

**The Portrayal of Psychiatry in Recent Film**

by

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**Abstract**

The profession of psychiatry is, has always been, and will likely continue to be a much enjoyed subject among filmmakers and their audiences, as it tends to provide exciting and emotionally compelling opportunities to portray personal struggles feared by most of humanity. Following a literature based overview of pre-1985 portrayals of psychiatry in film, this paper fills a notable contemporary literature gap by detailing ten prominent trends in the portrayal of psychiatry in recent film - from increased creativity in storylines to the reflection of new psychiatric theories - and drawing some conclusions regarding the historical and other forms of accuracy of these increasingly more critically and commercially acclaimed portrayals. It shows that film is still primarily a creative and entertainment rather than a totally serious educational medium and, as such, accuracy of any degree is usually subordinated to the interests of simply ensuring that the audience has a good time and / or receives an “important” message as the result of watching any particular psychiatric film. In doing so, an area of medical knowledge as complex, detailed, and diverse as psychiatry is often understandably reduced to simplified popular entertainment.

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### **The Portrayal of Psychiatry in Recent Film**

For almost a century, the profession of psychiatry and many of its associated practices have been depicted in motion pictures produced throughout the world. It is a popular subject among filmmakers and their audiences as it tends to provide exciting and compelling opportunities to portray a struggle feared by most of humanity, namely, to retain or restore one's sense of self and thus be able to control one's own thoughts and actions. A body of literature already exists which details the nature of the portrayal of psychiatry in film up to the mid-1980s. Since that time, there have been numerous changes in such depictions, so these will be detailed here.

Following a literature based overview of traditional portrayals of psychiatry in film and suggestions as to why psychiatry has been and still is such a compelling topic for filmmakers, this paper will fill the contemporary literature gap by detailing ten prominent trends in the portrayal of psychiatry in recent film - from increased creativity in storylines to the reflection of new psychiatric theories - and drawing some conclusions regarding the historical and other forms of accuracy of these portrayals. It will show that film is still primarily a creative and entertainment rather than a totally serious educational medium and, as such, accuracy of any degree is usually subordinated to the interests of simply ensuring that the audience has a good time and / or receives an "important" message as the result of watching any particular psychiatric film whether or not the audience realises it is being treated in this manner. In doing so, an area of medical knowledge as complex and detailed as psychiatry is often understandably reduced to simplified entertainment.

But first, here are some definitions that will further clarify the boundaries of this investigation. "Psychiatry" is defined as the actual profession of psychiatry as practised from the late eighteenth century. It also includes anything that looks like later psychiatry, namely medical intervention with the intent of treatment of the mentally ill, if the film is set in an earlier time period. In the modern era "psychiatry" includes psychiatric professionals in general, thus encompassing psychiatric nurses, psychiatric consultants, and even some psychologists who deal with mental illness. Any given film need not wholly concern itself with psychiatry, as, on rare occasions,

even a notable highly relevant reference in the script is sufficient to be included here. This paper makes no distinction between psychiatric practices of a real, semi-fictional, or entirely fictional nature in terms of whether or not a film is considered worthy of mention. There is no focus on mental illness in itself or on demographic issues concerning filmmakers or fictional psychiatric patients. “Recent” is defined as any film released from 1985 to 2000 inclusive. “Film”, naturally, includes motion pictures as seen in cinemas worldwide, whether or not their country of origin is the USA. Due to the contemporary emphasis of this paper, it also includes newer manifestations of this medium such as VHS and DVD home video and “interactive movies” on DVD and cd-rom. Television broadcasts are not considered, as the author did not view any of the films under discussion via this method.

The selection of films under discussion is hardly comprehensive, but it is representative of major recent trends in psychiatric film. While every attempt has been made by the author to personally see as many recent psychiatric films as possible, the omission of any particular relevant film should not convey a sense of dismay in the reader, as chances are that a film that deals with similar or identical themes has already been included in this investigation. Psychiatry is an extremely popular subject for filmmakers, and it would be very difficult, if not impossible, for any one person to view them all.

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The reason why psychiatry has long been a favourite topic among filmmakers is very straightforward. Psychiatry and film, by their very natures, are linked by numerous similarities. “Psychiatrist” may be literally translated as “doctor of the soul”. Indeed, many characters in psychiatric films are engaged in emotionally and intellectually compelling battles to restore their sense of self, or “soul”.<sup>1</sup> Film is an art form that thrives on the portrayal of such heightened emotions and captivating motivations.<sup>2</sup> As a practice that deals closely with its users’ most fundamental and potentially

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<sup>1</sup> Krin Gabbard and Glen O. Gabbard, *Psychiatry and the cinema* (Chicago: University of Chicago Press, 1987), p. 165; “Beyond *Cuckoo’s Nest*” *Psychology Today* 28.6 (1995), p. 16.

<sup>2</sup> Irving Schneider, “The theory and practice of movie psychiatry” *The American Journal of Psychiatry* 144(1987), p. 996.

subversive emotions and desires, film, like psychiatry, had humble beginnings as it was initially viewed by many with scepticism, contempt, or distrust - its practitioners existing at the fringes of society.<sup>3</sup> From inauspicious origins, both professions weathered the accusations of their critics (mostly anti-psychiatry movements for psychiatrists and calls for censorship for filmmakers) over the decades and gradually managed to win the respect and appreciation of the majority of the public to not only survive, but also thrive by the dawn of the twenty-first century.<sup>4</sup>

Although some psychiatric and other health care professionals have expressed extreme scepticism that a discipline as complex as psychiatry can ever be accurately portrayed on film, audiences and filmmakers alike disagree and have long enjoyed the varying degrees of sensationalism and escapism provided in most psychiatric films.<sup>5</sup> After all, it is very hard to inject too much realism into the average plot-condensed ninety to one hundred and twenty minute film.<sup>6</sup> What film “realism” does exist is important however, as it has traditionally tended to reflect and be shaped by current community attitudes towards the psychiatric profession whether “informed” by fact and / or fiction.<sup>7</sup> Filmmakers often toyed with the reality of psychiatry to make it more appealing to and compatible with their audiences’ current ideas about the profession. This particular realism issue – traditional subjective realism - will now be examined in further detail.

In an attempt to compare film psychiatrists with those supposedly practicing in the real world, Irving Schneider has classified pre-1985 psychiatrist portrayals into three useful distinct stereotypes that still have considerable relevance today. “Dr. Dippy” is comic, crazy, and foolish.<sup>8</sup> This sort of practitioner lacks common sense, prefers

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<sup>3</sup> Irving Schneider, “Images of the mind: psychiatry in the commercial film” *The American Journal of Psychiatry* 134(1977), p. 613; Michael Shortland, “Screen memories: towards a history of psychiatry and psychoanalysis at the movies” *British Journal for the History of Science* 20(1987), p. 421.

<sup>4</sup> Roy Porter and Mark S. Micale, “Introduction: reflections on psychiatry and its histories” *Discovering the history of psychiatry* Ed. Roy Porter and Mark S. Micale (New York: Oxford University Press, 1994), pp. 24, 26.

<sup>5</sup> Shortland, “Screen memories”, p. 421; Gabbard and Gabbard, *Psychiatry and the cinema*, p. xvi; Schneider, “The theory and practice of movie psychiatry”, p. 1000.

<sup>6</sup> Gabbard and Gabbard, *Psychiatry and the cinema*, p. xvi.

<sup>7</sup> Steven E. Hyler, “DSM-III at the cinema: madness and the movies” *Comprehensive Psychiatry* 29(1988), p. 205; Schneider, “The theory and practice of movie psychiatry”, p. 1001.

<sup>8</sup> Schneider, “The theory and practice of movie psychiatry”, p. 997.

bizarre treatments, but, ultimately, does no real harm.<sup>9</sup> Far more practical, “Dr. Wonderful” is warm, humane, caring, and much prefers the use of non-physical treatments.<sup>10</sup> Most terrible is “Dr. Evil” who tends to be cruel and sadistic in the use of coercive physical treatments, such as electroconvulsive therapy (ECT) and lobotomy, but who may not be immediately identifiable, hiding, perhaps, in the benevolent guise of someone else.<sup>11</sup> Schneider estimates approximately fifteen percent of traditional film psychiatrists are “Dr. Evils” if horror films are excluded from consideration, but a much higher proportion if horror is included.<sup>12</sup> Out of the psychiatric films watched by the author in preparation for writing this paper, some of which fall firmly within the horror genre, about twenty-five percent of recent film psychiatrists may be considered “Dr. Evils”, fifteen percent “Dr. Dippys”, and the remaining sixty percent “Dr. Wonderfals”.

Film psychiatrist types have tended to increase and decrease in popularity depending upon current community views on psychiatry. Prior to 1935, psychiatric portrayals in film were mainly European and highly negative.<sup>13</sup> This no doubt reflects the main geographical location of formal psychiatric practice at that time as well as the general initial climate of distrust it was forced to endure. It is little wonder that mainly grotesque “Dr. Evils” predominated in this period. Some of the most classic examples are found in *Dr. Goudron's System* (1914) from France where the inmates of an asylum kill their doctors and develop their own horrible cures for mental illness; and in *The Cabinet of Dr. Caligari* (1919) from Germany in which a psychiatrist who presides over a hospital filled with psychotic patients is alleged to hypnotise a man to commit various murders.<sup>14</sup> Psychiatry still tends to work well with horror themes, as both areas tend to explore the often-dangerous boundaries of human knowledge and experience.<sup>15</sup>

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<sup>9</sup> Schneider, “The theory and practice of movie psychiatry”, p. 997.

<sup>10</sup> Schneider, “The theory and practice of movie psychiatry”, p. 997.

<sup>11</sup> Schneider, “The theory and practice of movie psychiatry”, p. 998.

<sup>12</sup> Schneider, “The theory and practice of movie psychiatry”, p. 998.

<sup>13</sup> Schneider, “Images of the mind”, p. 614.

<sup>14</sup> Hyler, “DSM-III at the cinema”, p. 196; Schneider, “Images of the mind”, p. 614.

<sup>15</sup> Schneider, “Images of the mind”, p. 615; Schneider, “The theory and practice of movie psychiatry”, p. 999.

From roughly 1935 with the release of pro-psychiatry *Private Worlds* in the USA to the mid-1960s that saw the blatant influence of the anti-psychiatry movement, portrayals of psychiatry in film were largely positive and American.<sup>16</sup> Psychiatry had found plenty of encouragement in the USA and was revered by much of the population as almost magical as it helped to sort out ideal armed forces recruits from those who were less desirable and seemed to provide “the answers” for so many troubled souls.<sup>17</sup> Films of this period tended to emphasise psychiatrists as relatively realistic “Dr. Wonderfals” who could be seen in private practice with a tendency to specialise in psychoanalysis (such as in *Spellbound* [1945]), as employees and administrators of mental hospitals who practised their curative wonders on grateful patients (such as in *The Snake Pit* [1948]), or as “know it all” experts who step in as needed and explain any aberrant mental behaviour (such as in *Psycho* [1960]).<sup>18</sup> Towards the middle and end of this pro-psychiatry period, the *film noir* tradition of dark themes and the rebirth of the horror film produced more than the occasional less than complimentary psychiatric film which was to sit well with the rapidly emerging anti-psychiatry movement.<sup>19</sup>

The two decades prior to the time period that is the major focus of this paper saw the powerful influences of the anti-psychiatry movement and the sexual revolution on the portrayal of psychiatry in film. It was the late 1960s / early 1970s when many traditional attitudes and institutions (including pro-psychiatry views) were being questioned and challenged, particularly if they were deemed to unduly restrict the freedom of the individual. Sexual themes were no longer taboo. Indeed, Australian psychiatric film in particular has been known to concentrate upon such issues, particularly through the use of Oedipal narratives.<sup>20</sup> Anti-psychiatry saw the prominent re-emergence of “Dr. Evils” such as the duplicitous doctors and nurses of

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<sup>16</sup> Schneider, “Images of the mind”, p. 615.

<sup>17</sup> Schneider, “Images of the mind”, p. 615; Shortland, “Screen memories”, p. 422.

<sup>18</sup> Schneider, “Images of the mind”, pp. 615-17; *Psycho*, Dir. Alfred Hitchcock (Paramount Pictures, 1960).

<sup>19</sup> Schneider, “The theory and practice of movie psychiatry”, p. 999; Porter and Micale, “Introduction”, p. 24.

<sup>20</sup> Barbara Creed, “Mothers and lovers: Oedipal transgressions in recent Australian cinema” *Metro* 91(1992), pp. 14, 22.

*One Flew Over the Cuckoo's Nest* (1975).<sup>21</sup> As with the previous period, the significant majority of psychiatric films were made in the USA.

Examples of “Dr. Dippys” over these three eras are hard to determine, but it may be safely said that this type tends to exist in situations of comedy or at least where psychiatry is not taken with excessive seriousness. In fact, this type may be found as a sub-type of “Dr. Wonderful” and even “Dr. Evil”, as it sometimes represents less than competent examples of both opposite varieties of psychiatric practice. Having said this, though, “Dr. Dippy” is not common and hardly lends itself well to standard drama as found in most films.<sup>22</sup>

Recent film, 1985-2000, reflects a much wider diversity of views on psychiatry than any earlier period. Psychiatric films are now far more accessible and acceptable than ever and psychiatry itself appears to have entered a post-modern period where no one stereotype clearly prevails. With more widespread availability for psychiatric films and no truly dominant public view of real psychiatrists, several new trends have emerged in the portrayal of psychiatry in recent film. It is these new tendencies that will be discussed in the following section.

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Most prominently, recent psychiatric films have been released on varied media that go beyond the traditional totally non-interactive cinema screen. Although VHS home video did exist prior to 1985, it is only since that date that it has spread with amazing speed to the considerable majority of homes in the developed world. Home video allows consumers to view movies they missed at the cinemas and watch them repeatedly at little cost. Furthermore, it allows the viewers to “edit” any movie in the sense that they can use their VCRs’ rewind and fast-forward features to skip certain scenes or replay them repeatedly. More recently, DVD has provided the same options and more, with the additional benefits of enhanced sound and picture quality. Interactive movies, whether on cd-rom, DVD, or both, go one step further and allow

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<sup>21</sup> *One Flew Over the Cuckoo's Nest*, Dir. Milos Forman (United Artists, 1975).

<sup>22</sup> The ideas in this paragraph are based on the author’s rough mental survey of the films covered in Gabbard and Gabbard, *Psychiatry and the cinema*.



the viewer to interact with the plot and modify it in limited ways. This new style of film includes works that prominently depict psychiatry such as *Phantasmagoria: A Puzzle of Flesh*, and *Tender Loving Care*.<sup>23</sup> It is now much easier to see most types of films, and often control their playback to one's own personal desires, than ever before. More variation in film media results in the acquisition of wider audiences and the increased desire among filmmakers to create suitable and relevant films for those audiences. As a consequence, the world has witnessed the increased popularity of films that involve the ever-popular subject matter of psychiatry.

Wider audiences and associated increased demand has led to the need for filmmakers to be more creative. After all, today's largely jaded audiences want to see something they have not encountered before. There is now an increased willingness among psychiatric filmmakers to explore the boundaries of fiction and the stranger – often merely alleged – aspects of real life. For example, the superhero Batman makes considerable use of psychiatric analysis provided by his psychiatrist lover in determining the motivations and likely next moves for the bizarre and outlandish psychotic villains “The Ridder” and “Two Face” in *Batman Forever*.<sup>24</sup> A strange alleged aspect of real life, alien abductions, is dealt with in *Communion* and *Intruders* where psychiatrists step in and help the “abductees” understand and come to terms with their distressing experiences.<sup>25</sup> In *The Sixth Sense*, “real life” involves a child psychologist recommend that his young male patient be treated with psychiatric hospitalisation after the boy alleges that he sees “dead people”.<sup>26</sup>

Increased creativity also extends to the development of more psychiatric films set in the past – “period pieces” as they are often known. History provides plenty of opportunities to hook people's attention with often significantly different social customs and attitudes, art, and architecture. In this category may be found films such as *The Madness of King George* and *Quills*, both of which portray examples of the

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<sup>23</sup> *Phantasmagoria: A Puzzle of Flesh*, Designer Lorelei Shannon. Dir. Andy Hoyos (Sierra On-Line, 1996); *Tender Loving Care*, Designer Rob Landeros. Dir. David Wheeler (Aftermath Media, 1998).

<sup>24</sup> *Batman Forever*, Dir. Joel Schumacher (Warner Brothers, 1995).

<sup>25</sup> *Communion*, Dir. Philippe Mora (MCEG Productions, 1989); *Intruders*, Dir. Dan Curtis (Twentieth Century Fox, 1992). Psychiatric treatment of alien abductions is examined in greater depth in a special case study later in this paper.

<sup>26</sup> *The Sixth Sense*, Dir. M. Night Shyamalan (Buena Vista Pictures, 1999).

very beginnings of the modern profession of psychiatry.<sup>27</sup> Historical plots are often laced with anachronism in order to appeal to as wide an audience as possible because many viewers may feel too alienated by excessive authenticity. By showing audiences what they already know or think they know, the educational factor is reduced; thus, with not as many new concepts to consider, emotional involvement with the storyline may be enhanced. Examples include *Hamlet* where a medieval tale is set in the nineteenth century, complete with nineteenth century depictions of psychiatric treatments not specifically mentioned in the actual play's text; *Restoration* where the lead character, an exiled court physician, finds refuge in a Quaker mental asylum and recommends enlightened treatments for its patients several decades before such asylums and treatment ideas existed; and *Shakespeare in Love* which depicts what appears to be a Freudian psychoanalyst - complete with couch and dream interpretations - three hundred years before the actual birth of that discipline.<sup>28</sup>

The final manifestation of increased creativity extends into thinking longer and harder about what pre-existing texts, whether plays or novels, may be appropriately adapted for the first time, or once again but with a notable variation or twist, for the big screen. The past fifteen years has seen a greater than ever reliance on the use of previously published material, whether factual or fictional. In fact, a slim majority of recent psychiatric films have been based in whole or in part on such material. Some of the many examples include *Awakenings* based on the book by Dr. Oliver Sacks that details his temporarily successful work with catatonic patients at a major New York City hospital in the 1960s; *Communion* based on the alleged actual alien abduction experiences detailed in author Whitley Strieber's book of the same name; *Girl, Interrupted* from the memoirs of writer Susan Kaysen regarding her own psychiatric hospitalisation in the 1960s; and *Quills* - closely based on the Obie award-winning play by Doug Wright of the same name.<sup>29</sup> With an increased willingness to look at

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<sup>27</sup> *The Madness of King George*, Dir. Nicholas Hytner (Samuel Goldwyn Company, 1994); *Quills*, Dir. Philip Kaufman (Twentieth Century Fox, 2000).

<sup>28</sup> *Hamlet*, Dir. Kenneth Branagh (Columbia Pictures, 1996); *Restoration*, Dir. Michael Hoffman (Miramax Films, 1995); *Shakespeare in Love*, Dir. John Madden (Universal Pictures, 1998); Michel Foucault, *Madness and civilisation*. Trans. Richard Howard (New York: Vintage Books, 1973), p. 243; *Madness. Episode Two: 'Out of Sight'*, Presenter Jonathan Miller. Dir. Richard Denton (British Broadcasting Corporation, 1991).

<sup>29</sup> *Awakenings*, Dir. Penny Marshall (Columbia Pictures, 1990); Oliver Sacks, Interview *Lateline* ABC TV, Brisbane, 26 March 1991; *Communion*; *Girl, Interrupted*, Dir. James Mangold (Columbia Pictures, 1999); *Quills*; Doug Wright, *Quills* (New York: Dramatists Play Service, 1996), back cover.

fiction, history, and what already exists in any format, plus plenty of brainstorming of their own, the filmmakers of today have been able to develop an astonishingly high quality variety of storylines for their psychiatry related movies.

Filmmakers have been greatly assisted in their development and promotion of increasingly more creative and diverse storylines by the increased diversity of attitudes among the general population towards psychiatry. The earlier attitudes of either reverence or horror are still present in today's psychiatric films, but so also are highly populist approaches that, for example, take into account both the typical contemporary audience's general familiarity with psychoanalysis and their ability to see psychiatry with some degree of irreverence (often as per the "Dr. Dippy" stereotype). This point can be seen in anything from the briefest of comments such as the likening of the doomed passenger liner *Titanic* in the 1997 film of the same name to a Freudian phallic symbol, to longer scenes such as the previously mentioned "Freudian" analyst in *Shakespeare in Love*, to entire films such as the comic antics of the reluctant psychiatrist and his self-appointed Mafia "client" in *Analyze This* and the bumbling adventures of the hospital psychiatrists and some of their more troublesome but harmless patients who go on a disastrous day trip in *The Dream Team*.<sup>30</sup>

Contemporary popular attitudes regarding specific psychiatric issues are likewise reflected in current portrayals of psychiatry in film, in further efforts to increase their relevance and therefore accessibility to most modern audiences. Examples include the current theory that homosexuality is not a mental disorder. In *Heavenly Creatures*, set in highly conservative 1950s New Zealand, the old diagnosis that homosexuality is, in fact, a mental disorder, is played as a parody in the sense that the pompous doctor clearly does not know what he is talking about and through the overly-horrified reaction of the mother of his patient when she hears this news from him about her daughter.<sup>31</sup> This reaction and diagnosis may be readily contrasted with a psychiatrist in *Phantasmagoria*, set in the USA in the 1990s, stating outright in a

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<sup>30</sup> *Titanic*, Dir. James Cameron (Twentieth Century Fox and Paramount Pictures, 1997); *Shakespeare in Love*; *Analyze This*, Dir. Harold Ramis (Warner Brothers, 1999); *The Dream Team*, Dir. Howard Zieff (Universal Pictures, 1989).

<sup>31</sup> *Heavenly Creatures*, Dir. Peter Jackson (Miramax Films, 1994); Luisa F. Ribeiro, "Heavenly Creatures" *Film Quarterly* 49(1995), pp. 33, 38; Janet Soler, Rev. of *Parker and Hulme: a lesbian view*, by J. Glamuzina and A. Laurie *New Zealand Sociology* 7(1992), p. 109.

matter of fact way to her patient that homosexuality is not a sign of mental illness, and her patient accepting this news calmly.<sup>32</sup> Also, recent psychiatric films tend to promote and explore treatments that are popular in contemporary society such as psychoanalysis as seen in films like *Analyze This*.<sup>33</sup> Ideas of psychiatric care that are now deemed outdated typically result in less than complimentary depictions such as in the well meaning but less than palatable practices that take place in the 1960s psychiatric institutions of *Awakenings* and *Girl, Interrupted*.<sup>34</sup> Even more extreme is the sheer horror and negativity directed at institutionalisation and antiquated physical treatments such as ECT and lobotomy in *An Angel at My Table*, *House on Haunted Hill*, and *Phantasmagoria* - all with their predominance of the “Dr. Evil” mentality.<sup>35</sup>

Populist mentality is also reflected in the increased diversity in the country of origin of films dealing with psychiatric matters. No longer are psychiatric films the exclusive domains of Continental Europe and / or the USA; these movies are now made by most countries that value their film industry. Country of origin ranges from New Zealand, with *An Angel at My Table* and *Heavenly Creatures*; to Australia with *Shine*; to the UK with *The Madness of King George*.<sup>36</sup> Likewise, the country of setting for the movies and the country of origin for the actors tend to be diverse. For example *Bram Stoker’s Dracula* has a cast of mostly British actors and is set mostly in Britain; *Holy Smoke* is set mostly in Australia and involves Australian, American, and British actors; and *Quills* is set in France and involves a similar range of diversity in the country of origin for its actors.<sup>37</sup>

With increased creativity, diversity, and appeal to populism, it was inevitable that the fictional psychiatrists themselves would change in regard to the roles they play in films that concern their “profession” and in the ways they were depicted according to their gender. Film roles will be discussed first. It is hard to imagine a wider range of

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<sup>32</sup> *Phantasmagoria*.

<sup>33</sup> *Analyze This*.

<sup>34</sup> *Awakenings*; *Girl, Interrupted*.

<sup>35</sup> *An Angel at My Table*, Dir. Jane Campion (New Zealand Film Commission, 1990); Janet Frame, *An angel at my table: an autobiography* vol. 2. (London: The Women’s Press, 1984), pp. 98, 111; *House on Haunted Hill*, Dir. William Malone (Warner Brothers, 1999); *Phantasmagoria*.

<sup>36</sup> *An Angel at My Table*; *Heavenly Creatures*; *Shine*, Dir. Scott Hicks (Fine Line Features, 1996); *The Madness of King George*.

<sup>37</sup> *Bram Stoker’s Dracula*, Dir. Francis Ford Coppola (Columbia Pictures, 1992); *Holy Smoke*, Dir. Jane Campion (Miramax Films, 1999); *Quills*.

roles for any profession than have psychiatrists been depicted in recent films. Some, as in *Communion* and *Intruders*, act as hypnotists to help their patients fully recall their alien abduction experiences.<sup>38</sup> Others, mainly forensic psychiatrists, are court-appointed investigators sent to uncover the truth to a person's claim of criminal non-responsibility owing to insanity, whether from delusions, hallucinations, or little known disorders such as "pathological intoxication".<sup>39</sup> Some are actually the convicts themselves, even if they do prove to be of some use to law enforcement such as the intimidating Hannibal "The Cannibal" Lecter in *The Silence of the Lambs*.<sup>40</sup> While some are still "Dr. Wonderfals" as in *Prince of Tides*, many are irredeemable sadists as in the case of the evil psychiatrists in *Phantasmagoria* and *House on Haunted Hill*.<sup>41</sup> Film psychiatrists come in so many different roles and mindsets these days that it was inevitable that sex roles and gender issues would change too.

With the significantly increased entry of women into the psychiatric professions, and with generally wider audiences for recent psychiatric films, it is hardly surprising that there have been notable reflections of such facts in the variation of gender roles in these movies with the aim of further appealing to and increasing such audiences. Female psychiatric professionals are depicted with increasing regularity. Around thirty percent of the films mentioned in the Appendix, including interactive movies, depict female psychiatric professionals, usually psychiatrists. This figure is particularly impressive given the facts that: eighty-five percent of the filmmakers (directors and designers) listed there are male – in defiance of a readily observed natural human tendency to much prefer to investigate and depict the lives of the members of one's own sex; and, from a recent unpublished survey of local telephone directory psychiatrist listings conducted by the author, whose results, while relevant, admittedly need not be fully applicable to Australia or the developed world as a whole, only twenty percent of psychiatrists are female. Traditionally, female psychiatric professionals in films, such as *Spellbound* from 1945, tended to get

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<sup>38</sup> *Communion*; *Intruders*.

<sup>39</sup> *Agnes of God*, Dir. Norman Jewison (Columbia Pictures, 1985); *Final Analysis*, Dir. Phil Joanou (Warner Brothers, 1992); Thomas G. Guthrie, "Forensic psychiatry" *The encyclopedia of psychiatry, psychology, and psychoanalysis* Ed. Benjamin B. Wolman (New York: Aesculapius Publishers, 1996), pp. 217-18.

<sup>40</sup> *The Silence of the Lambs*, Dir. Jonathan Demme (Orion Pictures, 1991). Dr. Lecter is the only movie psychiatrist known to the author who is also a psychiatric patient.

romantically involved with their male patients, thus throwing aside much of their supposed professionalism in doing so.<sup>42</sup> Today, this is not always the case for, as in *Communion* and *Phantasmagoria*, some female psychiatrists are shown to have purely professional relationships with their male patients.<sup>43</sup> Male psychiatric professionals may now get more romantically involved with their female patients, most notably in the passionate doctor-patient affair in *Final Analysis*, but also in the case of *Restoration*, and between the psychiatrist's cult deprogrammer consultant and his provocative female client in *Holy Smoke*.<sup>44</sup> In any case, it is unwise to seriously complain or get excessively sensitive about any degree of unprofessional behaviour going on between psychiatrists of either sex and their opposite sex patients in *fiction* such as films because love themes are common to most movies. It is the task of the film's cast and crew to get the audiences emotionally involved in their production so, as almost everyone can personally relate to the complexities and passions of love, it is almost always included. Reality, of course, where unprofessional behaviour is often punished, is an entirely different matter.

Lastly, any list of trends in the portrayal of psychiatry in recent film would not be truly complete without mentioning that films of this nature are no longer almost exclusively to be found on the fringes of mainstream cinema. They are often popular and sometimes even critically acclaimed productions. For example, box-office giant *The Sixth Sense* was nominated for some Academy Awards; *Analyze This* and *Batman Forever*, while not awarded or nominated for much, did enjoy considerable commercial success; and *Shine* and *The Silence of the Lambs* were both well nominated and awarded by critics worldwide.<sup>45</sup>

With enhanced creativity and diversity in the quest to appeal to as wide an audience as possible - all the while maintaining the eternal appeal of the crucial struggle for one's "self" - today's filmmakers have ensured that they have considerably improved

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<sup>41</sup> *Prince of Tides*, Dir. Barbra Streisand (Columbia Pictures, 1991); *Phantasmagoria*; *House on Haunted Hill*.

<sup>42</sup> Schneider, "Images of the mind", p. 615; Gabbard and Gabbard, *Psychiatry and the cinema*, pp. 21, 27.

<sup>43</sup> *Communion*; *Phantasmagoria*.

<sup>44</sup> *Final Analysis*; *Restoration*; *Holy Smoke*; Jeffrey S. Victor, *Satanic panic: the creation of a contemporary legend* (Chicago: Open Court, 1993), pp. 8-9.

<sup>45</sup> *The Sixth Sense*; *Analyze This*; *Batman Forever*; *Shine*; *The Silence of the Lambs*.

upon the traditional techniques of psychiatric film production and have kept pace with modern trends and expectations. But there is one highly important matter intermittently mentioned above but hereto left inadequately investigated: to what degree are recent portrayals of psychiatry in film accurate, both historically and in relation to contemporary practice? To what degree and in what ways are today's audiences thus deceived and emotionally and / or intellectually propositioned by the filmmakers to accept certain points of view? It is to detailed representative select case studies of these issues that this discussion of psychiatric films will now turn.

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In terms of straightforward historical accuracy - that is to what degree did events from the past portrayed on screen actually occur in real life in the manner in which they are shown - the psychiatric films *Quills* and *The Madness of King George* provide excellent case studies. *Quills* is set in 1807 at Charenton Asylum, France.<sup>46</sup> It revolves around the alleged turbulent final days of the Marquis de Sade, a supposed sufferer of "chronic libertine dementia" and the asylum's most notorious inmate who was best known for his pornographic philosophical writings and social commentary.<sup>47</sup> The person in charge of the asylum, Dr. Royer-Collard, favours the Marquis' continuing confinement and repression of his highly controversial yet popular writings, desiring that he be treated harshly to keep him under control for the moral safety of society. He is initially opposed in his aim by his deputy, the Abbe de Coulmier, who believes in more enlightened treatments and Sade's eventual release. The enlightened treatments fail to work; Sade keeps writing and keeps successfully smuggling his works outside; and eventually one of his stories provokes a fellow inmate into viciously murdering Sade and the Abbe's young lover, the laundry worker Madeline. The Abbe "snaps" and has Sade progressively mutilated, dismembered, and finally executed - the priest eventually ending up as an asylum patient himself after such an horrific display of sadistic homicidal madness.<sup>48</sup> As with many of Sade's real life works, this film exposes hypocritical attitudes to censorship in

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<sup>46</sup> Stephen Farber, "Sympathy for de Sade" *Movieline* February (2000), p. 62.

<sup>47</sup> Anthony Levi, *Guide to French literature: beginnings to 1789* (Detroit: St. James Press, 1994), pp. 759, 766; Lorna Berman, "The Marquis de Sade and his critics" *Mosaic* 1.2 (1968), pp. 63-64.

supposedly proper society, and promotes the view that the truly wronged people are those who have their freedoms suppressed by others rather than those who suppress the freedoms of others.<sup>49</sup>

The filmmakers' desire for entertainment and a message are highlighted when the reality of Sade's final days is examined. The Marquis, in fact, died at Charenton Asylum in 1814 of natural causes, aged seventy-four.<sup>50</sup> Charenton was regarded as an enlightened, modern institution where the inmates - classified and accommodated according to their diagnosed condition - were treated humanely, were allowed to express themselves in literary ways with a fair degree of freedom, and were subjected to a bare minimum of physical punishment or restraint.<sup>51</sup> Dr. Royer-Collard's occasional persecution of Sade amounted to little more than the temporary withdrawal of minor privileges.<sup>52</sup> The Abbe de Coulmier had considerable regard for Sade, perhaps even a friendship.<sup>53</sup> Sade did have an affair with Madeline, but she outlived him.<sup>54</sup> So it can be seen that mundane historical reality in this case is not permitted to get too much in the way of a good moralistic and entertaining story.

In contrast with *Quills*, *The Madness of King George* manages to present an equally entertaining story without sacrificing too much in the way of historical accuracy. In this film set in 1788, hard-working King George III of Great Britain (r. 1760-1820) falls ill both mentally and physically, and subsequently causes chaos among his family members, ministers, and servants.<sup>55</sup> He does not respond to any traditional treatments, so the radical Dr. Willis is called in to help and succeeds where all others had failed.<sup>56</sup> Willis disregards his patient's very high social status and treats him like anyone else in his care – restraints and all.<sup>57</sup> Another important part of the King's

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<sup>48</sup> All the sentences in this paragraph that comprise the plot summary for *Quills* have both the movie and Wright, *Quills*, pp. 10-52 as their sources.

<sup>49</sup> Levi, *Guide to French literature*, p. 759.

<sup>50</sup> Donald Thomas, *The Marquis de Sade* (London: Allison and Busby, 1992), p. 251.

<sup>51</sup> Francine du Plessix Gray, *At home with the Marquis de Sade* (New York: Simon and Schuster, 1998), pp. 383-84.

<sup>52</sup> Gray, *At home with the Marquis de Sade*, pp. 399-401.

<sup>53</sup> Gray, *At home with the Marquis de Sade*, pp. 384-86.

<sup>54</sup> Thomas, *The Marquis de Sade*, p. 250.

<sup>55</sup> *The Madness of King George*.

<sup>56</sup> *The Madness of King George*.

<sup>57</sup> *The Madness of King George*; Craig Tepper, "The Madness of King George" *Film Quarterly* 49(1996), p. 50.



cure is convincing him to accept change and life's often-regrettable realities that thwart one's own desires and bring about the need to arrive at compromise solutions with other people.<sup>58</sup>

The reality of the situation was quite similar to its film depiction. The King's madness was explained by his contemporary Whig opponents as his vain selfish efforts to increase his royal powers in an age of increased constitutional curbs on royal power.<sup>59</sup> Freudians have accused George of being too obsessive and bureaucratic as well as having neuroses over his supposed sexual frustrations.<sup>60</sup> Modern psychiatrists Macalpine and Hunter, among others, claim that the King suffered from porphyria, an hereditary disease with periodic symptoms that sometimes attack the nervous system.<sup>61</sup> The Rev. Dr. Francis Willis was a firm believer in exercising mental pressure and dominion over his patients, making particular use of his very intense eyes and firm voice.<sup>62</sup> He was known for his use of restraining techniques as items for discipline.<sup>63</sup> To be sure, the filmmakers would have invented much of the dialogue, but the essential truth of the events depicted is accurate – perhaps because this film has no strong moral to promote. But what about total fiction set in the past? How does a classic example of such a film stand up to scrutiny regarding issues of psychiatric accuracy? This issue will now be examined.

William Shakespeare's plays have been interpreted in countless ways over the centuries; more recently, some have been interpreted from a psychiatric perspective. Although *King Lear* with its reference to institutionalisation using the term "Bedlam Beggars" may be mentioned as an example, it is *Hamlet* that has been most analysed in these terms and which will be the sole focus of discussion here.<sup>64</sup> Kenneth Branagh's fully faithful, full-text, four-hour film version of *Hamlet* is the first opportunity for movie audiences to witness the complete versions of all scenes that

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<sup>58</sup> *The Madness of King George*.

<sup>59</sup> Tepper, "The Madness of King George", p. 47; Roy Porter, *A social history of madness: the world through the eyes of the insane* (New York: Weidenfeld and Nicolson, 1987), p. 42.

<sup>60</sup> Porter, *A social history of madness*, p. 42.

<sup>61</sup> Porter, *A social history of madness*, pp. 42-43.

<sup>62</sup> Porter, *A social history of madness*, pp. 42-43, 48.

<sup>63</sup> Porter, *A social history of madness*, p. 48.

<sup>64</sup> *King Lear*, Dir. Peter Brook (Royal Shakespeare Company, 1970); *Madness. Episode One: 'To Define True Madness'*, Presenter Jonathan Miller. Dir. Richard Denton (British Broadcasting Corporation, 1991).

contain psychiatric imagery and references.<sup>65</sup> Writing four hundred years ago, Shakespeare lived well before the beginnings of what we now term psychiatry, but he had remarkable prescience in predicting many strains of thought in this discipline.

Most prominent are the parallels between *Hamlet* and Erving Goffman's classic study *Asylums* where Goffman wrote of "total institutions" which abuse and degrade their mentally ill inmates in oppressive prison-like conditions rather than cure them.<sup>66</sup> Hamlet considers Denmark to be a prison and declares his obedience to the King and his "staff" as his keepers.<sup>67</sup> From that point, until almost the end of his adventures, Hamlet is treated like, and experiences life as, a "total institution" inmate through the use of: depersonalisation where he is urged to remove his mourning clothes; denial of heterosexual relationships in that he feels he must renounce both his lover, Ophelia, and his Oedipal strivings for his mother; denial of normal, trusting relationships with anyone, be they keepers or alleged friends; covert surveillance by his keepers, especially the King and his chief minister Polonius; permission to conduct a theatrical performance in a futile bid to improve morale; and the many deaths of those he knows.<sup>68</sup>

But this is not all. Jonathan Miller adds that in Act 2, scene 2, Polonius believes he recognises the existence of madness in Hamlet and subsequently conducts what we now call a "present state examination", which begins with the customary question as to whether or not the alleged sufferer recognises their questioner, to verify his suspicions.<sup>69</sup> Branagh accentuates many of the scenes involving Ophelia's indisputable state of madness in Act 4 by depicting some attendants as her doctors and nurses, dressing her in a nineteenth century straightjacket, imprisoning her in a padded cell, and having her hosed down in another cell like an animal – all in line

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<sup>65</sup> *Hamlet*.

<sup>66</sup> Lawrence Casler, "Elsinore as a total institution: Shakespeare's *Hamlet* in light of Goffman's *Asylums*" *Bulletin of the Menninger Clinic* 51(1987), p. 551.

<sup>67</sup> Casler, "Elsinore as a total institution", p. 552; William Shakespeare, *Hamlet* Ed. T. J. B. Spencer. (London: Penguin Books, 1980), 1.2.119-120, 2.2.238-250. Henceforth, "*Hamlet*" followed by one or more line references shall refer to this text rather than the film version even though the words in both are exactly the same.

<sup>68</sup> Casler, "Elsinore as a total institution", pp. 552-55, 557-58; *Hamlet* 1.2.68, 2.2.1-18, 2.2.162-66, 3.2.; W. F. Bynum and Michael Neve, "Hamlet on the couch" *American Scientist* 74(1986), p. 395.

<sup>69</sup> *Madness. Episode One: 'To Define True Madness'*; *Hamlet* 2.2.170-220.

with the comparatively backward state of psychiatric care in the time period in which the movie is set.<sup>70</sup>

Accuracy is also an important issue when considering films set in the present day, whether or not the subject matter has any degree of widespread popular acceptance among psychiatric professionals or the general community. In the heavily debated phenomenon of alien abductions depicted in great detail in *Communion* and *Intruders*, various persons allege to have been abducted by extraterrestrial beings, experimented upon (often sexually), and eventually returned to Earth, usually with only fragmentary memories of what has transpired.<sup>71</sup> Detailed allegedly repressed memories of such abuse are revealed in these films while the abductees undergo hypnosis sessions with psychiatrists and similar professionals.<sup>72</sup>

Real-life psychiatrists who hypnotically regress alleged abductees include Drs. Naiman and Klein from New York City, and Dr. Mack from Harvard University.<sup>73</sup> They are all well aware that hypnosis reveals only subjective - not objective - truth and that its value depends upon the skill of the practitioner, especially in asking the correct, non-leading questions.<sup>74</sup> The notion of repressed memories that may be uncovered to reveal a true incident of abuse, especially sexual abuse, somewhere in the patient's past, is not universally accepted and has come under challenge from those who see the psychiatrists as deliberately or unconsciously transferring their own beliefs and prejudices onto their patients who are in a vulnerable and suggestible mental state; but this dissention pales into insignificance compared with the vast majority professional dismissal of the reality of alien abductions themselves.<sup>75</sup> Needless to say, alien abduction films clearly promote the view of the reality of these kidnappings and of accurate repressed memories that may be recovered via hypnosis.

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<sup>70</sup> Hamlet; S. E. D. Shortt, *Victorian lunacy: Richard M. Bourke and the practice of late nineteenth century psychiatry* (Cambridge: Cambridge University Press, 1986), pp. 160-61; Edward Shorter, *A history of psychiatry: from the era of the asylum to the age of Prozac* (New York: John Wiley and Sons, 1997), p. 65.

<sup>71</sup> *Communion*; *Intruders*.

<sup>72</sup> *Communion*; *Intruders*.

<sup>73</sup> Budd Hopkins, *Intruders: the incredible visitations at Copley Woods* (New York: Ballantine Books, 1987), p. 301; Whitley Strieber, *Communion* (London: Arrow, 1988), p. 128; David M Jacobs, *Secret life: firsthand accounts of UFO abductions* (New York: Simon and Schuster, 1992), pp. 291, 296.

<sup>74</sup> Hopkins, *Intruders*, p. 302; Jacobs, *Secret life*, p. 291.

<sup>75</sup> Paul Gray, "The assault on Freud" *Time* 29 November 1993, pp. 56-60; Jeanne McDowell, "It came from outer space" *Time* 29 November 1993, p. 66.

The interactive movie, *Tender Loving Care (TLC)*, also set in the present day, presents psychiatry in a truly innovative fashion in that it changes some elements of its storyline according to how the viewers interact with periodic Thematic Apperception Tests (TATs) that are shown on screen in between certain key scenes.<sup>76</sup> These tests present currently relevant paintings, photos, or drawings to the viewers and ask that multiple-choice questions, which are designed to draw out the viewers' personalities with all their conscious and unconscious fantasies, feelings, and experiences, be answered about them.<sup>77</sup> *TLC*'s key future plot developments will change according to the viewer's revealed personality.<sup>78</sup> Clinical, real-world use of TATs differ as they are based upon black and white drawings which display scenes of a sufficiently vague nature so that most patients will suggest different interpretations (unrestricted in any way by pre-published multiple choices) as to what is going on in the depictions, what has likely occurred before, and what will likely soon follow.<sup>79</sup> Responses can then be analysed and the person's mental state and personality judged according to predetermined criteria.<sup>80</sup> The exact nature of the TATs in *TLC* and in real life differ because the *TLC* TATs are so closely tied in with plot issues and must have the determination of future plot twists as their primary goal rather than more straightforward aims such as personality analysis.

*TLC* depicts a psychiatric nurse in many scenes as a main character, a type of psychiatric professional largely neglected in most psychiatric films, at least in a dominant way, since the unforgettable authoritarian Nurse Ratched in *One Flew Over the Cuckoo's Nest*.<sup>81</sup> The nurse, Kathryn Randolph, is sent on the instructions of a psychiatrist to see to the recovery of Allison Overton, a semi-catatonic woman living at home in a highly delusional state of denial that her daughter actually died in a recent car crash at which her husband, Michael, was at the wheel.<sup>82</sup> While Kathryn is shown to be highly intelligent and competent, she mercilessly psychologically and

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<sup>76</sup> *Tender Loving Care*.

<sup>77</sup> *Tender Loving Care*.

<sup>78</sup> *Tender Loving Care*.

<sup>79</sup> Larry S. Seidman, "The clinical use of psychological and neuropsychological tests" *The Harvard guide to psychiatry* 3<sup>rd</sup> edn. Ed. Armand M. Nicholi Jr. (Cambridge, Massachusetts: Harvard University Press, 1999), pp. 49-50.

<sup>80</sup> Seidman, "The clinical use of psychological and neuropsychological tests", p. 50.

<sup>81</sup> *One Flew Over the Cuckoo's Nest*.

sexually teases Michael whom she correctly believes to wish that his wife remain in her near helpless state so that he can care for her indefinitely as penance for “killing” their daughter.<sup>83</sup> Additionally, she is extremely independent and prefers her own radical psychological shock, drug free therapy than anything recommended by the psychiatrist.<sup>84</sup> Whether or not the psychiatric nurse succeeds in curing Allison depends upon the viewer’s TAT results.<sup>85</sup> In real life, psychiatric nurses are specialised, tertiary qualified professionals who actively participate in patient therapy, implementing the psychiatrist’s directions.<sup>86</sup> They distribute medication and vary its dosage only under a doctor’s orders.<sup>87</sup> They often implement and evaluate treatment plans for individual patients upon the advice of a psychiatrist.<sup>88</sup> Spitefully and maliciously acting against others is hardly part of their professionalism, and, apparently, neither is acting so independently of a psychiatrist, but it does provide compelling and thrilling plot elements for the highly entertained viewer.

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The profession of psychiatry has always been, and still remains, a rich source of inspiration for many makers of films. The past fifteen years have seen an increase in the popularity of psychiatric films and, partly as a result of this, and partly to encourage even more viewers, these sorts of films have undergone various areas of change in terms of factors such as degrees of creativity and diversity as well as changes in the media on which these films (like those of so many other genres) are presented. But film, as art, is not, and can never be, a flawless mirror of real life, so movie “reality” is often distorted to varying degrees, whether the movie is set in the past or not, with the aim of ensuring that a condensed, engaging, relevant, entertaining storyline - especially one with a powerful message - is not obscured by getting bogged down in too much mundane detail. With such compelling subject matter and eagerly

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<sup>82</sup> *Tender Loving Care.*

<sup>83</sup> *Tender Loving Care.*

<sup>84</sup> *Tender Loving Care.*

<sup>85</sup> *Tender Loving Care.*

<sup>86</sup> Ann Marie T. Brooks, “The role of the psychiatric nurse” *Modern hospital psychiatry* Eds. John R. Lion, Wolfe N. Adler, and William L. Webb (New York: W. W. Norton and Co., 1988), pp. 211-13.

<sup>87</sup> Brooks, “The role of the psychiatric nurse”, p. 215.

<sup>88</sup> Brooks, “The role of the psychiatric nurse”, p. 220.

receptive audiences, psychiatry will likely continue to be portrayed in film, in all its current and future manifestations, for the foreseeable future.

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## Appendix

*Presented here are plot summaries or relevant partial plot summaries of recent psychiatric movies watched by the long-time film enthusiast author in preparation for the writing of this paper. These and other films seen and mentioned within are listed only briefly in the Bibliography.*

### **Movies**

*Agnes of God.* Dir. Norman Jewison. Columbia Pictures, 1985.

A Canadian Catholic nun with an innocent, sheltered personality - Agnes - gives birth and is suspected of killing her baby. Psychiatrist Dr. Martha Livingstone is appointed by the courts to assess her sanity. Initially hardened and sceptical, Dr. Livingstone gradually softens her attitudes to get to the bottom of the mystery.

*Analyze This.* Dir. Harold Ramis. Warner Brothers, 1999.

Fearsome New York City Mafia boss, Paul Vitti, visits psychiatrist, Dr. Ben Sobel, in the hope of solving his anxiety attack problems. Very persistent and “persuasive”, Vitti soon acquires the initially reluctant and annoyed Dr. Sobel’s devoted assistance. After many psychoanalysis sessions in the most unlikely of places, Vitti is cured and lavishly shows his appreciation to his ever-edgy doctor.

*An Angel at my Table.* Dir. Jane Campion. New Zealand Film Commission, 1990.

Falsely diagnosed with schizophrenia in the 1940s, introverted and shy (but talented) New Zealand writer Janet Frame spends much of her next eight years in mental hospitals, undergoing a variety of painful and distressing treatments at the hands of highly misguided, even uncaring, psychiatrists.

*Awakenings.* Dir. Penny Marshall. Columbia Pictures, 1990.

Based on a true story from the late 1960s, introverted Dr. Oliver Sacks, strangely renamed Dr. Malcolm Sayer for the purposes of this film, is placed in charge of a New York City hospital’s catatonic patients ward. Using radical physical exercise and drug therapies, Dr. Sayer is able to revive all his patients for a while and watch as they temporarily re-experience all the joys life has to offer.

*Batman Forever.* Dir. Joel Schumacher. Warner Brothers, 1995.

Batman, superhero of Gotham City, must deal with two insane super-villains: one with a severely split personality (Two-Face), and the other with an obsessional syndrome with homicidal tendencies (The Riddler). Assisting him is glamorous

psychiatrist Dr. Chase Meridian who falls in love with both Batman and his alter-ego billionaire Bruce Wayne. Batman/Bruce Wayne must also come to terms with his own split identity.

*Bram Stoker's Dracula.* Dir. Francis Ford Coppola. Columbia Pictures, 1992.

A sub-plot in this film based on Bram Stoker's classic novel revolves around the activities of well-meaning, but hopelessly underfunded Dr. Jack Seward in his late 1890s British lunatic asylum. One of his patients is Renfield, the lawyer who first visited Count Dracula, but failed to leave with his sanity intact. Dr. Seward soon learns that there is some truth in Renfield's ramblings.

*Communion.* Dir. Philippe Mora. MCEG Productions, 1989.

Troubled New York writer Whitley Strieber undergoes regression hypnosis at the hands of a psychiatrist, only to find that he has had various space alien abduction experiences. Later, he visits an associated support group led by a psychiatrist and meets and shares his experiences with others who have been allegedly abducted in the same way.

*The Dream Team.* Dir. Howard Zieff. Universal Pictures, 1989.

Kindly psychiatrist Dr. Weitzman takes four of his long-term mental hospital patients to New York City to watch a ball game. The doctor disappears, and his delusional, unpredictable patients are left to fend for themselves, find their doctor, and try to come to terms with the lives they left behind upon entering the hospital.

*Final Analysis.* Dir. Phil Joanou. Warner Brothers, 1992.

San Francisco psychiatrist Dr. Isaac Barr falls in love with the sister of one of his psychoanalysis patients. When his lover is arrested for the murder of her husband, Dr. Barr uses a psychiatric defence to commit her to a mental hospital rather than jail, only to find that both she and her sister are both scheming, greedy women with plenty of present and future criminal intentions.

*Girl, Interrupted.* Dir. James Mangold. Columbia Pictures, 1999.

Directionless high school graduate Susanna Kaysen is persuaded to commit herself voluntarily to a nearby mental hospital in 1960s America. Through mainly negative institutional experiences of varying degrees of unpleasantness, she reforms her personality and is released after having found herself both intellectually and emotionally.



*Hamlet*. Dir. Kenneth Branagh. Columbia Pictures, 1996.

In this full-text, four hour version of Shakespeare's most famous play, Kenneth Branagh expertly portrays the psychologically tormented Prince of Denmark. Elaborate, innovative set design and a supporting cast of superb British and American actors bring to life the many scenes containing psychiatric implications as never before.

*Heavenly Creatures*. Dir. Peter Jackson. Miramax Films, 1994.

When working class schoolgirl Pauline Rieper becomes too involved in her friendship with her upper class classmate Juliet Hulme in Christchurch, New Zealand, in the 1950s, her mother takes her to a general practitioner with some expertise in child psychiatry, Dr. Bennett. After briefly questioning the antagonistic Pauline, the doctor diagnoses homosexuality as the girl's "mental disorder", much to the horror of her mother (who would later be murdered by Pauline and Juliet).

*Holy Smoke*. Dir. Jane Campion. Miramax Films, 1999.

Australian backpacker and new Indian cultist Ruth Barron, is lured back to her home country under false pretenses by her worried family acting on the advice of a psychiatrist. Ruth is forced to spend three days with a cult deprogrammer whom the psychiatrist flew in from the USA. After a long battle of wills, Ruth is deprogrammed, but not before she deprograms the deprogrammer of some of his beliefs as well.

*House on Haunted Hill*. Dir. William Malone. Warner Brothers, 1999.

Sadistic Dr. Vannacutt, head of a 1930s Californian asylum for the criminally insane, and his staff are brutally murdered when the inmates escape and go on a homicidal, destructive rampage one night. Several decades later, their ghosts plague a small number of overnight visitors to the now disused building as they explore the remnants of psychiatry at its worst.

*Intruders*. Dir. Dan Curtis. Twentieth Century Fox, 1992.

Several American women are found to have experienced abductions, rapes and pregnancies at the hands of space aliens after undergoing regression hypnosis sessions with a caring psychiatrist. Further detective-like investigations by the psychiatrist adds even greater credibility to the women's stories.

*The Madness of King George.* Dir. Nicholas Hytner. Samuel Goldwyn Company, 1994.

In the late 1780s, Britain's always eccentric King George III goes mad and plunges the government into crisis. He is eventually cured by the unorthodox mind doctor and ex-clergyman, Dr. Willis who uses a combination of radical psychological and physical treatments to get rapid results.

*Prince of Tides.* Dir. Barbra Streisand. Columbia Pictures, 1991.

Southerner Tom Wingo visits the New York City psychiatrist of his suicidal sister in the hope of providing useful information to aid in her treatment. The psychiatrist, Dr. Susan Lowenstein, soon realises Tom needs plenty of psychoanalytic help. Gradually, she solves his problems of repressed anger and distress and they fall in love. Tom's sister gets better too and Tom returns to his family a better man.

*Quills.* Dir. Philip Kaufman. Twentieth Century Fox, 2000.

The Marquis de Sade, infamous French philosopher and pornographer, is imprisoned at Charenton Asylum as a lunatic at the beginning of the nineteenth century. His doctors unsuccessfully attempt to convince him to turn to the path of "righteousness" by non-physical means, before resorting to far worse and very physical corrective measures. In doing so, one doctor becomes insane himself.

*Restoration.* Dir. Michael Hoffman. Miramax Films, 1995.

In an important subplot to this film set in Britain in the 1660s, Dr. Robert Merivel joins his old friend Dr. John Pearce at a Quaker-run mental asylum in the countryside. After showing disapproval at the Quaker's methods, Dr. Merivel provides some innovative (and generally more humane) alternatives.

*Shakespeare in Love.* Dir. John Madden. Universal Pictures, 1998.

In one early expository scene, William Shakespeare visits the highly anachronistic Dr. Moth, psychoanalyst and "interpreter of dreams". The playwright relates the problems of his love life to the doctor who sells him a magic bangle to give to his desired lover. The bangle never works and just causes trouble later in the film. Dr. Moth is not seen again.

*Shine.* Dir. Scott Hicks. Fine Line Features, 1996.

The "true" story of Australian David Helfgott, a child piano playing prodigy who cracked under the strain of an overbearing father, but retained his talent as a mentally impaired adult. Attempts to save his mental functions using ECT did him far more harm than good.

*The Silence of the Lambs*. Dir. Jonathan Demme. Orion Pictures, 1991.

An inexperienced FBI agent is instructed by her superiors to seek help on a baffling case of serial killings from the imprisoned psychotic murderer ex-psychiatrist Dr. Hannibal “The Cannibal” Lecter. He plays many mind games with her and has his own agenda, but eventually leads the authorities in the right direction.

*The Sixth Sense*. Dir. M. Night Shyamalan. Buena Vista Pictures, 1999.

Award-winning Philadelphia child psychologist Malcolm Crowe takes on the case of a seriously troubled young boy. He discovers that the boy, Cole Sear, sees dead people who do not know they’re dead and want the living to preform a service for them so that they can be at peace. Crowe initially seriously recommends psychiatric hospitalisation, but Cole soon learns to live with his “sixth sense”. Through his experiences with Cole, the psychologist finds out a surprising truth about his own life.

*Titanic*. Dir. James Cameron. Twentieth Century Fox and Paramount Pictures, 1997.

In a key scene fairly early into the film, the *Titanic* ocean liner is likened to a Freudian phallic symbol by the lead character. Her debatably humorous sarcasm is only understood by some of her fellow characters, but, almost always, has been affectionately laughed at and thus understood by most of the audiences with which the author has seen this film.

### **Interactive Movies**

*Phantasmagoria: A Puzzle of Flesh*. Designer Lorelei Shannon. Dir. Andy Hoyos. Sierra On-Line, 1996.

One year after he was discharged from a brutal mental asylum, Seattle resident Curtis Craig once again experiences “psychotic episodes”. He tries to come to terms with his condition with the help of a kindly psychiatrist, Dr. Rikki Harburg, while avoiding his evil former doctor, Dr. Marek.

*Tender Loving Care*. Designer Rob Landeros. Dir. David Wheeler. Aftermath Media, 1998.

Kathryn Randolph, an independently-minded psychiatric nurse, visits troubled Allison and Michael Overton in rural Oregon. She seeks to bring about a change in Allison’s denial that her daughter, Jody, was killed in a car crash at which Michael was at the wheel. Michael, desiring to keep his wife in her dazed, dependent state as penance for “killing” Jody, frequently quarrels with Kathryn over her somewhat unorthodox treatments. He also argues with psychiatrist Dr. Turner for recommending her services.

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*The Sixth Sense*. Dir. M. Night Shyamalan. Buena Vista Pictures, 1999.

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