a convenient vehicle to explain the most gruesome atrocities. In fact the more able film directors know how to use concepts of mental illness to pander to the anxieties of their viewers…” (Walker 2008,46). Bollywood movies profoundly use such thrilling excitement through horror themes representing mental illness, leaving the audience with a mixed bag of messages. ‘Darr’ (1993) and ‘Baazigar’ (1993) are such psycho thrillers where the protagonists are represented as villains, suffering from psychoses; with threatening tactics, creating fear and becoming killer in order to fulfil their desire. ‘Aks’ (2001) is another film of the supernatural/thriller where a psychosis was represented in a supernatural way. ‘Dushman’ (1998) was again based on psychoses. The villain of the movie suffered from psychosis that encourages the tendency of committing crimes. The shots from the movie were very graphic and violent and can create fear and hatred for a person with psychoses.

‘Agnishakhsi’ (1996) is a psycho thriller wherein Viswanath, a person with personality disorder or psychoses has a criminal mind and a strong intuition of punishing his wife. Dastak (1996) is another movie which is about a mentally disturbed person. Sharad’s possessiveness for the heroine leads to several murders. All the above mentioned movies represented the stereotypical image of mentally ill having a vengeful mind, with killer’s instinct. These movies directly
or indirectly declare that mentally ill people do not fit with the norms of being a protagonist and the person is branded as being an antagonist.

Walker says that the happy ending of a movie necessitates the introduction of some false or unrealistic concepts of mental illness (Walker 2008, 47). These unrealistic and stereotypical images of mental illness does serious harm to the actual understanding and impression of the illness in audience’s mind and the public acquire some mythical impression of mental illness. These mythical impressions of the illness greatly influence and remain in the mind of people forever leading to stigma towards mental illness. Films cannot create an actual picture of mental illness as the impressions of schizophrenia and depression for a layman is the same; what people think to be schizophrenia may actually be equated with depression; very often people keep mentally ill in the same category as ‘mad’ with violent behaviour.

15 Park Avenue (2005) is a film by Aparna Sen, a Bollywood film made in English. The film is based on a central theme about a girl named Meethi with schizophrenia. Meethi is a schizophrenic girl who lives in hallucination or delusion of being married with Jaydeep and mother of five children living in 15 Park Avenue of Kolkata. Meethi is looked after by her elder sister who is a professor of physics and unmarried due to Meethi and mother. Meethi is usually very quiet. She is the daughter from the second husband of her mother and her mother has two children before Meethi from her first husband. Till her late twenties Meethi did not show much ‘abnormality’ and worked as a journalist and was in love with a boy called Jaydeep. Meethi underwent some state of delusion during her childhood. But she leads a normal life till her twenties. One day Meethi goes to a village to collect some interviews; there she meets with an accident. She is raped in the hotel she was staying in by some persons who are politically powerful and she is thrown out of the room. Her fiancée breaks up his relationship with Meethi. Meethi becomes aggressive from then on and becomes schizophrenic with suicidal tendencies. Once she is admitted in to a mental hospital; however, in the hospital her condition deteriorates rapidly and so after one year she is brought back by her sister. Meethi’s mother tried to treat her with the aid of a traditional healer. Meethi’s sister is very practical and takes the help of
a psychiatrist. The psychiatrist advises shock therapy and also suggests that she be taken on a vacation. Meethi was brought to Bhutan for vacation and met the boy with whom she was in love. Meethi could not recognise Jaydeep. Jaydeep promised Meethi to search her imaginary home – 15 Park Avenue, and her family. Meethi was brought to search her dream house in Kolkata by Jaydeep; there she found her imaginary house, children and husband; after this, Meethi disappeared from the scene. The film represented mental illness in very confusing and blurred way and at the end of the story the audience fails to receive a real picture as they are in a state of bewilderment. As Swaminath and Bhide describe, cinema in general and Indian cinema in particular has a fantastic disconnectedness from reality (Swaminath and Bhide 2009, 244).

The movie is an open ended film giving audience an option to interpret the ending as well as giving a pleasure of ‘dark secret’ or suspicion on mental illness and its nature. The psychiatrist’s long narratives on description of the causes of schizophrenia or the symptoms of the disease and the treatment of shock therapy, advice of rehabilitation by going for outing confused audience, the nature of illness, treatment procedure of schizophrenia specially the rehabilitation procedures are the symptoms of the disease portrayed here which fail to express the real understanding on the nature of the disease. It is also very stereotypical that the mentally ill forget everything after the shock therapy that has been portrayed in the movie, where Meethi after some years is unable to recognise her fiancée with whom she lives in her delusion every moment. The role of the psychiatrist in the movie is again portrayed as very helpless, confusing, and most unprofessional. His role is focused more in making love rather than delivering treatment. The stereotypical image of pathetic condition of female members in the family of a mentally ill patient with the burden of extreme pressure for care of mentally ill has been portrayed in the film. As Meethi’s sister never married and she could not spend a regular life and sometimes her frustration for this reason is also depicted in the movie. Again this movie strengthens the image of women as primary care taker who holds all the responsibility of mentally ill women in Indian families. This image strongly influences public minds and reflects the attitude of the society. This movie helps to reinforce the stereotypes of mental illness among the public as incurable; the person becomes dysfunctional and valueless in the society.
Assamese movies on mental illness are very few. ‘Ahir Bhairab’ (2008) was based on the life and travails of a woman and her daughter, both of whom are schizophrenic. Though this was a regional film in Assamese language, it was set against a Western backdrop. A woman with schizophrenia is married off to a Non Resident Indian, without informing her husband and in-laws of her condition. Noticing her abnormal symptoms, she was well treated by her in-law's family but no steps are taken for her treatment. Later her daughter suffered from the same illness. Both mother and daughter were never cured and were rehabilitated. Here it is portrayed that Assamese families often hide their daughter’s mental illness. Both mother and daughter were kept in rehabilitation centre and treated there with other patients. Thus the film portrayed the stereotypical notion of schizophrenia as a disease that cannot be cured and it is genetically inherited; the mentally ill do not have the right to marry or right to lead a ‘normal’ life.

In horror films or soap operas, the malevolent ghost or psychotic characters are often referred to as ‘daayan’ (witch), ‘buri atma’ (evil soul), ‘kala jaduwali’ (female black magician). Some Bollywood movies such as ‘Raaz’ (2000) portray woman as evil soul, ‘Raaz 3’ (2012) depicts psychotic women with black magic, ‘1920 The Evil Returns’ (2008) and ‘Click’ (2010) are about evil spirits, Ragini MMS (2011) is about a vengeful ghost, ‘Hisss 2010’ depicts a snake women, ‘Darling’ (2007) on revengeful ghosts. Recently there is a horror serial, ‘Ek Thi Naayka’ (Ek Thi Daayan) aired on the channel Life Ok every weekend at 11pm from March 2013. The serial consists of 16 episodes where eight leading celebrities of television and some leading celebrities of the Bollywood film industry played roles. The serial tells the stories of daayan (witch) with their malevolent activities and later relief by shamans or priests. The promotion of the serial highlighted the bias and prejudice: Dayan ka asli rup khubsurat or Darawana hota he, Pariyo jaise Chahre par ghani badalo jaise bal, pao ulte aur hath sarir se bhi lambe, prachin bidwano ka kahna tha daayan ki sari sakti uski choti me hi bandhi rahti he...Daayan is coming to haunt you (The real picture of the witch is both beautiful and horrific; they have angel-like features and their hair is of the colour of dark clouds; their legs are twisted and their hands are long then their figure; the ancient scholars used to say that the whole strength of the Daayan lies in their braids … Daayan is coming to haunt you”. This serial reflects the
belief that women’s ‘abnormality’ or her wicked and malicious ways could be hidden in their beautiful and abnormal body image; she may be beautiful as well as beastly. Here it is represented that women’s beauty and sexuality is naturally decisive. These types of stereotypical representation of female as witch and as ‘abnormal’, strengthen the negative image of women as having access to dark secrets that are kept away from men.

‘Armaan’ (2003) is a popular Hindi movie where Sonia is a very rich, arrogant schizophrenic woman who can go to any extent to secure her object of desire. The stereotypical image of women as the ‘monster’ and ‘angel’ as described by Gilbert and Gubar (1984) has been portrayed in the movie. Aggressiveness and arrogance overlapping with qualities of a madwoman, Sonia is a female ‘monster’ in opposition to the submissive, tolerable, and docile Neha Mathur who is portrayed as an ‘angel’ in the same film.

Another such film is ‘Pyar Tune Kya Kia’, 2001 which depicted Geeta as a simple housewife ‘angel women’ with all feminine qualities. On the other hand, Riya is represented as a ‘devil women’ with aggressiveness, suspiciousness, sexually erotic in nature, and quite ‘abnormal’; these qualities turned her to mental illness and thus Riya is shifted to a mental hospital at the end.

In ‘Aaina’ (1993), the character of Roma is that of a very strong, aggressive, assertive, jealous women and a psychotic with criminal mentality. Similarly, in ‘Gupt’ (1997), Isha is a psychologically disturbed woman, a silent killer with the characteristics of jealousy, assertiveness, demanding and ‘modern’. Both the movies portray that the modern women who gives priority to her career (in ‘Ainaa’) and who adopts a stance of independence and assertiveness are liable to mental breakdown.

In these movies and serials women are represented as arrogant, sexually expressive, erotic destroyer, vulgar in appearance, criminal minded as well as mentally disturbed. These types of appearances results in generating a negative image of women as being horrible women in the minds of the audiences. Actually these types of movies create confusion about whether the mentally ill are really clever or insane. Negative attitude of women in general as ‘evil women’ have been built through these visuals. As Showalter says the abnormality and
malevolence in the society have been portrayed through female as if for all these wickedness, women are responsible; thus present day ‘abnormality’ or madness has become a ‘female malady’ in our society (Showalter 1985).

The social, political and economic condition of the state has made an impact on the representation of mental illness in Indian films from the 1950s till date (Bhugra, 2009). According to him, the changes in political scenario and the reduction in the trauma of violence and displacement caused by the partition of India led to the creation of films like ‘Funtoosh’ (1956) and ‘Half-Ticket’ (1962) which use the plot of mental illness in a comic manner. ‘Khamoshi’ in 1969 reflected the colonial influence in treatment where Freud’s treatment of psychoanalyses was followed and the nurse in the film is shown to be trained abroad, reflecting the influence of Western modes of treatment during that period. ‘Ittefaq’ (1969) portrayed how mental illness is constructed in the society and there is always a confusion between a criminal or murderer and a mentally ill. After the 1980s female protagonists were portrayed who had streaks of modernity and traditionalism. From the 1990s, according to Burga, under Rajiv Gandhi’s political reign globalization came into force with consumerism and materialism. Indian movies portrayed the hero as villain with symptoms of psychoses. Gradually the movies tried to adopt multiculturalism and all the national and international modes of treatment were shown being used in the treatment sequence of the films (Bhugra 2009).

Romance and mental illness is always interlinked in movies, either in therapeutic measures or as cause of illness. In some movies traditional way of treatment is shown. In ‘Tere Naam’ (2003) the hero is treated in an Ayurvedic ashram with treatments of massage, blessings and traditional way of living. In contrast to the healthy treatment in the ashram, the treatment of psychiatrists in the film is shown to be terrible; psychiatrists are shown to keep the schizophrenic patients brutally chained.

‘Bhool Bhulaya’ (2007) is a psychological thriller mixed with comic relief. In the movie the psychiatrist, Dr. Aditya, is shown to be very comic in nature. He comes to his friend’s (Sidharth) house to investigate some unnatural events that had been taking place during those days. All the family members of Sidharth are afraid of
the ghost that haunts the place. Sidharth was newly married to Avni: an educated modern girl married to a traditional Brahmin family. The priest comes and informs that there is a ghost in Sidharth’s family. Avni is possessed by the ghost of Manjulika and acts like Manjulika. It is discovered by Aditya that Manjulika (Avni) had the repressed desire to marry her lover (Sarad, Sidharth’s cousin) killing her enemy (Sidharth). Sidharth believes this to be the effect of childhood repressed memory of fairy tales on Avani; on the other hand, the priest confirms it as the possession of the ghost of Manjulika in Avni. However at last, a huge religious ceremony is arranged with the help of the priest and the psychiatrist. Avni’s personality is turned into Manjulika with ceremonial flogging and her desire of killing Avni’s husband whom she identified as Manjulika’s enemy, who had killed her lover is fulfilled by the performance of a drama. Avni returns to a normal state, feeling guilty of her deed and desire. In the whole film Radha is depicted as the source of suspense. Radha, who falls in love with Sidharth, is suspected to be the main culprit in the movie and she is confined to a room.

The film showed the religious health practices along with the Western mode of psychiatric care in the same plot. The movie mixed the concept of possession of ghost or evil spirit on one hand and the Western concept of dissociative identity disorder on the other hand. The psychoanalytic concept of repressed memory is also used in the plot of the movie. The role of psychiatrist in the movie is very metaphorical. It is confusing whether the psychiatrist is a medical practitioner or a detective in the movie. These mixed massages of the nature of diseases and modes of treatment confuse the audience. In the movie both the women Avni and Radha represent the state of abnormality. Women are represented here as mysterious and with hidden illicit desire of love for ‘other’ man in the movie. The movie has depicted the extreme cruelty that a woman is capable of to fulfill her hidden desire. The character of Radha is a stereotypical portrayal of the jealous woman. As usual, this movie portrays women as victim or delinquent and man as supreme authority to solve all problems.

‘Help’ (2007) is another horror movie that uses the concept of mental illness as the visitation/possesion of an evil spirit. Thus contemporary movies primarily turned the representation of mental illness to the supernatural, very often interlinking religion with psychiatric care.
We have watched films where an unexpected hit on the head magically recovers a character’s memory, restoring balance to his personality. We have also seen emotional potboilers where the mentally ill are projected as a happy comedian or joker and how a little bit of freedom from the chains of the mental health system magically cures them from evil confines that were causing their illness. The general portrayal of mental illness tends to be deceptive.

Recently television soap operas have also started imitating the Bollywood film genre. One such popular serial is ‘Dil se dua... Sobhaigyavati Bhava’ (Wishes from the heart ... be fortunate) which is a psychological thriller, is aired in Channel Life Ok where Viraj Dobriyal is a person psychologically disturbed, criminally witty minded, torturous and over possessive towards his wife. There are many such popular soap operas in Indian Television that usually represent some mythical misconception and stereotypical image of mentally ill that influences the viewers easily by their way of presentation.

‘Kahin Kisi Roz’ (Someday, Somewhere) is a T.V serial aired in Star Plus from 2001 to 2004 with the superstitious, magical image of mentally illness where the character of Ramola showed a psychotic patient with criminal mentality. The stereotypical impression of mental illness is seen in other T.V serials sometimes with a leading role and sometimes in some additional roles.

‘Hitler Didi’ aired in Zee T.V from November 2011 depicts a role of mentally ill character. She becomes a myth with her mental illness; her identity remains vague, with a blurred distinction of whether the character wants to reflect helpless mentally ill women or cunning mysterious women.

‘Uttaran’ aired in Colors portrayed a role of the nurse turned mentally ill due to a sin committed by her. ‘Yahan Me Ghar Ghar Kheli’ is another T.V serial aired in Zee TV from 2009 to 2012; it portrayed two leading characters turned mentally ill in different time periods. These serials usually represent mental illness either to attract the audience by screening funniness, unnatural activities or trying to create an emotional bond between the audience and the character to attract sympathy so as to increase Television Rating Points (Television Rating Point is a tool provided to judge which programmes are viewed the most. This gives an index of the choice of the people and also the popularity of a particular channel in Television)
of channels rather than showing the actual and original images of mental illness. Thus, they actually come in the way of a proper understanding of mental illness.

Fictional representations of mental illness in Assamese are very rare. *Andolita Akash* (Shuddering Sky) is a novel written by Monalisha Saikia in 2008. The novel centred on a girl ‘Mamoni’ who is very suppressed and passive and has to take care of her schizophrenic mother alone. Her father shirks away from the responsibility of taking care of her mother; he is a drunker and her brother goes away with his wife due to the disturbance of his ‘mad’ mother. Mamoni’s mother is violent and aggressive; she sometimes goes out of home and makes noises. Mamoni never mingles with the neighbours as neighbours complain of her mother. She also does not make friends in her school even though she teaches in a school. As she was in love with a boy and he left her due to her dedicated responsibility towards her schizophrenic mother, Mamoni suffered from loneliness. Later, because of the constant pressure of attending to her ‘adamant’, ‘aggressive’ and ‘volatile’ mother, Mamoni becomes schizophrenic. The novel shows a sudden transformation of Mamoni to an aggressive, violent woman when she becomes schizophrenic.

The novel reflects the stereotypical image of schizophrenia as unpredictable, aggressive, violent, and incurable. The quiet, passive, submissive Mamoni becomes aggressive, assertive when she suffered from schizophrenia. With the character of Mamoni the stereotypical image of Assamese women has been reflected as very submissive, calm and emotionally dependant on male counterparts; Mamoni was emotionally dependant on her lover who cheated her. Other stereotypes depicted in the novel are that the ideal job for a woman is that of a teacher; a teacher should be very reserved in nature; the careers of fashion designing and modelling can be chosen by such women who can take their life very lightly. Assamese women always depend on a male figure or like to live amidst the love and compassion of a man; they always fail to take care of mentally ill person in the family due to their moral weakness, ultimately due to their weak morality the disease dominates them. Through Mamoni, the picture of a weak-willed, fragile woman in Assam has been depicted. Here it is shown that it is only the responsibility of female members to take care of the mentally ill women in the family. Elaine Showalter declares that Victorian writings used ‘hysteria’ as
‘female melody’ and contemporary writers, film makers use schizophrenia as ‘female melody’ in their plots (Showalter 1985). So Saikia used schizophrenia as a female disease in her novel.

_Monbolo_ is a collection of short stories written by a renowned psychiatrist of Assam, Dr. Dipali Dutta. The book contains twenty seven fictional stories. ‘Biwar’ is such a story of a neurosurgeon who killed his mentally ill wife and is waiting for the punishment of the court. Madhuchhanda was married to the neurosurgeon after falling in love with him; this was when he was enjoying his vacation and had to treat her mentally ill father of Madhuchanda. Her father imagined Madhuchanda as his wife Labanya and he wanted to maintain a wifely-relationship with her. After marriage, the couple was happy for a few days and then Madhuchanda became mentally ill. She imagined herself to be her mother Labanya. She became pregnant; she did not allow her husband to come close to her and said that the child in her womb did not belong to him but of Pramod (her father).

Because of the frustration of being separated from the pleasures of fatherhood and husband, the surgeon killed his wife. Dutta in the story justified that the neurosurgeon had not really done a crime by killing his mentally ill pregnant wife Madhuchanda; the surgeon had in fact killed Labanya who would have otherwise given more torture to Madhuchanda. It was better to kill Madhuchanda than to see her brutal suffering in the future.

In another story ‘Birinar Apamrityu’, Dutta describes a doctor who is very dynamic, jolly, and dashing but who killed his autistic daughter and physically disabled wife. In both the stories, Dutta has reflected a complete patriarchal attitude. Through Madhuchanda she has represented a very stereotypical feminine character who likes to spend time in the love and shelter of her husband but who suddenly turns in to a mentally ill woman. She lives in hallucination as if she is her mother. At last justifying both the murders of the mentally ill and physically disabled wives and their children as the right decisions of the husbands, Dutta had reflected that she herself has been suffering from ‘female anxiety of authorship’ in the patriarchal society. If she will not support the male figures in her writings she
will lose her identity as a respectable psychiatrist. Dutta’s representation of the nature of mental illness in Madhuchanda and her father is also very stereotypical.

‘Ashrubanya’ is another story where Ashrubanya is a very talented and well-educated girl who has completed her education in aeronautics in some foreign university. She returned from abroad and married her lover from her college days who is from a very conservative family. He did not allow her to do any job and she remained stuck with household works and became the mother of five children. When she seeks psychiatric treatment, psychiatrists give the solution that “the anti-depressants will help to reduce the waves of her tear, but it is impossible for medical health practitioners to find out the source of her pain” (Dutta 1988, 25). Thus, many a time in these stories, Dutta mentions about the inability of a psychiatrist to cure mental illness. In one of her stories, the psychiatrist says, “Guarantee? Who will give guarantee? It is not easy to give guarantee to cure a mentally ill” (1988, 67). In these words, Dutta expresses her fear as a professional female psychiatrist in a male dominated society. Thus, in most of her writings including ‘Ashrubanya’ she represents women as very weak, dominated, and tortured by their husbands; women who desire the love of their husbands and are stressed with household activities, become rude mothers to their children. Dutta mentioned in most of her stories about the application of shock therapy. But the proper utilisation of shock therapy is doubtful. She has mentioned the implication of shock therapy and its lack of benefit in her writings. From such writings the readers will emerge more confused and perplexed than ever.

People with mental illness in the media are portrayed as ‘outsiders’ of normal society and human experience. The process of ‘othering’ of mental illness usually gives rise to a stereotypical and biased discourse in the public arena. In media, the mentally ill are represented as those who can only be controlled through vigorous imprisonment or harsh treatment or 'being vetoed'. Media plays a crucial role in shaping public attitude and perception on mental illness in the society. “The media are very influential in the formation of public attitudes, and journalists working in news papers and televisions have the power either too dispel or to reinforce misconceptions about mental illness” (Leff and Warner 2006, 3).
Though media, through its mystical representation of mental illness creates short time pleasure in public’s mind, it generates long time abhorrence towards mentally ill leading to stigma. Stigma is awfully infectious and spreads in the society instantly.

This issue of stigma is complex and it leads to unjust behaviours and discrimination. It can affect personal identity and social interactions and contribute to social isolation, delays in help seeking and personal distress. It can lead to feelings of guilt, anger and anxiety and is a pervasive phenomenon. Stigma can come from family members, from work colleagues, from health care professionals, educators and members of general community (Walker 2008, 45)

Stigma forces people to lead a measurable life of discrimination and negligence in society. People with severe mental illness may discontinue their treatment due to internalization of stigma, leading to complete social exclusion. Stigma may cause loss of job, social status and family support (Walker 2008). Thus negative media representation of mentally ill women leads to loss of their self respect, loss of self determination, loss of self assurance and to a life of social exclusion. The analysis of media and literary texts in Assam helps to establish the fact that there is a general sense of abhorrence about mentally ill women. There is almost a ‘natural’, even ‘commonsensical’ connection between mental illness and women that popular culture very often establishes.