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INTRODUCTION: MENTAL TV. CHANGING THE NARRATIVE OF MENTAL DISORDERS ON TELEVISION

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1. INTRODUCTION

Over the past fifteen years, fictional representations of mental disorders in television series have increased significantly and received widespread international attention (Orm et al. 2023, Vidal-Mestre et al., 2024, Paiva et al., 2024). As a medium integrated into all our daily lives like no other, this increase is not only relevant in terms of the fictional narratives these shows tell, but also in how they shape their viewers' critical understanding of the characters and mental states represented in them. In 1995, Otto Wahl has already observed that:

Depictions of mental illness ... are pervasive and consistent in the stereotypes they present. There is every reason to expect that they ... will shape the public's views, and that consumers of mass media will come to see people with mental illnesses as they are depicted in the media. (Wahl 1995, 92)

Historically, productions have capitalised on the *otherness* of mental disorders, presenting characters as either comedic misfits unworthy of serious consideration or as erratic, threatening, and violent antagonists. The majority of entertainment media –including television, social media, film, and video games–, still draw on negative stereotypes and stigmatising imagery when engaging with mental disorders. Yet the recent surge of shows about protagonists with mental disorders in television has reshaped these stereotypes, at times by adding new connotations to previously solely negative aspects. This can be partly explained by growing cultural demands from both audiences and creators to move beyond one-dimensional and sensationalist portrayals.

In this special issue, we focus on examples in which contemporary shows and serials introduce new character types and narrative arcs, placing characters with mental disorders at centre stage rather than the fringes of the plot. Our aim is to explore how these series represent and narrate non-normative mental states, and what effects such productions have on viewers and the cultural narrative of mental disorders. With this dual focus on aesthetic, narrative, and formal shifts in contemporary television, as well as the potential social and cultural influence of these productions, we, together with the contributors to this issue, wish to pay tribute to the changing narrative of mental disorders on screens internationally. Television's medium-specific attributes, its longevity and seriality, have given rise to new modes of representing and narrating mental states that fall outside a culturally per-

ceived norm. Far from merely exchanging a neuro-normative for a neurodiverse protagonist, contemporary TV series have pushed the medium's conventions of visual and narrative storytelling. Here too, we have every reason to believe that these alternative, more nuanced representations of neuro-non-normativity in contemporary television will shape the public's views and understanding of mental disorders.

2. A NEW AUDIOVISUAL LANGUAGE FOR MENTAL DISORDERS

To capture the volatile subjective experience of mental disorders, contemporary television series have abandoned time-honoured visual and narrative tropes of the comic relief or the dangerous *other*. No longer reduced to their non-normativity, characters break free from the narrative confines of their mental states. The opening up of audiovisual conventions of representing mental disorders has reified in larger shifts in televisual storytelling, establishing a reciprocal encouragement of diversifying the narratives audiences can see on screen. What has been called “quality TV” (McCabe 2010), “Must-See TV” (Lotz 2007), “complex TV” (Mittell 2015) or, tellingly, “batshit TV” (Mittell 2022) is a form of storytelling in which alternative modes of narration, new forms of visualisation, and cultural negotiation meet.

Characters with mental disorders have often been functionalised as a means to elicit audience anxiety in crime dramas (e.g., *Criminal Minds* [CBS, 2005–]; see also Stuart 2024, 35) or to awe neuro-normative viewers with unthinkable feats, as characters' non-normative mental states endow them with special talents or savant powers (e.g., *Sherlock* [BBC, 2010–2017], *Hannibal* [NBC, 2013–2015], *The Good Doctor* [ABC, 2017–2024]; see also Beirne 2019). Moving beyond generic categorisations, characters with a mental disorder are now increasingly part of different types of TV programmes: they may be the lead singer of a musical, as in Rachel Bloom and Aline Brosh McKenna's *Crazy Ex-Girlfriend* (The CW 2015–2019), or the star of a stand-up comedy show that is their life, as in Raphael Bob-Waksberg's *BoJack Horseman* (Netflix 2014–2020) and Richard Gadd's *Baby Reindeer* (Netflix 2024). These series defy genre conventions while also inviting viewers to rethink the expectations and assumptions they tacitly bring to these series – not only pertaining to the plot but also about characters' mental states.

Far from yet another functionalisation of non-normative mental states to aestheticise and dramatise non-normativity,

these modes of representation aim to make characters' subjective experiences accessible to viewers. It is not an effort to externalise symptoms and conditions, but to invite viewers into characters' internal worlds and minds. This endeavour also lies at the heart of an increasing number of series that introduce variations to serial narration and conventional narrative structures. Merging episodic with serial structures, shows such as Brian Yorkey's *13 Reasons Why* (Netflix 2017–2020), Cary Joji Fukunaga and Patrick Somerville's *Maniac* (Netflix 2018), and Joseph Gordon-Levitt's *Mr. Corman* (Apple TV+ 2021) offer viewers episodic glimpses into characters' mental states while advancing an overall narrative.

In this, these series eschew reducing characters to an embodiment of their mental states and conflating their conditions with their personality. Although the means differ, shows, such as Sam Esmail's *Mr. Robot* (USA Network 2015–2019) and Noah Hawley's *Legion* (FX 2017–2019) achieve the same effect in that they immerse viewers in the protagonists' subjective worlds and taking them “on an experiential journey” (Mittell 2022, 265; Kreitler 2025). This journey is further extended through the use of shifts in narrative focalisation, as exemplified by Netflix's *Everything Now* (2023). Such narrative choices stand testament to these shows' commitment to portraying mental disorders as a complex, shared experience that affects individuals and families alike, rather than confining it to a single character.

Not limited to purely aesthetic or formal considerations, some TV shows demand to be considered from an intersectional perspective. Addressing the entanglement of various identity categories, including race, class, gender, and sexual orientation, shows, such as Donald Glover's *Atlanta* (FX 2016–2022) and Sam Levinson's *Euphoria* (HBO 2019–) seamlessly embed discussions of mental states in their plots, presenting them as part of the human condition that defies reductive binaries and simplistic categorizations. It is this advancing pluralisation and diversification of characters, narratives, aesthetics, and forms of storytelling that we see as emblematic of what we call “Mental TV”. Television's artistic and creative potential to reinvigorate perception of and reflection about the cultural narrative of mental disorders.

3. FROM POP CULTURE TO CULTURAL DISCOURSE

Whether we ascribe an educational mandate to television, or whether we see it as pure entertainment – we cannot deny

that its tropes and narratives have a significant impact on how we all perceive and conceive of the world around us. As Neil Postman aptly puts it:

Television is our culture's principal mode of knowing about itself. Therefore —and this is the critical point— how television stages the world becomes the model for how the world is properly to be staged. It is not merely that on the television screen entertainment is the metaphor for all discourse. It is that off the screen the same metaphor prevails. (2005, 92)

Taking Postman's admonition seriously, the pluralisation and diversification of characters, representations, and narratives about mental disorders on TV could move beyond being a trend or tendency in serial narration. Presenting audiences with complex characters, alternative narratives and forms of narration, and situating mental disorders as part of – and not apart from – society, these shows contribute to a gradual normalization of non-normative mental states in media and beyond.

At the same time, and as Susan Sontag has cautioned in 1978, metaphors, and especially metaphors about illness, come with a price: “The disease itself becomes a metaphor. Then, in the name of the disease (that is, using it as a metaphor), that horror is imposed on other things” (1978, 60). Certain mental disorders – particularly schizophrenia, bipolar disorder, and dissociative identity disorder – are represented excessively in fictional narratives, often in sensationalised or misleading ways. By contrast, conditions such as depression, panic disorder, and social anxiety disorder have become culturally ‘accepted.’ Disorders such as Obsessive-Compulsive Disorder (OCD) and certain forms of high-functioning autism (level 1) have become normalised through popular psychology and their framing as symptomatic of broader neoliberal pressures. While these representations often aim to elicit empathy, they also reinforce a hierarchical structure in which some mental disorders are rendered intelligible, relatable, and even valorised, and others continue to be pathologised, stigmatised, and socially marginalised (see also Elsaesser 2021, 98).

This special issue brings together authors whose work foregrounds television series that resist the commodification and appropriation of mental disorders, instead encouraging viewers to reconsider their assumptions about non-normative mental states. Their contributions chart a path forward by emphasising the medium's potential to shape and transform

cultural discourse around mental health. In the six articles featured in this issue, the contributing authors explore a diverse array of genres – including animated series, horror dramas, and domestic noir – and international productions that challenge Western-centric narratives. Together, they offer a critical and multidimensional analysis of how mental disorders are represented, narrativised, and reimagined within contemporary screen cultures.

4. IN THIS ISSUE

Responding to contemporary TV series formal and aesthetic innovations, the issue opens with Eric Dewald's article on *BoJack Horseman*, which analyses how animation enables a sophisticated depiction of psychological distress. Dewald argues that the show's high serialisation, animated style, and anthropomorphic characters create an aesthetic distance that allows viewers to engage with non-normative experiences otherwise inaccessible to them. Scribbled overlays, surreal dream sequences, and visual metaphors externalise characters' internal psychological states without reverting to sensationalised representations common in live-action productions. According to Dewald, *BoJack Horseman* does not attempt to offer clear solutions to mental disorders, but embraces human struggles and their complexities through a distinctive blend of visual creativity.

Moving from animation to horror series, Ahmad Hayat's article examines how U.S. slasher series, such as *Bates Motel* (A&E) and *Scream: The TV Series* (MTV), use serialised storytelling to explore mental disorders like Post-Traumatic Stress Disorder (PTSD) and Dissociative Identity Disorder (DID). Hayat argues that the genre's targeting of cable television has given rise to psychologically complex characters whose conditions are not a fixed aspect of their personality but evolve over time. These series integrate mental health as a central element of both character development and thematic exploration, evident in their plots and narrative structures, which feature hallucinations, flashbacks, and dream sequences. While recognising the enduring presence of genre tropes and sensationalism, Hayat contends that such portrayals embody a tension between creative intentions and institutional demands, especially branding strategies designed to appeal to socially conscious audiences. Slasher series, then, function both as entertainment and subtle vehicles for exploring the enduring effects of psychological distress within serialised formats.

It is not only aesthetic concerns that TV programmes pick up on. Turning to the gendered dimensions of mental disorders, Katharina Hendrickx investigates how Netflix's *The Woman in the House Across the Street from the Girl in the Window* parodies domestic noir and thereby critiques the genre's entrenched negative stereotypes about women's psychology. Drawing on Gothic conventions, such as the mad-woman, the unreliable narrator, and the haunted domestic space, Hendrickx examines how the series both reinforces and satirises portrayals of female trauma. The protagonist's fragmented narration – marked by hallucinations, memory lapses, and emotional confusion – aligns her with traditional Gothic protagonists. While these narratives are often seen to centre around female trauma, they simultaneously commodify it, reducing complex psychological experiences to formulaic tropes. The show's self-awareness creates space for critical reflection on the politics of believability, narrative control, and the representation of women's suffering.

As a complementary reading, Anna Caterino evaluates the entanglement of gender and mental disorders through the lens of masculinity in *The Winchesters*. Rather than relying on graphic war reenactments, the series uses subtle cues to convey trauma and visualise the protagonist's PTSD as an ongoing lived experience rather than a dramatic plot twist or villainous trait. Caterino underscores how the show explores intersecting traumas, including familial abandonment and childhood abuse, situating them within a broader multi-generational cycle of harm. Contrasting masculine vulnerability with typical 'tough guy' archetypes, the series resists the notion of linear healing by portraying a protagonist who remains engaged in the process of coping.

The final two articles broaden the geographical and cultural scope of the issue by focusing on Indian and Korean television. Narrowing in on Indian 'over-the-top' series, Neha Singh analyses the inconsistent depictions of mental health across Indian broadcast television and streaming platforms. The article argues that, although OTT platforms have allowed for more realistic portrayals, particularly of non-psychotic disorders like anxiety and depression, classical television series still rely on melodramatic tropes and stigmatising stereotypes. These negative portrayals are shaped by India's socio-historical context, including colonial psychiatric legacies and recent legal reforms, such as the Mental Healthcare Act from 2017. The article presents a narrative and cultural analysis of sixteen Hindi-language series, highlighting how psychotic and developmental disorders are often sensationalised or romanticised. Based on this review, Singh advocates

for televisual approaches that are both culturally sensitive and intersectional, emphasising their potential to enhance awareness and challenge entrenched stigmas.

The final article of this issue by Min Joo Lee moves the discussion to Korean dramas and their representation of caregiving dynamics. Focusing on three series – *It's Okay, That's Love* (2014), *It's Okay to Not Be Okay* (2020), and *Extraordinary Attorney Woo* (2022) – Lee examines how these dramas challenge the dominant caregiver/care-recipient binary by portraying protagonists with disorders as emotionally and psychologically capable individuals. While these series reposition neuro-non-normative characters as active agents in their own narratives, Lee also critiques the continued reliance on time-honoured tropes. For one, romantic love is often portrayed as a cure, and maternal blame persists as a recurring element. For another, all protagonists are highly accomplished professionals, which implies that societal acceptance depends on productivity and success, thereby reinforcing neoliberal ideals. Despite these limitations, Lee concludes that Korean dramas hold significant potential as tools of public education and cultural transformation.

With this issue, we hope to provide an overview of the changes and emerging shifts in representations of narrativisation of mental disorders in television series, moving beyond binary valorisations of 'good' or 'bad' or 'realistic' and 'fictionalised' portrayals. Representation is not a zero-sum game, and, as all contributions show, there is no single way of engaging with highly individualised, subjective, and idiosyncratic lived experiences of neuro-non-normativity. As the various productions discussed in the contributions show, television creators have embraced the creative and artistic potential of engaging with the world differently in order to tell different stories, but also stories of difference. It is in this shift, from *othering* mental disorders to acknowledging their difference as part of being human, that we see the social, cultural, and political potential of Mental TV. To return to Wahl's (1995) words once more, we can only hope that, here too, these reimaginings of mental disorders "will shape the public's views, and that consumers of mass media will come to see people with mental illnesses as they are depicted in the media" – as complex individuals who are more than their mental states.

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EXPLORING MENTAL DISORDERS IN THE SERIAL DYNAMICS OF SLASHER SERIES ON CABLE TV

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Horror television; mental disorder on television; mental TV; TV narratives; television programming

ABSTRACT

This article examines the industrial conditions that inform contemporary representations of mental disorders in cable slasher television series. Drawing upon interviews

from third-party sources with network showrunners and executives, the paper illustrates the role of serialization in shaping mentally ill characters and the ways in which certain narrative strategies, particularly pertaining to character development, are employed to explore their perceptions and rationalize their behaviors. With a focus on two case studies, A&E's *Bates Motel* (2013–2017) and MTV's *Scream: The TV Series* (2015–2016), the inspection suggests that the shows provide depictions to address their producing institutions' audience-targeting objectives and therefore propose the significance of seeking mental care for such conditions.

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1. INTRODUCTION

Slasher television series, a mainstay on contemporary American cable television, is exploiting certain mental disorders to support the complex development of the main characters. These narrative approaches function to distinguish programming schedules by utilizing such conditions for the audience-targeting purposes and institutional priorities of some cable networks. Such storytelling practices also reinforce serialization as a core constituent of many primetime series programs to potentially keep audiences invested for multiple seasons. In the process, they explore what the characters experience, highlight their symptoms, and link their perceptions to specific narrative events to justify their behaviors and evolution throughout the narrative. These storytelling procedures contribute to the construction of dynamic mentally ill characters.

Slasher horror dramas are produced by an expansive number of cable networks, positioning them as indispensable cultural products to the competitive television landscape. Examples include FX's *American Horror Story* (2011–), A&E's *Bates Motel* (2013–2017), MTV's *Scream: The TV Series* (2015–2016) and *Scream: Resurrection* (2019), USA's *The Purge* (2018–2019), and NBC's *Chucky* (2021–). Within this diverse set of programs, there are shows that manipulate the representation of mental disorders to lure specific audience segments that are deemed lucrative for their institutional objectives. These networks make assumptions about their viewers, and as a result, manipulate certain narrative features and employ characters in a way that could address these socially relevant issues.

Research concerned with television depictions of mental illness showcase that portrayals have historically stereotyped the condition with characters mostly restricted to lower socioeconomic groups and formed as victims of abuse (Elliot and Byrd 1982). These characters are typically depicted as violent, and this stereotyped construction lingered as a norm on television. Donald L. Diefenbach's (1997) content analysis of American television displays that characters with a mental illness were ten times more violent than other characters on television. More recently, a study conducted by Scott Parrott and Caroline T. Parrott (2015) highlights that representations in contemporary American crime dramas have limitedly progressed. The physical appearances of characters with mental illness have evolved but their behaviors remain violent with one in two mentally ill characters acting violently. These inquiries pay close attention to the development of specific

depictions without offering a thorough interpretation of the industrial context that enables these evolving portrayals. Contemporary narrative design conditions are influencing character representations on television and although violence remains to be associated with depictions of mental illness, depending on the focus of the narrative, there are nuances to their portrayals and the narratives investigate the various facets of a character's personality to justify these violent acts. These complex character formulations are facilitated by a competitive television landscape that supports the commissioning of programs that provide portrayals that can be deemed original and distinguishable from the clutter of available programs.

Scholars investigating series commissioning on cable television argue that contemporary shows focus on offering complex characters that are morally ambiguous and manifest dubious characteristics (Mittell 2015, Smith 2019b). Their studies focus on the protagonists of these shows without offering a thorough interpretation of the ways in which the narrative canvas of contemporary complex series provides opportunities for the creation of complex antagonists, especially killer characters in horror dramas. Trisha Dunleavy asserts that,

It is in the context of this enlarged canvas that some specific elements of complexity come to the fore as ways to stimulate and sustain the kind of intense audience engagement that non-broadcast networks are seeking through the offer of this drama. (2017: 105).

This expanded narrative canvas, afforded by an emphasis on serialization with an aim for series longevity, introduces possibilities for devising a variety of characters. Although Ahmad Hayat (2022) investigates the complex features of the killers in contemporary slasher series programs, the interpretation focuses on the thematic meanings that the shows propose and the extent to which the developments promote viewpoints about social issues such as teenage accountability and incest. Despite the study's mention of dissociative identity disorder (DID) and post-traumatic stress disorder (PTSD) that the characters experience, they are understated because the examination is concerned with illustrating how the dynamic construction of the killer characters function to support the networks' brand identities. This article builds on this interpretation by focusing on how these mental conditions are explored and utilized to complement the designs of contemporary slasher series on cable television. The explora-

tion demonstrates that slasher series on cable television has the capacity to represent mental states in ways that could magnify the significance of these conditions to the sensitive millennial audience that networks seek to address, pinpointing the audience-specificity that Anthony N. Smith (2019b) upholds as fundamental to the narrative design conditions of production institutions. Smith explains that,

Due to increased processes of audience segmentation within media cultures in the late twentieth century, which broader patterns of societal fragmentation partly drove, it is especially important to account for the specificities of intended audiences when mapping narrative design conditions over recent decades" (2019b: 38).

These conditions, as will be discussed later in the article, motivated television networks to target niche audience groups instead of aiming for heterogeneous viewers. This examination exhibits how these niche targeting objectives inform the creation of shows that provide in-depth explorations to construct rationalized depictions that depart from the conventional stigmatized portrayals of characters with mental disorders, which have historically typified horror representations, and illustrates how the emphasis on serialized storylines pave the way for the implementation of scenes that convey their feelings and perceptions and contribute to their complex formation.

A&E's *Bates Motel* and MTV's *Scream: The TV Series* are the focus of this essay's assessments. Both shows are notable exemplars of slasher series commissioned for the basic cable sector and represent the audience targeting practices of their producing institutions. The premiere of *Scream: The TV Series* in 2015 marked the show as the most watched on MTV and functioned to lure the network's 12–34 preferred demographic (Maglio 2015). *Bates Motel*, however, set a premiere record for A&E and was able to attract the network's coveted 18–49 and 25–54 audience groups (Brown 2013). To illustrate how the shows explore mental conditions, the analyses focus on the narrative strategies that are manipulated to rationalize and develop character behavior. Specifically, I examine the arcs of the characters to identify the scenes that contribute to the exploration of their mental states. Additionally, I integrate interviews from third-party sources with show creators and executives to highlight the link between the narrative choices and the objectives of the producing institutions and illuminate how the niche audience-targeting strategies in-

form the characteristics and development of characters with mental disorders.

These representations are made possible by the industrial changes that have materialized in the television landscape. Certain technological advancements have contributed to contemporary innovations in storytelling practices. The next section details these developments and their role in the facilitation of serialization as a narrative occupant increasingly formulated in contemporary scripted programming. It also foregrounds how these industrial modifications pave the way for network brand distinction and audience niche-targeting, informing the narrative features and mental disorder exploration.

2. CONTEMPORARY SERIALIZATION & NICHE PRIORITIZATION

Amanda D. Lotz argues that, "Television as we know it—understood as a mass medium capable of reaching a broad, heterogeneous audience and speaking to a culture as a whole—is no longer the norm in the United States" (2014: 2). Changes to the medium resulted from specific technological alterations that fragmented the heterogeneous audience that networks and advertisers were comfortable reaching. These developments facilitated the modification of programming formats as networks began to focus on building niche audience groups and adapting to the competitive environment.

Until the mid-1980s, television was characterized by certain norms that dictated programming practices (Lotz 2014). Viewers had a narrow choice of program options and the dominant big three networks, ABC, CBS, and NBC pursued the widest possible audience. Such conditions informed the production of a narrational mode that emphasized the episodic over the serialized. These shows offered episode-specific dilemmas that are resolved by the end of the episode with characters returning the following week without any recollection of past events. The economic allure of syndication motivated this static form of characterization, facilitating the out of order airing of episodes on affiliates and other networks.

However, the introduction of linear and nonlinear cable networks restructured the television landscape, forming what Lotz (2014) labels the multi-channel transition era. During this period, which lasted until the early 2000s, the emergence of new broadcast and cable channels expanded audience choice and control over what to watch. Viewers were no longer relying on the big three networks to access content.

Instead, they were inclined to choose from a variety of networks.. These industrial modifications further fragmented audiences, prompting narrative designers to gradually incorporate serialized elements into their series designs to keep audiences invested in their shows. Jason Mittell clarifies,

As the number of channels has grown and the size of the audience for any single program has shrunk, networks and channels have grown to recognize that a consistent cult following of a small but dedicated audience can suffice to make a show economically viable (2006: 31).

At the center of these serialization attempts is the emphasis on character complexity, featuring as a staple of contemporary shows and functioning as a serviceable component for series longevity. With a focus on conflict continuation, character investment began to permeate series programming. Michael Z. Newman explains that this emphasis contributed to character development and asserts that, “Continuing stories make characters more likely to undergo significant life events and changes. In reaction to these changes in circumstances the characters themselves are more likely to change or at least grow” (2006: 23). This paper’s examination showcases how character change and growth materialize, especially in the case of characters with mental disorders, to build dynamic mentally ill characters and serve the objectives of the producing institution and form a cohesive serialized narrative. To achieve this analytical objective, a thorough reading of the character arc is conducted for the extraction of instances that highlight their perceptions or contribute to the development of their mental states. As defined by Newman, “An arc is a character’s journey from A through B, C, and D to E” and “Character arcs may stretch across many episodes, seasons, and the entirety of a series” (2006: 23). It is through these character arcs that viewers are invited to perceive the storyworld and comprehend the characters’ decision-making process to justify their actions and behaviors.

Along with these serialization efforts, the fragmentation of viewers encouraged networks to define their brands and develop niche-targeting strategies. Networks began distinguishing themselves through their brand identities and developed shows that are specifically designed to address their niches. Rogers, Epstein, and Reeves define this as the era of TVIII and note that, “where TVI was the age of mass marketing, and TVII was the age of niche marketing, TVIII, at least at this juncture, must be considered the age of brand

marketing” (2002: 48). Such branding initiatives motivated the introduction of niche-specific networks. For instance, cable networks like Lifetime and WE specifically pursue women as their main audience segment by developing programs that are female-centric. Others redefined their brands and programming schedules to lure certain generations, which is highlighted in MTV’s attempts in targeting their teenage audience groups and USA’s generational studies that focus on understanding millennials (Hayat 2022, Smith 2019a). These modifications are reflective of the institutional audience-specificity that Smith (2019b) describes as a building block for contemporary narrative design conditions. Institutions, Smith argues, could “intend a narrative text for, say, a specific class, gender, sexuality, race, ethnicity, and/or age group within a given national market or across multiple nations” (Smith 2019b: 38). Such audience-specific considerations inform storytelling practices, character construction, and social issue explorations.

With network branding and audience-specificity being central to program conceptualization, networks are prompted to make assumptions about their niche audience groups as they formulate their productions. The millennial generation, which is at the forefront of many targeting strategies because of the group’s spending power, is a prominent segment for the cable sector. Smith asserts that “Entertainment cable channels, because of the prevailing understanding of millennials as desiring content concerning social causes, are incentivized to brand themselves, not as enablers of escapism, but as providers of socially aware programming” (2019a: 455). This led some networks to conduct audience research to better understand the perceptions and preferences of their viewer segments and as Ahmad Hayat notes, “these studies are meant to help the network evaluate their content in light of the concerns of their target audience” (2022: 106). However, different networks, as the analysis will illustrate, because of their brand identities, overall programming strategies, and corporate positioning perceive their audiences distinctively and their characters are designed accordingly.

To interpret how the portrayal of mental disorders is linked to the producing institution’s audience-targeting approach, this article inspects the arcs of the main characters and draws upon interviews with executives and showrunners to unravel the process of constructing complex mentally ill characters, detail how the emphasis on serialization facilitates these storytelling procedures, and demonstrate that certain niche-targeting strategies inform the character designs and conveyances of contemporary slasher series

programming. Dunleavy (2017) argues that the industrial restructures and the increase of complex storytelling strategies formed a model of complex seriality that entails characteristics that reflect the ambitions of cable networks by utilizing six narrative strategies that are intended to differentiate their portrayals from broadcast offerings. These are conceptual originality, series-like problematic, unusual integration between the dilemma of the central characters and the overarching story, the deployment of morally conflicted lead characters, the embedding of additional scenes, and the in-depth psychological investigation of lead characters (2017: 105). This article borrows the embedding of additional scenes and analyzes how it is manipulated to depict mental disorders and build characters in cable horror dramas. However, the examination provides a narrower approach to the strategy, reconceptualizing how it is employed in contemporary horror dramas. Even though the strategy is a constant feature of a form that Dunleavy defines as complex seriality, it is also utilized in horror dramas that fall under the category of complex series, a model that unlike Dunleavy's complex seriality shows, is geared towards featuring episodic and serialized elements for advertiser purposes and both casual and devoted audience commitments.

The adopted concept from Dunleavy's evaluation, embedding of additional scenes, serves to clarify character motivation. Dunleavy explains that, "As scenes that usually interrupt rather than progress the overarching story, they provide details that support the understanding and/or investigation of key characters" (2017: 113). In horror dramas, these scenes not only display character motivation, but also facilitate the revelation of narrative data that contributes to the discovery of character perspective and event ramification for comprehension purposes. In many instances, they operate as hallucinations, flashbacks, or dream sequences that highlight specific incidents or illuminate a character's mental state. While doing so, these scenes function to support the development of characters, provide explanations for certain behaviors, and justify actions.

3. COPING WITH PTSD ON MTV

Because MTV is a network that is devoted to offering programs that accommodate teenagers and young adults, they constantly reexamine their programming strategy to ensure that it is sufficient with storylines and issues that have the potential to attract the generation that the network seeks to

appeal to at a certain point of time. As a result, the network conducts generational studies to understand its audience base and develop programs accordingly. This reinvention activity is a reoccurring procedure for MTV. According to the network's president Stephen K. Friedman, "Unlike other brands that get a lock on the audience and age with them, we have to shed our skin and reinvent ourselves" (Chozick 2021). When the network decided to address the millennial generation in 2008, they embarked on a research project to better understand the generation's personality. This research approach continued to inform their decision-making regarding original commissions, influencing the production of *Scream: The TV Series* in 2015.

Set in the small town of Lakewood, the show follows a group of high school teenagers and their troubled relationships. It specifically focuses on Emma Duval, the show's protagonist and survivor of the town's killing spree. Lakewood was agonized by a series of murders that were committed by a masked killer who targeted Emma and her friends and whose identity remained unknown until the season finale. After being exposed to multiple horrific murder scenes and experiencing the loss of loved ones, Emma's mental health gradually deteriorated. This was further emphasized in the first season's finale where she discovered that the killer was her own sister, Piper Shaw, and that her mother, Maggie, had abandoned Piper and kept it as a secret to protect Emma from knowing the family's disturbing past, which was a love story between Maggie and Piper's father, a disfigured serial killer who snapped after being constantly bullied by other schoolmates. Although the revelation shocked Emma, she had to protect herself and her mother from Piper's attack. Therefore, in self-defense, Emma killed Piper, but the incident impacted her mental health and caused her to take a three-month mental retreat away from Lakewood. Her stay at a mental ward was unexplored on-screen but the implication functions to rationalize the character's behavior in the second season.

Emma returned to Lakewood after a three-month hiatus and the second season follows her journey in trying to overcome these traumatic experiences and protect the rest of her friends by stopping a new killing spree that was being committed by another masked killer in Lakewood. By devoting the first season to exposing Emma to multiple crime scenes and the shocking revelation of the killer being her own sister, the show develops the character's experience and showcases the events that are informing her mental state in the second season. In this way, the narrative is manipulated to divide

the entire arc into two sets. The first season functions as a backstory to set up Emma's psychological conflict in the second season. Showcased through multiple scenes that are scattered across the season, the character experiences episodes of post-traumatic stress disorder (PTSD). This is normally conveyed through hallucinations and nightmare sequences about the killer and her childhood memories. For instance, a dream sequence in episode four showcases the masked killer attacking Emma. In the sequence, the killer removes the mask and to Emma's surprise, the killer is revealed to be Emma herself. Here the sequence functions to highlight Emma's self-condemnation. Because Piper Shaw killed Emma's friends to punish her, Emma feels guilty for her friends' deaths. Thus, the sequence does not progress the overarching story but details the character's emotional distress. Another nightmare sequence has Emma kissing her boyfriend, Kieran Wilcox, and the killer walks into the room and stabs him to death. The nightmare reveals the character's anxiety about losing loved ones, reinforcing her mental state and PTSD. These embedded scenes are placed to add depth to the character and foreground her feelings. They are also essential for building character empathy by offering narrative data that displays Emma's concerns, augmenting the development of the character in the process. Rather than constructing her mental state as superficial, the narrative suggests that her PTSD ensues from disturbing events and the scenes function to complement character motive.

This development of Emma is afforded by the show's serialization efforts. Executive Producer Jill Blotevogel asserts, "That's been the biggest balance taking a slasher movie to TV—finding a way to keep the world normal enough to keep the teen dynamic and your soap opera elements, but also reminding people that it's *Scream*" (Pickard 2015). The writer points to the significance of serialization in shaping the narrative by referring to the soap opera, which is an ongoing serial format that keeps storylines unresolved for multiple seasons. Hallucinations and dream sequences have historically been available to serials and series programs but devoting these scenes to thoroughly investigate a character's mental state, especially the way in which *Scream: The TV Series* links these scenes to the character's backstory, rationalizes the character's behavior and contributes to the overall growth. The sequences utilize the narrative canvas to not only provide details about the character's mental condition, but to also justify her actions in subsequent episodes. Her anxiety about losing other friends and her hesitant reactions to new crime scenes manifest that the character's past encounters

have contributed to the formation of her present personality. Instead of depicting Emma as violent due to her exposure to such murders, she is portrayed as responsible and caring. The more friends she loses, the more considerate and caring she becomes, intensifying her mission of stopping the killer and solving the case. Blotevogel emphasizes caring as a considerable attribute and states that, "It has to be about characters. They're going to be terrified but we want them to care about the group as a whole" (Goldberg 2015). Emma learns and reacts to the murder cases, and this is highlighted in her attempts in stopping the killing spree and protecting the rest of her friends despite her PTSD episodes. It is through this complex character building that the narrative creates an empathetic representation. Viewers are invited to identify with Emma's experiences and the process of building her PTSD supplement the character's arc design.

This character formulation is motivated by MTV's landmark generational study in 2013, "The New Millennials Will Keep Calm and Carry On", which reveals that millennials are "consciously taking time to self-soothe, disconnect, de-stress, de-stimulate, and control inputs" (MTV 2013). Emma's mental retreat before returning to Lakewood is both self-soothing and de-stressing. It is a way for the narrative to highlight the significance of self-care for mental health. Even though it functions to justify the character's PTSD episodes in the second season, it also proposes that Emma's ability to control and overcome these episodes stem from her rehabilitation, assisting the character in solving the murder cases and finally exposing the masked killer. In this way, the narrative is promoting these mental self-care procedures, and this storyline development encourages millennials to recognize such mental conditions. This depiction is constructed in a way that suggests addressing and coping with the condition rather than strictly stigmatizing it. This is further expressed in the formation of the killer's character. Contrary to Emma, Piper Shaw's failure to seek mental care after being abandoned worsened her condition, turning her into a violent serial killer. This is also the case with Kieran Wilcox, who turns out to be the new killer in season two. Thus, violence is linked to those who fail to seek care for their mental disorders.

Emma's responsible and nonviolent behavior is also derived from the study's responses. According to the report, 84% of millennials believe that "It's really important to always be prepared and have a plan" which demonstrates that the generation values responsibility, and 74% eschew viewing videos about violence which foregrounds the majority's hostile perception regarding violent behavior (MTV 2013).

In both seasons, the killers record videos of their crimes and spread them across social media. They also send them directly to Emma from an unknown phone number. Although the content of the videos impacts her mental health, Emma's repulsive reaction when watching these violent videos embodies the study's responses. Therefore, this character design is essential to the show's storytelling endeavors. A complex character with features that are relevant to the preferences of the network's preferred generation increases the show's chances of keeping audiences invested. Additionally, the development of the character's mental condition highlights the concerns and proposes approaches for addressing them, making the character more empathic for the targeted audience to engage with.

4. SYMPATHY FOR THE KILLER ON A&E

The emphasis on targeting a younger audience segment is also evident in the programming endeavors of A&E. In 2013, the network redefined its brand which facilitated the development of scripted programming shows that have the potential to lure the millennial audience group, a segment that was underemphasized in their objectives. Prior to this branding reformulation, A&E's Executive Vice President and General Manager David McKillop preserved that, "I want to keep our 25-54, but I really would like to make some headway in the 18-49, especially in the rankings" (Dobbs 2013). Because the focus was on luring audiences in the 18-49 range, a demographic that consisted of a large portion of the millennial generation, A&E's production of *Bates Motel* foregrounds a provocative social issue with a killer who is depicted struggling from dissociative identity disorder (DID).

This type of social issue formation is motivated by broader industrial notions about the generation's perception of social matters. Anthony N. Smith (2019b) maintains that television networks perceive the millennial generation to be delicate and sensitive, insisting that "various cable channels have reshaped their images in light of the millennial generation becoming an increasingly vital target demographic group for the industry" (Smith 2019a: 444). A&E was also attentive to the preferences of younger audiences and their programming ambitions, which were inspired by their corporate positioning and broader institutional priorities, led to their creative risk-taking initiatives. An exploration of DID and the various aspects of a character's personality tied to a controversial social issue like incest suits these risk-taking programming

ventures. According to McKillop, "'Be Original' is much more than a tagline, it's a rallying cry for our programmers and marketers to always take creative risks, perpetually innovate, inspire and engage the next generation" (The Deadline Team 2013). Therefore, risk-taking is an approach that the network perceives to be an engagement strategy for the younger generation, informing the ways in which the show exploits incest, medical neglect, and DID.

The series showcases the killer's perspective and highlights the events and interactions that have contributed to his mental state through the show's serial structure. Underlining the emphasis on serialization, McKillop asserts that "*Bates Motel* is one of my favorite programs that I've ever had the opportunity to work on, and it's highly serialized" (Dobbs 2013). The embedded hallucination and flashback scenes that are employed to showcase Norman's DID support the growth of his condition and serve their serialization intents by raising questions about the causes and consequently paving the way for the formulation of a continuous narrative.

Bates Motel explores the relationship between Norman Bates and his mother Norma. Throughout its five-season span, the show manifests that Norman is interested in developing a romantic relationship with his mother. These incestuous aims are the driving force behind his killing motive as he is shown blacking out, hallucinating about his mother while having sex with other women, switching identities to adopt Norma's identity, and his crimes are usually committed during these instances. The show highlights that the condition is derived from the killer's childhood trauma that Norma has failed to address. For instance, Norman's first blackout occurs when he is sexually engaging with Miss Watson. During the sexual intercourse, Norman hallucinates, envisioning himself to be Norma, and his speech pattern changes before proceeding to kill Miss Watson. He then leaves the crime scene and starts having flashbacks that show glimpses of the incident without a complete recollection of what had happened. To reassure him, Norma confesses to Norman that when he was seven years old, he also blacked out and killed his father, Sam Bates, to protect her from domestic abuse. Despite Norma's realization of the matter, she covered up the crime to keep Norman from being taken away, marking her failure in providing adequate care for her child. The hallucination scene, where Norman perceives himself to be Norma, is embedded to showcase his delusions. On the other hand, the flashback of the killing of Miss Watson highlights Norman's disorganized thoughts and informed his questioning of the incident and served to make the character look for answers that could

explain his behavior. Thus, the scene motivated character action and exposed the character's memory loss, revealing a symptom that is typically associated with DID.

This arc construction, from failing to recollect any memories of the killing of his father to recollecting glimpses of the killing of Miss Watson, details the gradual progression of his DID condition. The hallucinations and flashbacks are employed to provide context and unveil Norman's mental state and detail his experience. Through these scenes, the narrative highlights Norman's perception during the incidents and after committing the crimes and failure to rationalize the events. They also function to demonstrate the development of another identity that progresses throughout the narrative until it evolves to the point where Norman is shown dressing, physically behaving, and speaking like Norma. This progression would lack context without the embedded hallucinations and flashbacks that display the character's memory gaps and the existence of another personality. Showrunner Carlton Cuse emphasized these serialization attempts and the aim of building Norman's condition over the course of multiple seasons by stating that,

We see Norman's progression happening over a longer time frame. What exactly happens to Norman over time is interesting and compelling to us as storytellers. We're not instantly going to turn him into a serial killer of the week; that's not happening. Right away, there are many facets and dimensions to his personality that we want to explore (Goldberg 2013).

The hallucination scenes also illustrate the other facets that Cuse mentions and facilitate the transformation of the character, justifying his development from an innocent teenager to a ruthless serial killer. Although this occurs during the span of multiple seasons, the hallucinations progress to manifest Norman's internal struggle. In later seasons, Norman hallucinates about Norma telling him what to do to those whom he is interacting with. There are also hallucinations that feature Norma warning him from allowing other people to interfere in their relationship. These hallucination scenes display the interaction between both of his identities and demonstrate the growth of his other persona, setting up and justifying the character's lust for killing and complete identity switch, from Norman to Norma.

These scenes are also employed to establish the storyline for further revelations that contribute to the exploration of

Norma's dubious behavior. The incidents motivated Norman to question his memories, forcing Norma to explain past events and her involvement in trying to address these situations. Such revelations illuminate Norma's approach towards her family. Norma's ill-advised cover ups and disregard for Norman's trauma harmed his development, and these disclosures function to formulate a sympathetic representation of Norman. This is especially evident in the scenes that follow Norman's first blackout. After failing to recollect the memories of the incident with Miss Watson, Norman cries and attempts to take his life. This character reaction is underpinned by the hallucination and flashback scenes that explored his mental struggle, facilitating the sympathetic depiction and foregrounding that the killing was unintentional and beyond his control. When asked about Norman's characterization, McKillop responded by saying that,

I see Norman more as a sympathetic kid who has demons, but everybody wants him to succeed. The great thing about the show is that we know where it ends, so you're almost rooting for Norman not to end up where we think he ends up. I think Norma is maybe more of an anti-hero, especially the way that Vera [Farmiga] plays her. She is one of the most talented actresses out there, and she's created this persona who's just trying desperately to be a great mother but can't get it right (Dobbs 2013).

Norma's behavior is antiheroic not only because she had covered up the crimes, but also because she failed to seek medical attention for her son, positioning Norman as a victim of medical neglect. In this way, the narrative suggests that a mental disorder like DID must be addressed rather than ignored, emphasizing the significance of treating the condition to prevent its development which, as shown by Norman, could yield violent behavior. These conveyances are made possible by the incorporation of the hallucination and flashback scenes that delve into the character's mental state and provide opportunities for character investigation, postponing narrative closure by raising questions about Norman's mental health especially as he continues to kill more victims.

This form of character construction also serves A&E's brand identity and distinction endeavors. As a cable channel, A&E is part of multiple networks that are owned by A&E Television Networks, LLC, a joint venture that also owns other cable channels including History and Lifetime. Both the History channel and Lifetime typically target older audience

segments. A&E, on the other hand, was looking to separate its identity and possibly lure certain advertisers. With *Bates Motel* focusing on an antiheroic middle-aged mother who is trying to parent her only son, and a teenager who is trying to cope with a mental condition, the network was attempting to accommodate their preferred millennial generation but also engage a secondary audience group. McKillop elucidates, "If we can get older men [from History] and older women [from Lifetime], and then maybe younger adults across the board on a single project, that would be pretty spectacular" (Dobbs 2013). This form of commissioning prioritizes a segment without disregarding other demographics, signifying the eminence of *Bates Motel* to their general programming strategy.

5. CONCLUSION

This study contextualizes contemporary representations of mental disorders in slasher cable programming. It illustrates the industrial conditions that enable these storytelling innovations and the ways in which PTSD and DID are meticulously formed to support the programming aims of specific cable networks. More specifically, the assessment details the link between these depictions and the emphasis on serialization and the audience-specificity of these production institutions.

As showcased above, the audience targeting practices of A&E and MTV shape the narrative designs of their programs, inform the development of characters with mental disorders, and highlight their perspectives and rationalize their behaviors. These portrayals either function to constitute a sympathetic character, which is the case in *Bates Motel*, or emphasize medical care for PTSD, which is illustrated in *Scream: The TV Series*. In both cases, the strategy of the embedding of additional scenes is employed to explore how characters with these specific conditions perceive their symptoms and react to situations and events. This storytelling procedure reinforces serialization as a core component of the shows. As displayed in the analysis, the scenes raise questions that keep the narrative ongoing and provide opportunities for character investigation and event ramification. Moreover, they provide meaning to character behavior and facilitate the discovery of other personalities or reveal crucial narrative data. Although Dunleavy (2017) argues that this strategy is implemented to investigate key characters rather than progress the overarching narrative in complex serial shows, this paper foregrounds that in complex slasher series, the strategy is executed to

investigate central characters and justify the actions that contribute to solving their dilemmas. In the process, these scenes function as a character discovery mechanism.

This study demonstrates how specific narrative strategies in contemporary slasher series reflect the viewpoints of characters that are suffering from mental disorders and foreground the aesthetic possibilities of their serialized structures. Further examination may look at the consequences of these complex representations and their impact on audience perceptions of mental disorders. The assumption is that since these narratives are more complex with mentally ill characters developed throughout the narrative, the nuanced formulations could yield varying but more progressive outcomes, especially in shaping perspectives and ideas about mental disorders. Moreover, these complex constructions can bring about social awareness to these matters, encouraging viewers to identify and empathize when encountering these conditions. They are also influential in reducing stereotypes about mentally ill characters, deviating from their historical stigmatized portrayals, and thus, offering a more explanatory and positive depiction. This, however, does not imply that these complex representations are completely addressing the stereotypical prevalent portrayals that have pervaded media content for decades. Rather, it suggests that these nuanced representations are attempts to move beyond the static characterization of mentally ill characters, specifically in slasher cable series.

Despite the article's findings, there are other facets that also contribute to such developments in mental disorder representation in contemporary slasher shows. Further research can investigate the economic particularities of cable networks and how an institution's revenue model impacts characterization and social issue representation. There are horror dramas that explore other mental disorders and utilize different narrative strategies to construct characters and frame these conditions in various ways. Streaming video on-demand services are also investing in the creation of horror dramas that offer in-depth depictions of mental disorders. These streamers focus on servicing taste communities rather than the conventional approach of targeting demographics that are typical of television institutions. As a result, their portrayals are designed for building content libraries rather than developing seasonal programming schedules. As illustrated, such institutional priorities inform the utilization of narrative strategies, the design of serialized elements, and therefore depictions of mental disorders.

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STREAMING STIGMA AND ACCEPTANCE: THE INCONGRUENT REPRESENTATION OF MENTAL DISORDERS AND NEURODIVERSITY IN INDIAN TELEVISION AND OVER-THE-TOP (OTT) MEDIA SERIES

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Mental disorder; Indian television; neurodiversity;
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ABSTRACT

Traditionally (in)famous for their grandeur, melodrama, and archetypical portrayal of family units, Indian soap operas have rarely represented neurodiversity and mental disorders sensitively. Barring a few Over-The-Top (OTT) media series and emergent productions that expose the Indian audience to globalised sensibilities, neurodivergent characters and those living with mental disorders are (mis)represented either by stigmatisation or romanticisation. The on-screen portrayal of people living with psychiatric disorders oscillates between the reinstating and

demystification of stereotypes, reflecting the vacillations of contemporary Indian society, which inconsistently balances modern and traditional perspectives and, though increasingly aware, does not completely display a sincere effort towards sensitisation. Without undermining the practice of psychiatric diagnosis and cure, this paper studies the representations of mental disorders and neurodiversity in select Hindi series of the 21st century and locates them in the Indian context. It identifies predominant archetypes, such as the simpleton and the “psycho” criminal, which immensely influence the discourse surrounding atypical behaviour and thereby public perception. The paper concludes that psychological categorisation and diagnosis also factor into the representation and creation of archetypes, where certain conditions, like anxiety and depression, are more sensitively portrayed than madness or psychosis. Furthermore, while contemporary representation has increasingly leaned towards being informed and sensitive, the depictions of mental disorders remain predominantly incongruent.

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1. INTRODUCTION

Mental disorders are broad terms that connote not only debilitating conditions but also interactive differences, eccentricities, and, at times, diverse demeanours. Even in psychiatric classifications, behavioural irregularities are the first and, at times, the only marker of mental disorders. The demarcations are often based on “normalcy,” specific to society, and mandated by different cultural and political forces. Despite the discrepancies regarding definitions of mental disorders, there is a consistency with which it is stigmatised. The stigma that non-adherence to physical and mental “normalcy”—i.e., a deviation from socially sanctioned parameters—confers on individuals and communities and their implications are discussed by many critics, including Erwin Goffman (1961, 1963) and Lennard Davis (1995). In accordance, the scholars of critical psychiatry, neurodiversity, and mad pride also challenge this pathologization and aim to reclaim the labels. However, while making their claims, they consider the same psychiatric classifications to recognise the underlying differences between individuals¹ (Menzies et al. 2013).

Despite adhering to diagnostic manuals, uncertainty regarding whether a condition is perceived as a human variation or has crossed the threshold into genuine pathology persists (Armstrong 2015). These conditions, such as autism, dyslexia, etc., are “minority modes of neurocognitive functioning that are disabled by a hegemonic ‘neuro-typical’ (i.e., ‘normal’) society”² (Chapman 2019: 371). With evident uncertainty

in determining if a condition may be considered within the paradigms of neurodiversity or within those of a disorder, preference is owed to any model that commits more towards “avoiding undue suffering and cultivating flourishing” (377), since like “neurodiversity paradigm proponents, pathology paradigm proponents often are, despite initial appearances, opposed to pathologizing in cases when they take it to be unhelpful” (378). To understand psychiatric conditions, there is a need to use multiple perspectives in explaining the impact of society, culture, and politics on diagnosis (Jerotic et al. 2024).

In contemporary India, this interplay becomes particularly significant since, despite adhering to modern psychiatry, Indians have a compounded understanding of divergent behaviour due to their accommodating tradition³ (Dhar 2019). Despite a plurality in society, culture, and class, Indians pose fewer challenges to psychiatry⁴ (Sharma 2022: 342). In India, the Rights of Persons with Disabilities Act (RPWD 2016) and the Mental Healthcare Act (MHCA 2017) comply with WHO’s mental health (MH) policy (2005) and the United Nations Convention on the Rights of Persons with Disabilities (UNCPRD 2007) to protect the rights, interests, and integrity of people living with physical and mental disabilities (Gupta and Sagar 2022). However, India has had a complicated history of colonial interference, particularly with the introduction of asylums and lunacy laws⁵ (Bhattacharyya 2013). The mental asylums in early colonial India were permeable spaces where local knowledge also influenced treatment, making them “neither a subsidiary of other institutions nor an archetype of colonial power” (17). However, after the Lunacy Act of 1912, asylums became homogenous and non-permeable (206). Consequently, in independent India, despite the adoption of newer policies, the coercive design of colonial healthcare impacts Indians extensively⁶ (Davar 2022: 35). Arguably,

1 Here, the Mad Movement poses critical alternatives to mental illnesses and responds to emotional, spiritual, and neurological diversity (Menzies et al. 2013). It challenges the narrative by being critical of psychiatry and the biological reduction of conditions, aiming to deploy a holistic and sensitive perspective towards the welfare of users and survivors of psychiatry. For discussions on mad pride, neurodiversity, and its location in the Global South, see Beresford (2020), Beresford and Rose (2023), McWade et al. (2015), and Menzies et al. (2013).

2 The neurodiversity debate stems from activism and is carried out more in blogs and creator spaces than in the academic space, causing the reduced involvement of philosophy and binding theories, making narratives more heterogeneous. These debaters adapt to a language-first approach. There is a dominance of the autism spectrum and Asperger’s in the neurodivergence narrative paradigm, and conditions, including schizophrenia and mood disorders, are at times disqualified and not considered neurominorities because of their late onset and associated experiences. However, there are many debates for and against such exclusions (Chapman 2019). Since this paper follows the terminology and diagnosis used on Indian TV, where the categories are unfortunately rarely specific or accurate, the terms neurodiversity and mental disorders may occasionally overlap. However, that is not an attempt to undermine their differences. Furthermore, the terms mental disorders and mental illness, despite nuances, are all used interchangeably in the paper. However, the intention is not to simplify the complexities that these terms connote, but rather to broaden the scope and inclusivity of the conditions considered and increase readability.

3 While studying the cultural phenomena of voice-hearing in rural North India, Ayurddhi Dhar (2019) illustrates that “the subjective experience of such phenomena was vastly heterogeneous—from fear and concern to celebration and boredom” (2). The methods of cure in India are also pluralistic, ranging from western psychiatry to spiritual healing in temples and through “*dangaria*” (dancer-curer) for supernatural possession (124–125).

4 Since associating with the term “Mad” is difficult, as Mad as a “response to an oppression has only a symbolic presence” in Indian society” (Sharma 2022: 342).

5 To understand the impact of the Lunacy Acts of 1858 and 1912, see Bhattacharyya (2013).

6 Bhargavi Davar (2022) further argues that countries without a history of colonisation, like Thailand, did not have healthcare acts or asylums prior to the “modernization process” (39). Depending on the context, mental disorders in Indian society are subject to both diagnosis due to the heavy influence of Western psychiatry and tolerance due to its traditional practice of accommodating diverse behaviours.

this complexity is also reflected in Indian TV series where people with mental disorders are sometimes depicted as merely different, innocent, perhaps scarred by circumstances. At other times, they are portrayed as psychotic and evil.

TV is a crucial mode for reinstating or dismantling the stigma associated with neurodivergence and mental disorders in India. It familiarises viewers with “diverse spheres of activity,” like medical, legal, etc., by presenting a concoction of “accuracy and distortion” (Gerbner and Gross 1976: 179). Being one of the most common modes of social regulation and enculturation, “TV appears to cultivate assumptions that fit its socially functional myths” (194). Television can impact aggressive conduct and desensitise people to violence⁷ (Bandura 1978). This also holds true for the Indian setting, where historically, governments have strongly relied on the use of television to inform public opinion (Chakrabarty and Sengupta 2004).

Contemporary Indian television networks comprise government-owned Doordarshan, private cable channels, and the newly emergent OTT productions. With the 1991 economic liberalisation, the influence of globalisation began to be reflected in Indian television programmes. Western content aired with subtitles, and “Hinglish” (a mixture of Hindi and English) became a popular language (Thussu 1999: 127). Despite rampant westernisation, the channels also had to alter their content to cater to an Indian audience (Cullity 2002). Indian television draws from “both on its own rich cultural soil and on the North and South American models to invent its own type of television serial, appealing to a mass Indian audience—both innovative and remaining faithful to a local identity” (Deprez 2009: 429).

Indian TV series have found ground in different households because the narratives are primarily based on family dynamics and interpersonal relationships⁸. Shoma Munshi (2014), while discussing the Indianness of primetime family melodramas, argues that despite their grandeur and many unique characteristics, the popularity of Indian soap operas continues to rise, baffling critics. However, the contemporary Indian television landscape is heterogeneous, as it simultaneously reflects the dynamisms of media globalisation, contextually rooted local components and realities, and the

developing alliances between the two (Chadha and Kavoori 2012: 591-593).

Indian TV played an instrumental role in providing social welfare. Satellite broadcasting started in India in 1975 to disseminate information for the development of farmers (Munshi 2014). Although the government-controlled Doordarshan now caters to a new developing India centred on profit-making, it has a legacy of promoting societal welfare (Chakrabarty and Sengupta 2004). Studies confirm that cable TV is associated with lower tolerance by women towards spousal abuse, lower son preference, and higher school enrolment, thereby empowering them (Jensen and Oster 2009). Emerging research has shown that societies are now ready to embrace the realistic depiction of present-day independent women on TV (Sandhu 2018). Indian TV series enjoy a large viewership not only in India but also in Vietnam, Indonesia, Turkey, Sri Lanka, and Afghanistan⁹ (Bhatia 2016). With emerging OTT streaming platforms, many Indians have been further exposed to global sensibilities as they enjoy bold content celebrating creative freedom (Nandy 2018; Jha 2023).

Therefore, Indian television series have historically proven to be instrumental in conveying knowledge, propagating agendas, and being the source of entertainment simultaneously. The portrayal of mental disorders in Indian television media tends to receive limited critical attention. Notably, existing studies indicate that while Indian films often present inaccurate and exaggerated representations of mental disorders, they remain affected by social sensibilities and norms, simultaneously entertaining and informing the audience’s perceptions regarding people with mental disorders (Bhugra 2006; Malik et al. 2011). The depiction of mental disorders in films has been a reflection of general economic and social stability (Malik et al. 2011). However, despite having a greater and more regular viewership than films, the analysis of portrayals on television and their impact remains absent from the discourse. Adding to the discourse surrounding mental disorders and neurodiversity in different media and tracing the nuances of their representation, this paper analyses select Hindi TV series of the 21st century.

The impact of a sensitised portrayal on public perception should not be undermined. This paper examines representations of mental disorders and argues that the showrunners frequently sensationalise psychotic breakdowns and conditions like dissociative identity disorder, schizophrenia,

7 The impact of repetitive exposure to content that forms preconceptions and shapes behaviours, as discussed in the contributions by George Gerbner and Albert Bandura in cultivation theory and social cognitive theory, respectively, remains prominent (as cited in Johnson and Walker 2021: 3).

8 Hereafter, both cable and OTT series are interchangeably referred to as series or serials unless specified.

9 *Kyunki Saas Bhi Kabhi Bahu Thi* (2000-2008, Star Plus) was once the most popular TV show in Afghanistan (Mojumdar 2008).

psychosis, and other sensationalised conditions rather unsympathetically. It also showcases a contrasting trend that non-psychotic disorders, such as depression, anxiety, etc., are more likely to be portrayed sensitively. The nuances are also subject to streaming platforms, where OTT content leans more towards sensitised depiction. This trend also coincides with the enactment of progressive mental health legislation in India, specifically the Rights of Persons with Disabilities Act (RPWD 2016) and the Mental Healthcare Act (MHCA 2017). Arguably, both the adaption of social realities on television and the intricacy of the effects of representation on society are influenced by each other. Without encouraging pathologization or projecting conjectures, this paper only discusses instances where mental disorders are diagnosed or clearly implied by labelling. Although the concepts of mental disorders and supernatural possession remain interrelated and often inseparable in the Indian context, this paper only considers serials with diagnoses and social labelling and excludes the TV serials that play on this obfuscation due to their overlap. Despite concentrating on the external aspect of the stigma that is spread socially by negative labelling, this paper abstains from discussing the effect of such representation on the self-identity of people living with mental disorders.

2. METHODOLOGY

This paper focuses on a diverse set of psychiatric conditions through a selection of 16 popular Hindi series that aired in the 21st century across major television channels and different OTT platforms. The genres considered are drama and thriller which often contain elements of comedy, suspense, and romance. The shows considered are those in which these disorders are crucial for plot and character development. Instead of analysing the entire TV series, this paper zones in on character arcs across a few episodes. The series selection criteria are not based only on the diagnosis of non-normativity but also on exhibited behavioural differences. The select series are first analysed through the lens of stigma and subjectivity¹⁰ (Goffman 1963; Davis 1995). Then through narrative analysis, the representation is placed in the Indian sociocultural setting.

Culture and representation are intertwined. "Representation connects meaning and language to culture"

10 Furthermore, the selected TV series are also explored from the perspective of mad theory and neurodiversity, as discussed in the introduction.

(Hall 1997: 15). Representation involves creating and conveying meaning amongst members of a culture using symbols and language¹¹ (Hall 1997: 15). In fictional stories, where very real media topics between fiction and the real world become the material of discussion, determining their relevance in everyday life, becomes rather complicated (Gledhill 1997: 341-42)¹². Gledhill (1997) argues that to understand how representation in fiction becomes central to our real lives, one needs to "pay attention to properties of aesthetic form and emotional affect" (343). For instance, the meanings an audience deduces from fictional representation may vary from the plot outcome of themes (343). Therefore, representation is further concerned with "different kinds of story type or genre, questions of narrative organisation (the way the story unfolds), and modes of expression such as realism and melodrama, all factors which bear on the pleasure-producing, representational and signifying work of fictional forms and the subject-positions they create" (344).

The representation of mental disorders on TV can directly impact its perception (Stuart 2006; Wahl and Roth 1982). Media images in turn impact how society treats people with mental disorders (McMahon-Coleman and Weaver 2020: 6). While there has been increased awareness of this among media makers, and therefore, improvement in representation in series' aesthetic and narrative domains, such representation is a very complex dance between creative freedom and social responsibility. Broader representation of neurodiversity in fictional media, and negotiations of archetypes and roles, by challenging stigmatised portrayal, provides a chance at normalisation of societal perception of neurodivergence (Lopera-Mármol and Iranzo 2022).

With this understanding of the crucial link between representation and culture, this paper considers the following popular Indian TV series. Their assortment is non-chronological, based on the archetypes of characters with mental disorders and sensitive and non-sensitive representations. First, this paper discusses sensitive portrayals, mainly com-

11 For a discussion on various approaches to representation and meaning-making, see Hall (1997). Particularly, with respect to Foucault's contribution to the development of the constructionist view of representation, based on discursive formulations, the issue of madness did not have the same meaning across history and cultures (as cited in Hall, 1997: 45-46).

12 Within the creation of cultural representations, Gledhill (1997) looks at the importance of mass production of fiction—soap operas on television—in the production of cultural meaning. Popular fictional TV programmes and soap operas become important "sites of cultural struggles over representation" and negotiation of meanings and identities (350). The focus in Gledhill's argument is gender, but the same can be applied to the representation of mental health (339).

prising non-psychotic disorders. The shows in this category include *Aapki Antara* (*Your Antara*) (2007, Zee TV), *Hip Hip Hurray* (1998-2001, Zee TV), *Kota Factory* (2019, Netflix), *Kar Le Tu Bhi Mohabbat* (*You Too Fall in Love*) (2017, ZEE5), *Mismatched 2* (2022, Netflix), and *Kaala Pani* (*Black Water*) (2023, Netflix). The second category includes soap operas with the simpleton archetype: *Baa Bahoo Aur Baby* (*Baa Bahoo And Baby*) (2005-2010, Star Plus), *Banni Chow Home Delivery* (2022, StarPlus), *Banu Mai Teri Dulhan* (*I will Become Your Bride*, English title: *The Vow*) (2006-2009, Zee TV), *Gud Se Meetha Ishq* (*Love is Sweeter Than Jaggery*) (2022, Star Bharat), *Koshish - Ek Aashaa* (*Effort - A Hope*) (2000-2002, Zee TV), and *Ayushman* (2004-2005, Sony). The third category comprises the “psycho” archetype which remains highly problematic and sensationalised: *Akhri Sach* (*The Last Truth*) (2023, Hotstar), *Breathe: Into the Shadows* Season 2 (2022, Prime Video), *Dil Se Di Dua... Saubhagyavati Bhava?* (*Heartfelt Prayers... May You Be Fortunate?*) (2016-2017, Life OK), *House of Secrets: The Burari Deaths* (2021, Netflix)¹³.

3. CONTEXTUALISING THE NUANCES OF REPRESENTING MENTAL DISORDERS

Many studies have proposed the hypothesis that media stereotypes, such as the portrayal of people with certain mental disorders as violent or criminal, predominantly affect public attitudes towards mental health (Diefenbach 1997; Diefenbach and West 2007). The findings of these same studies also consistently show that mental illness is, in fact, widely misrepresented on TV and in the media through exaggerations and misinformation (Fruth and Padderud 1985; Stout et al. 2004; Wahl 1992; Wilson et al. 1999). This negatively affects people living with mental illness by propagating stereotypes and hampering their self-esteem and recovery (Stuart 2006; Wahl and Roth 1982).

The portrayal of aggressive and violent characters with mental illnesses spans across genders (Wahl and Roth 1982). Conventionally, more women are shown to be dealing with

mental illness (Fruth and Padderud 1985). In terms of portrayal, the behaviours of men and women tend to be more violent and obsessive, respectively. Unfortunately, even contemporary depictions of people with mental disorders remain unchanged, where they are portrayed mostly as isolated villains to justify their negative outcomes (Donohue and Swords 2022). This overemphasis on negative prototypes barely attempts to remedy their image due to the “dramatic storytelling requirements” (Signorielli 1989: 329-330). Such representations shape the opinion of the public about people living with mental illness before even encountering them in their real lives, building a predisposition towards not only people living with mental illnesses but also psychiatric professionals (Stuart 2006: 103).

Progressive representation positively impacts public perception. Unfortunately, the negative portrayal in frames dominates, adversely impacting the perception (Sieff 2003). A collaboration between the mental health sector and the television and film industries may remedy this predicament (Pirkis et al. 2006). However, such collaborations during the process of making a series, which are now rather common on world television, are rare in Indian scenarios.

However, in recent times, Indian screens also have cases of informed representations of persons with mental disorders and their caregivers. For example, in *Aapki Antara* (2009, Zee TV), Antara (Anjum Farooki), an intelligent neurodivergent child, is forced to navigate a world that is unaccepting of her differences. Every episode follows a brief testimonial by a person living with autism spectrum disorder or a family member. The serial also gives helpline numbers that received an unexpectedly large number of calls when it was being aired, with 65 per cent of callers admitting to being unaware of the autism spectrum prior to the show (Singhal et al. 2010). However, not all portrayals have such sensitive depictions.

The following sections discuss the assorted representations of mental disorders in Hindi TV serials and trace their trajectory. There is first a brief discussion of the portrayal of anxiety and depression, followed by a deep dive into the archetypes of the simpleton and the “psycho” criminal.

4. CHANNELISING RESPONSE THROUGH DISCOURSE

In many series (such as *Koshish - Ek Aashaa* (2000-2002, Zee TV), *Banu Mai Teri Dulhan* (2006-2009, Zee TV), *Banni Chow Home Delivery* (2022, StarPlus) etc.), information about

13 Here, Netflix, Hotstar, Prime Video and Zee5 are a few of the many popular platforms. Despite the emergence of multiple globalized OTT platforms, like HBO, Netflix, Prime Video, and Discovery+, many OTT platforms like Zee5, SonyLIV, etc., cater to audiences preferring local cable and vernacular content. Interestingly, cable shows can now be streamed through OTT platforms, often corresponding to the OTT platforms of their original airing network. The inconsistency in the spellings of these cable networks, StarPlus and Star Plus or Sony and SONY TV, is because of the changing of the channel name.

mental disorders is rarely disclosed to characters other than those who are living with it, and it comes as a shocking revelation to the partner. This concealment is an indication of the underlying stigma related to mental disorders. Also, psychotic disorders (as shown in series such as *Akhri Sach* (2023, Hotstar), *Breathe: Into the Shadows* Season 2 (2022, Prime Video), *Dil Se Di Dua... Saubhagyavati Bhava?* (2016-2017, Life OK), *House of Secrets: The Burari Deaths* (2021, Netflix), etc.) are deployed as being more lucrative for creating suspenseful storylines than depression and anxiety disorders (as shown in series such as *Hip Hip Hurray* (1998-2001, Zee TV), *Kota Factory* (2019, Netflix), *Kar Le Tu Bhi Mohabbat* (2017, ZEE5), *Mismatched 2* (2022, Netflix), *Kaala Pani* (Black Water, Netflix, 2023), etc.).

There are also many series that are commendably illustrating issues concerning mental health sympathetically. This is especially refreshing for substance use disorder which *Kar Le Tu Bhi Mohabbat* (2017-2019, Zee5) acknowledges as a mental disorder. Substance use disorder comprises “a cluster of cognitive, behavioural, and physiological symptoms” where the diagnosis relies on “pathological” consumption by a user despite recognising the harm¹⁴ (American Psychiatric Association 2013: 483). Reiterating the importance of therapy and counselling, the lead character’s journey to sobriety is depicted realistically. Departing from the portrayal of addicts as mere troublemakers, insights into their inner turmoil, troubled personal lives, and careers humanise them. In more such examples, some series convey the impact of unmanageable personal and professional hurdles on mental health and vice versa. Focusing on the pressure of career building, *Kota Factory* (2019, Netflix), a monochrome series, presents the mental health struggles that Indian teens undergo during their attempts to crack the joint entrance exam to enter the most prestigious STEM institutes in India¹⁵. Similarly, in *Mismatched 2* (2022, Netflix), the overachieving Dimple (Prajakta Koli) struggles with anxiety disorder, while another acclaimed series, *Kaala Pani* (2023, Netflix), shows a nurse, Jyotsana (Arushi Sharma), struggling with PTSD. Although the number of series considered are limited, it is noteworthy that these sensitised portrayals are found in recent TV series, all of which are broadcast on contemporary OTT platforms, suggesting a trend wherein series broadcast on OTT

platforms, rather than on traditional cable television, tend to offer more sensitive representations. However, this trend is not without exceptions.

While there is an emergent trend in the 21st century towards portraying people living with the abovementioned disorders perceptively, examples from Indian TV serials from the late 1990s and early 2000s are few and far between. Among those, *Hip Hip Hurray* (1998-2001, Zee TV) deserves a special mention for sensitively addressing depression and addiction and informing viewers of the efficacy of slow-paced therapy (Gupta 2020). The anomaly in the trends suggests that sensitivity is not only subject to time and platform but also to awareness, perception, and intention. However, despite the abovementioned attempts, unsettling archetypes exist, particularly those associated with developmental disorders.

5. TO PATHOLOGIZE OR NOT TO PATHOLOGIZE: THE SIMPLETON ARCHETYPE

While some TV serials have portrayed people with intellectual disabilities as childlike, others have refrained from excessive infantilization or from seeking a cure compulsively. This simpleton trope constitutes many contradictions, mirroring the apprehensions of modern Indians. Located within family structures with the members being stuck between having to choose between either pathologizing or accommodating such conditions, the explanations, diagnoses, and cures of such disorders remain far from realistic.

In *Koshish - Ek Aashaa* (2000-2002, Zee TV), Kajal (Sandhya Mridul) is married to Neeraj (Varun Badola), who lives with the mind of a child, a consequence of trauma and abuse caused by his stepmother. Similarly, in *Banu Mai Teri Dulhan* (2006-2009, Zee TV), Divya’s (Divyanka Tripathi) happiness due to her Cinderella wedding to Sagar Pratap Singh (Sharad Malhotra) is interrupted, as Sagar is revealed to be a childlike man with a mental disability caused by a car accident planned by his stepsister to claim the family property. Adding to this, another TV drama, *Banni Chow Home Delivery* (2022, StarPlus), shows Yuvan Singh Rathod (Pravisht Mishra), a singer living with a development disorder due to childhood mistreatment and drugging by his stepmother. Scandalising the union between childlike men and beautiful women, the dramatic unfolding of the secret is used to propagate the storyline. Interestingly, to facilitate the cures for these disorders which appear to come rather quickly yet seemingly miracu-

¹⁴ The main references for classification in psychiatry are the DSM and the ICD which stand for the Diagnostic and Statistical Manual of Mental Disorders and the International Classification of Diseases, respectively.

¹⁵ Kota, a city in India famous for its coaching institutes with cutthroat competition among high school students. It is also infamous for its high suicide rate.

lously, at times diminishing the intensity of developmental disorders, demands immense sacrifices from wives, reducing the men to burdensome beings. However, women who show themselves as worthy caregivers may eventually be rewarded with a “cured” partner¹⁶.

Behaviours of characters having developmental disabilities range between being a nuisance and being gullible. This affects the portrayal of the reception of such behaviours as well. There are a few TV series, however, which present such characters as multidimensional. For example, Gopal “Gattu” Thakkar (Deven Bhojani) of *Baa Bahoo Aur Baby* (2005-2010, StarPlus), is portrayed as kind and considerate, yet very gullible. Another such portrayal is in *Gud Se Meetha Ishq* (2022, Star Bharat), where the sister of the male lead, Paridhi or Pari (Meera Deosthale), is a free-spirited and compassionate woman who acts like a child. She plays an instrumental role in facilitating familial acceptance of the relationship between the male and female leads¹⁷. Although the series later exaggerates Pari’s condition, the portrayal remains overall sympathetic. These two serials neither underplay the struggles of persons living with developmental disorders and their caregivers nor portray the condition as a curse, as Paridhi and Gattu remain doted on by family members, with a few exceptions.

What makes Gattu’s character remarkable is his progressive trajectory as he eventually starts looking after children in his playhouse and empowers himself. This is a classic example of Indian culture accommodating diverse behaviours by involving them in various tasks. However, Gattu’s job remains in line with Nikita Mehrotra’s (2004) observation regarding people’s apprehensions about mental disorders as disabilities in rural India. They are labelled as *bhola/bawla* (innocent) and are assigned jobs that are traditionally allocated to women. Gattu’s case illustrates this; however, it is noteworthy that his employment remains possible primarily due to his accommodating and protective big Indian joint family. Nonetheless, requiring care from others, Gattu remains deprived of a relationship he immensely desires: fatherhood. Therefore, the seemingly unwavering familial support becomes convoluted when the family refuses to support his decision to adopt a child, as it would mean added responsibility for the family.

16 This trope is adopted across competing networks Zee and Star. Both of the major networks favoured sensationalism through mental disorders, where innocence is juxtaposed with unpredictable behaviour that often entails occasional psychotic outbursts.

17 The Hindi adaptation of the Bengali drama series *Jol Nupur* (2013-2015, Star Jalsha). It is also readapted in Hindi as *Jhanak* (2023, StarPlus).

Without other support systems to understand and provide for Gattu’s needs, the family is shown to sufficiently take care of him. This excessive reliance on family exempts society and the state from their collective responsibility in most cases in the Indian context.

6. INNOCENT OR VIOLENT: CONTEXTUALISING THE “PSYCHO” CRIMINAL ARCHETYPE

Many serials have been instrumental in spreading awareness, thereby moving society closer to normalising neurodivergence and mental disorders, while others further stigmatise such conditions. In *Ayushman* (2004-2005, Sony One), the archetype of the simpleton shifts rather distastefully. Raised by his grandmother in their ancestral home due to his father’s rejection, the male lead’s brother, Bodhi Jaisawal (Hemant Thatte), is initially portrayed as a kind, childlike man with many innocent quirks. Bodhi’s rejection and later acceptance into the family are framed melodramatically yet sensitively. It echoes the many responses of Indian families towards behavioural diversity, whereby Bodhi’s father and grandmother represent the dilemmas of familial acceptance and rejection, respectively. However, Bodhi impulsively commits murder, moving away from the simpleton archetype. Bodhi then inexplicably turns into a cold and calculating villain, with the serial ending in his death.

Over the years, diagnostically linking unreasonable behaviours by characters to underlying psychiatric conditions has become prevalent in TV series. Rather than merely hinting at vague psychiatric conditions, their unresolved trauma is often blamed. In *Dil Se Di Dua... Saubhagyavati Bhava?* (2011-2013, Life OK), Viraj Dobriyal (Karanvir Bohra), a successful and charming man in the public eye, is revealed to be possessive, violent, and sexually abusive towards his wife Jhanvi/Sia (Srishti Jha). Diagnosed with obsessive-compulsive disorder, shown to be a consequence of his childhood abuse, Viraj disregards psychiatric help and fakes taking medicines. In line with DSM-5, the series plays on repetitive behaviour and depicts obsessional jealousy as a possible indicator (American Psychiatric Association 2013). The presentation of obsessive-compulsive disorder in TV often relies on the character being fastidious about cleanliness (Fennella and Boyd 2014). Initially, for Viraj, the observation partially holds true. His other traits remain obsession, violence, uncontrolled jealousy, and antisocial behaviour. The series also dabbles with the

cruelty of asylums and the trauma of electroconvulsive therapy: it temporarily reduces Viraj's mental ability to that of a seven-year-old child. Interestingly, concerns regarding the serial's glorification of domestic violence and the problematic portrayal of people living with mental disorders are absent from the discourse. However, the viewers loved the character Viraj¹⁸ (Siddiqui 2020). Through the romanticization of Viraj's actions, viewers unaware of the nuances of obsessive-compulsive disorder risk receiving inaccurate information which may result in an untoward fascination with such behaviour.

These two series, *Ayushman* (2004-2005) and *Dil Se Di Dua... Saubhagyavati Bhava?* (2011-2013), aired on cable networks and predate the Rights of Persons with Disabilities Act (RPWD 2016) and the Mental Healthcare Act (MHCA 2017). The theme of family is a recurrent theme of cable series, and hence domestic cruelty emerges as a major motif. Apart from domestic cruelty, the impropriety of violent criminals is also sourced from their psychological conditions. Interestingly, the sensitivity shown in portrayals of anxiety and depression in the OTT series, as previously noted, is not extended to actions that may be attributed to psychotic outbursts. The violence is incidentally exploited more, if not equally, on recent OTT platforms, as suggested by the series discussed below.

In the thriller *Breathe: Into the Shadows* (2022, Prime Video), Dr Avinash Sabharwal (Abhishek Bachchan) lives with dissociative identity disorder. The "split" personality J kidnaps his daughter, playing mythological murder games with Avinash. Showrunners often benefit from this trick of playing on these archetypes—to pose behavioural extremities as normal and to sensationalise a condition. While viewers expressed concerns regarding the murderous portrayal, the showrunners and the actors maintained that the uproar by the vocal "sensationalists" is baseless, arguing that many doctors were consulted for preparing the script of *Breathe: Into the Shadows*, ensuring an accurate depiction (Rao 2022). It is also stated in DSM-5 that males with dissociative identity disorders are more likely to show violent behaviour (American Psychiatric Association 2013). However, the resolution is not so simple, as such interpretation entails a very restricted, uni-dimensional visualisation of the disorder and obscures the chance of a positive representation. Reflecting on the tussle between artistic freedom and social responsibility, to determine whether an accurate portrayal needs to necessarily be

violent and chaotic, only a multifaceted interpretation of the disorders can paint a clear picture since the capacity for portrayal may or may not be destigmatising.

In the debate of sensitive vs. accurate, a few social incidents stand out. The two major adaptations of the Burari case, a docuseries titled *House of Secrets: The Burari Deaths* (2021, Netflix) and its fictionalised rendition, *Akhri Sach* (2023, Hotstar), warrant special mention¹⁹. The latter delves into many sequential events that led to this unimaginable tragedy. The dreams of Bhuvan (Abhishek Banerjee) are haunted as he holds himself accountable for the accidental death of his father. Having suffered brain damage and temporary aphasia due to an attack, Bhuvan soon starts to believe that the father's spirit visits him²⁰. In this series, a psychiatrist discusses many dimensions of Bhuvan's behaviour. After a psychological autopsy of the case, where a person's mental state is analysed, Bhuvan's psychosis is understood to be "complete," revealing that he was not only able to talk in their father's voice but also write in his handwriting. This convinced the family that Bhuvan had become a sacred medium between them and the dead family patriarch, who advised them and instructed rituals to be completed. However, the development of Bhuvan's psychosis into Folie à Deux, or the shared psychosis that his family forges, remains undiscussed in the series. Lacking classification as a separate disorder, the psychiatrists classify shared psychosis as delusional disorder in the ICD-10 or in the category of schizophrenia spectrum and other psychotic disorders in the DSM-5 (McCarthy et al. 2024).

This retelling of one of the most mysterious cases in India also opens a discussion regarding the nuances of voice-hearing which has multiple implications in India. Here, seeking psychiatric help is considered unusual, even unnecessary (Dhar 2019). That said, interpreting Bhuvan's behaviour as a divine intervention rather than a psychiatric condition likely prevented them from seeking medical help. Also, Bhuvan's wife did not entertain any speculations regarding his behaviour. Even after consulting a psychiatrist due to a friend's insistence, Bhuvan refrains from medication, fearing both the

18 The actor who plays Viraj, Karanvir Bohra, admits that playing the role was taxing on him. He also mentions that the admiration he received was because of his portrayal of psychosis and not domestic violence (Siddiqui 2020).

19 Burari deaths are a case of mass murder/suicide, where eleven members of the Chundawat (Rajawat in *Akhri Sach*) family were found hanging from their house ceiling on July 1, 2018, in Delhi. Subject to speculations by journalists and psychiatrists, many explanations emerged to demystify the demise of what seemed like a happy family. The diaries found revealed that one of the members, Lalit (Bhuvan in *Akhri Sach*), was believed to be communicating with his father's spirit. This incident was labelled a case of shared psychosis and became a topic of national discussion (PTI 2018, 2019).

20 The character Bhuvan is based on Lalit, the prime initiator of the misinterpreted ritual that caused the deaths.

stigma associated with psychiatric help and losing the comfort of contact with their beloved father.

Despite using the psychiatric disorder to evoke horror, the series also raises awareness regarding the importance of mental health and therapy, as the only folly of the characters remains their hesitancy to seek help. The investigating police officer for the case, Anya Swaroop (Tamannaah Bhatia), whose dreams are haunted by the death of her childhood friend, realises that her experiences resemble those of Bhuvan's. Fearing the tragedy that engulfed the Rajawat family, Ananya schedules an appointment with a therapist immediately after solving the case, seeing Bhuvan's condition as a cautionary tale, implying that the viewers perceive it similarly. The show ends with a clear message that opening discourse around the stigma associated with seeking psychiatric help is a crucial step towards a better outcome for people living with mental disorders.

7. CONCLUSION

One must ask why discourse surrounding mental disorders on Indian TV is not subject to more scrutiny when a sensitised portrayal has the potential to inform public perception. The depiction of mental disorders mostly adheres to the current sociocultural sensibilities of contemporary India, in line with both stigma and acceptance—acceptance is not devoid of stigma. In contrast to the sensitised portrayal of anxiety disorders and depression, personality disorders or those involving psychosis remain heavily sensationalised, and people with developmental disorders are infantilized.

The origin of the disorders—often pinned down to childhood abuse that explains or rationalises the psychotic or sadistic behaviour—usually gets disproportionate attention. The routes to recovery are shown as improbable, if not impossible, and credited to the devoted caregiving of the female companion, leaving their fate ambiguous in the absence of such devotion. Alternatively, there are also sudden quick fixes, a miracle or a surgery, or another accident that suddenly reverses the condition for the progression of the plot. The TV series also depict that most mental disorders don't exist in isolation, thereby holding economic and personal circumstances responsible for such plights. Furthermore, many shows convey the message that not every disorder can be cured or even viewed sympathetically.

Interestingly, in the aftermath of the Rights of Persons with Disabilities Act (RPWD 2016) and the Mental Healthcare

Act (MHCA 2017), TV series appear to have become more informed and sensitised in their portrayal of mental disorders and neurodiversity. There has been an emergence of policies and social movements feeding into the debate on the accountability of showrunners and their tussle between accurate and sensitised portrayal across the globe. Yet, subject to anomalies, the progress towards achieving sensitivity in portrayal and reception seems rather slow. The representation therefore remains highly nuanced, where it is becoming increasingly complicated to make demarcations between sensitive and insensitive representations.

Therefore, this paper concludes that Indian TV serials can heavily impact public perception due to their influence on many social movements. TV has been instrumental in gender sensitisation and education. Unfortunately, the scarcity of progressive representations seems a missed opportunity to not only sensitise public perception but also dissect the sociocultural nuances that impact and are impacted by such representations.

There are limitations to the scope of this paper. It only examines select 21st-century TV shows. The selection parameters are based on the fundamental criterion that any character's conditions should be diagnosed by a doctor or clearly implicated by labelling. This paper excludes series that blur the distinction between mental disorder and ghost possession, among other things. It also excludes crime TV series and other true crime anthologies that create dramatic presentations of actual crimes that often attribute the drive of criminal minds to mental disorders. Furthermore, the study of caste, class, gender, etc. in the portrayal of mental disorder and neurodiversity is beyond the scope of this paper because it is one of the earliest studies on mental disorders and neurodiversity in Indian TV and OTT series. Finally, this paper does not claim to do justice to regional complexities since it focuses on Hindi TV series, which is one of many Indian languages. However, it paves the way for delving into an intersectional exploration of the portrayal of mental disorders in Indian TV.

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- Akhri Sach (The Last Truth)* (2023)
- Aapki Antara (Your Antara, English title: Antara)* (2007)
- Ayushman* (2004–2005)
- Baa Bahoo Aur Baby (Baa Bahoo and Baby)* (2005–2010)
- Banni Chow Home Delivery* (2022)
- Banu Mai Teri Dulhan (I Will Become Your Bride, English title: The Vow)* (2006–2009)
- Breathe: Into the Shadows Season 2* (2022)
- Dil Se Di Dua... Saubhagyavati Bhava? (Heartfelt Prayers. May You Be Fortunate?)* (2016–2017)
- Gud Se Meetha Ishq (Love is Sweeter Than Jaggery)* (2022)
- Hip Hip Hurray* (1998–2001)
- House of Secrets: The Burari Deaths* (2021)
- Kaala Pani (Black Water)* (2023)
- Koshish – Ek Aashaa (Effort – A Hope)* (2000–2002)
- Kota Factory* (2019)
- Kar Le Tu Bhi Mohabbat (You Too, Fall in Love)* (2017)
- Mismatched 2* (2022)

'I'M TRYING TO FIGURE OUT IF I'M CRAZY OR NOT': MENTAL ILLNESS AND GOTHIC PARODY IN THE DOMESTIC NOIR MINISERIES *THE WOMAN IN THE HOUSE ACROSS THE STREET FROM THE GIRL IN THE WINDOW*

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KEYWORDS

Domestic noir; Gothic parody; mental illness; unreliable narrator; genre

ABSTRACT

This article examines the domestic noir miniseries *The Woman In The House Across The Street From The Girl In The Window* (2022), in which Anna is struggling to cope after her daughter's murder. She turns to alcohol and medication, often mixing the two, to help her through PTSD, hallucinations and ombrophobia (an intense fear of rain). However, it is the investigation of a woman's murder she observes from her window that catapults Anna out of her self-destructive routine and into action, not only

investigating what happened across the road but also in her own life. The show expressively evokes many popular domestic noir narratives, and their tropes, most notably representations of women's mental illness. This article will outline how mental illness is used to construct the mystery plot through incomplete or missing memories, proximity to the main character's unreliable narration and the character's potential culpability for the crimes they investigate. I will focus on how *TWOTHATSFTGITW* incorporates Gothic imagery and strategies to represent mental illness, focusing specifically on female anxieties and madness. Through genre recognition and parody of popular domestic noir narratives, tropes and storylines, this article argues that the miniseries interrogates the representation of genre conventions, stereotyped representations of mental illness and coping mechanisms. This allows audiences to gain insight into the heroine's perspective and trauma, while at the same time creates distance to her.

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1. INTRODUCTION

This article examines the 2022 domestic noir miniseries *The Woman in the House Across the Street from the Girl in the Window* (TWITHATSFTGITW), produced by Netflix and released on 28 January 2022. The show centres on artist Anna (Kristen Bell), who is struggling to cope after losing her daughter, Elizabeth (Appy Pratt), and the following divorce from her husband, Douglas (Michael Ealy). The show introduces Anna living in her suburban home and dealing with her grief and isolation, when she witnesses the murder of her neighbour's girlfriend from across the street. After calling the police and not being believed about her observations, Anna starts her own investigation into the murder, which also leads to an investigation of her own world and relationship with grief and alcohol. Drawing obvious parallels to other domestic noir narratives including *The Girl on The Train* (2015) and *The Woman in the Window* (2018), this miniseries parodies tropes and stereotypes of the subgenre of domestic noir, which came to popularity with the novel *Gone Girl* (2012) and its subsequent film adaptation in 2014. Domestic noir, named by author of the genre, Julia Crouch (2013), centres around the female experience of the domestic sphere, intimate relationships, gendered violence and misogyny. It is "a capacious, flexible category that encompasses realist writing about domestic violence, intersectional feminism, religion, mental illness, and women's rights but that can also include fantastic and even supernatural storylines" (Joyce 2018, 3). Domestic noir is often discussed as a subgenre of crime fiction that has strong Gothic influences, especially around the isolated, haunted and "Gothicised home that is central to domestic noir" (Waters and Worthington in Joyce and Sutton 2018, 206), the secretive husband and the female Gothic investigator (Paszkievicz 2019), and its examination of women's unbelievability due to perceived madness (Joyce and Sutton 2018). The "Gothic-becoming-domestic-noir genre" (Johnsen in Joyce and Sutton 228) builds on the female Gothic cycle of the 1940s with films such as *Gaslight* (1944) and *Rebecca* (1940), updating this for the twenty-first century. Domestic noir is then a new cycle of Gothic women's narratives, which focuses on the femme fatale, "the naïve, but eventually homicidal, housewife, who takes vengeance on her husband because of his continuous abuse or infidelity" and the female Gothic investigator (Paszkievicz 26). In TWITHATSFTGITW Anna closely represents the female Gothic investigator, who investigates the crimes of a secretive partner and her own madness and potential involvement in the crime. Influenced

by her isolated life, the Gothicised house that seemingly haunts her and the perceptions of her neighbours and the police, constructs and categorises Anna as an unreliable witness. Domestic noir narratives are commonly narrated by the 'madwoman' herself, who has experienced traumatic events and is often struggling with mental illness, substance abuse and loss or gaps in memory.

This means domestic noir gives audiences an intimate look into the life of trauma survivors, often making different kinds of trauma more accessible for audiences. Due to the fragmented and inconsistent narration of the heroine, the narration brings the audience both closer to the experience of the protagonist and her subjective view of the world, while simultaneously alienating the audience, as events do not consistently line up with reality in the narrative. This therefore invites audiences to pay close attention to the ways in which the heroine is constructed as an unreliable narrator in the narrative, and the portrayal of mental illness, substance abuse and hallucinations. Given domestic noir's close relationship to the female Gothic, this article examines this domestic noir series through a Gothic lens, aiming to understand the portrayal of mental illness and madness as well as unreliable narration. As this series strongly employs parodic elements to engage with these representations, this article further employs the lens of Gothic parody to fully understand the ways in which the series criticises domestic noir's saturation with tropes of women's madness, how these are employed and affect audiences' understanding of mental illness, substance abuse and women's unreliability. I argue that the miniseries allows for genre recognition as well as genre parody to critically examine domestic noir's portrayal of mental illness, trauma, and coping strategies. This shows that the popular subgenre is at a point of saturation, parodying conventions that have been repeatedly used in domestic noir narratives across the last decade and a half.

2. DOMESTIC NOIR, THE GOTHIC AND MENTAL ILLNESS

The Gothic has a long history of representing and engaging with mental illness, often expressed as madness and insanity, which drives protagonists' minds to a breaking point. Punter and Byron (2004) in their work on Southern Gothic have argued that Gothic literature is "characterised by an emphasis on the grotesque, the macabre and, very often, the violent, investigating madness, decay and despair, and the continuing

pressures of the past upon the present" (116-17). This madness is often represented as individual as well as generational, haunting both the present and the past experiences of the protagonist. Similarly to the slippery nature of the Gothic, representations of mental illness have varied greatly in their depictions over time, both reinforcing stereotypes built on fear and the grotesque (such as the mad scientist) as well as highlight themes such as isolation and mistreatment of people with mental illness. This makes the Gothic a powerful and compelling mode of representations for mental illness and explores wider cultural anxieties (Botting, 2002). As Picart and Greek explore in their book *Monsters Amongst us: Towards a Gothic Criminology* (2007) the "instability of the deranged mind in the Gothic novel corresponds with the instability of the world outside the self... the lines between the health, normality, and the "real" versus the sick, abnormal, and "imagined" becomes less fixed" (Picart and Greek 2007, 24). This means that Gothic portrayals of mental illness connect these to wider cultural anxieties, starting to collapse the binary construction of mental health and normality versus illness and otherness.

Representations of mental illness are also represented through "hyperbole and excess" (Becker 1999, 121), creating distinct and vivid images of mental illness, psychiatrists and their institutions. Another key element of Gothic representation of mental illness is that of isolation and alienation, which brings a "sense of abjection, the suspension between connectedness and separation" (Becker 1999, 12). These become evident also in the female Gothic narratives of the 19th century, in which the heroine is in a state of continued anxiety and fear, mistrusting the man she lives with and the secrets he has hidden from her. This is especially done through isolation of the heroine from family and friends as well as seemingly supernatural hauntings, which usually are later rationally explained but construct her as 'mad'. Gothic imagery of mental illness has also directly influenced the descendant of the female Gothic, domestic noir. Many of the subgenre's representations of mental illness are clearly inspired and mirrored from the Gothic. Of course, domestic noir has expanded mental illness to beyond categorisations of madness and insanity and engages in a variety of portrayals of mental illness including PTSD (*The Girl on the Train*, 2015), OCD (*Into the Darkest Corner*, 2011) and agoraphobia (*The Women in the Window*, 2018) to name only a few. What is important to note, is that domestic noir as a genre places women's experiences at its core, including women's trauma, mental illness and coping mechanism. *TWOTHATSFTGITW* also engages specifically with



FIG 1. (1.01)



FIG 2. (1.01)

the trauma of losing a child, the breakdown of a marriage and the resulting coping mechanisms.

In the opening episode we are introduced to the main protagonist and narrator of the story, Anna, an artist who has lost her daughter three years ago. She experiences hallucinations and ombrophobia, an intense fear of rain, as it was raining on the day her daughter was murdered. The hallucinations she experiences are mostly of her daughter, which, at points, Anna imagines, is still alive. Anna, for example, walks Elizabeth to school and chats with her while getting ready for a date another mom from school has set her up with. Here, Anna says to Elizabeth 'I know. I wish I was in my pyjamas staying home with you tonight too. I love you. Can you at least give me a kiss before I go?' To which Elizabeth replies 'I can't'. 'Why not?' 'Because I'm dead'. Anna then says to herself 'How do I keep forgetting that?' (see figures 1 and 2). The hallucinations haunt Anna and, in typical Gothic fashion, force the overlap of past upon the present (Punter and Byron 2004). They also keep Anna isolated in her house and show the deep pain that the trauma of losing her child in such a violent manner has left her with. This is not the only time that

we see Anna have significant lapses in memory. Notably in the show, Anna keeps forgetting that she needs oven mitts when picking up her baked chicken casserole from the oven. Burning her hands shocks Anna back into reality and she realises that she has forgotten the mitts and has been imagining her daughter. This is a symptom of her post-traumatic stress disorder (PTSD), as often traumatic events have a significant impact on memories. Symptoms of PTSD have three “symptom clusters: re-experiencing, avoidance, and arousal” (Golier et al. 1997, 226). This experience of PTSD oftentimes leads to dissociation and dissociative amnesia, which influences the way in which a person experiencing PTSD can access and remember events. This often means that memories are stored in fragmented and incomplete ways, which Anna’s confusion shows in the first few episodes.

We also are introduced to her coping mechanisms, which include copious amounts of wine, various medications often taken alongside drinking a large glass of wine and making chicken casseroles, Elizabeth’s favourite meal. From the beginning on, this slowly constructs Anna as an unreliable narrator who does not remember and hallucinates people and events, which implies to the audience that they need to question the information and representation of events given by Anna. Audiences are slowly introduced to Anna’s grief and incomplete narration, painting her in a similar way to the stereotypical hysterical madwoman of the 19th century Gothic tale. Parallels to this become especially evident when Anna starts hearing suspicious noises from her attic. Part of this is the construction of the attic as a space of fear and uncertainty. In episode one, Anna hears noises coming from the attic and goes to investigate. Before she opens the attic’s trapdoor and goes up, she shakes herself, saying ‘I need a fucking drink’. She later goes back to the attic encouraged by her neighbour to start painting again. Anna gets spooked by a bird, triggering her to run down from the attic and to the kitchen to take her medication. She becomes increasingly more afraid of this space and the continuous footsteps and noises that seem to happen when she is home alone. The audience cannot be sure if these hauntings are imagined or real, collapsing the binary between Anna’s imagined and real perceptions. To Anna herself it becomes clear that the hauntings in the attic represent her own construction around her isolation and madness, which is influenced by her overconsumption of alcohol.

Women’s madness is a prominent theme in Gothic fiction and the attic often symbolises this madness and women’s confinement causing this (Talairach-Vielmas 2016). While Anna is not confined to the attic, she is often unable to leave

her house due to her ombrophobia and her desire to stay home with her daughter, as she expresses in episode one. The woman in the attic is also explored in relation to this figure “uncannily hovering between the Good and Evil woman, the literal and figurative, and vigorously participating in the construction of fear” (Talairach-Vielmas 2016, 32). The construction of Anna’s mental state is to instil doubt and distrust in the viewers. As the audience is slowly understanding that not everything that is shown is reality or factual, as Anna hallucinates, misremembers and forgets stretches of time. This invites audiences to question Anna’s narration and motives, when she observes Lisa’s murder from her seat by the window one evening. Not only does she call the police who tell her that she must have imagined the murder, as Lisa was in Seattle working as a flight attendant, no one else witnessed anything and there is no physical evidence in her neighbour’s house. The unreliability of Anna is further reinforced by the police and her neighbours, who quickly point to Anna’s alcohol consumption, reading of domestic noir fiction and previous traumatic experiences of her daughter’s murder to construct a picture of the unbelievable and hysterical mad-



FIG 3. (1.06)



FIG 4. (1.06)

woman. Similarly to how the audience is introduced to Anna's life, the police quickly deducts that she is not trustworthy as a witness, implying to the audience that she therefore also cannot be a trustworthy narrator. Anna herself starts to question herself because of the way in which the police and neighbours react to her witness statement and her coping strategies. Audiences are also given conflicting information that further puts Anna's version of events in question. This also paints Anna not just as an unreliable narrator but also as potentially fearsome, evil and violent.

This is further intensified by Anna's at times violent and angry outbursts. As Anna roams the house and the close neighbourhood, viewers also get introduced to some of Anna's daydreams about running over her neighbour Neil's girlfriend, Lisa (Shelley Henning), with her car. This scene is shown after a brief confrontation with Lisa on their driveway. In the show it is constructed as an actual event and is presented as part of the narrative without any indication that this is indeed only a daydream. Only later, we see that Anna jolts back in her seat, shaking off the daydream. This adds to the construction of Anna as a 'madwoman', who is not only battling with grief and a phobia, but with a desire for violent retribution. This further constructs Anna as both the potentially good or evil woman, instilling uncertainty and fear due to her dual nature and her forgetting long stretches of time. A motif both in Gothic and noir fiction, this duality in Anna is a symbol of the "return of past upon present" (Spooner 2010, 250), dealing with individual and cultural trauma. Alongside Anna, the audience then suspects that Anna might be the one to have potentially committed the murder.

Towards the end of the miniseries, Anna becomes the main suspect of the police, as one of her palette knives is found near Lisa's body, which the police are convinced was the murder weapon. When searching Anna's house, they find a similar palette knife as well as a painting titled 'the perfect family' picturing Neil, Emma and Anna, not Lisa (see figure 3). The police argue this to be Anna's motive driven by grief and madness, that Anna wants to replace the perfect family that she once had. They also assume that she has gaps in her memories and cannot give a clear account of her own actions (see figure 4). This directly criticises the portrayal of women's mental illness, demonstrating how women are often shown as hysterical and willing to go to extremes for the suburban home, lifestyle and family. Part of the narrative's development of Anna's potential involvement in the crime is a generic trope. As part of her investigations, she needs to consider her own involvement beyond witnessing the crime

and address her destructive coping mechanisms. In this way, the Gothic investigator considers her own life in relation to the other woman and understanding her own victimisation (Doane 1987). Anna is constructed as a "psychotic monster" who has been "symbolically castrated, that is, she feels she has been robbed unjustly of her rightful destiny" of being a mother, a wife and having a suburban lifestyle (Creed 1993, 120), which she observes in Neil's family across the road. Similarly, to how Creed argues this is represented in *Fatal Attraction* (1987), women have been portrayed as psychotic monsters who are willing to kill to "possess what has been denied her: family, husband, lover, child" (120). Anna is similarly constructed as an obsessive, violent and mentally unstable protagonist due to the loss of her child and husband. The narrative construction of this through gaps in memory, hallucinations and inconsistencies in recalling events, further portrays Anna as monstrous due to her unreliability.

3. UNRELIABLE NARRATION

The madwoman in the attic traditionally is not allowed to voice her story herself. She is often a haunting presence in female Gothic stories and acts as a mirror or double to the heroine herself, such as Bertha Mason from *Jane Eyre* (1847). Bertha, Rochester's first wife, was locked in the attic, after diagnosed to be mentally insane. Audiences know her story only through Rochester's account of their marriage and her mental illness, as she is not given the chance to talk directly, she is only talked about. The madwoman is then constructed through the account of others, labelling her as insane and ill. *TWOTHATSFTGITW* like most domestic noir, however, centres on the 'madwoman', giving audiences direct access to Anna's thoughts and perspective and gaining insight into how her 'madness' has developed, often by the doing and narrative of her husband. In a similar way to female Gothic novels, Gothic romance films and previous domestic noir books, *TWOTHATSFTGITW* is a narrative that centres around the heroine's investigations to understand if she is indeed misremembering and imagining events, or if she is not being believed as a narrator and witness because of her struggles with mental illness and alcoholism. At the beginning of domestic noir narratives such as *The Girl on the Train* (2015) the heroine is typically portrayed as the stereotypical hysterical woman. This is emphasised in the show, as Anna, after observing the murder across the street, call the police in panic and rushes outside into the rain and dramatically fainting in the

middle of the road due to her ombrophobia. Domestic noir narratives with a 'madwoman' as the narrator are then often set up through the lens of a first-person, seemingly unreliable narrator. In domestic noir the madwoman herself talks to us but is painted as an unreliable narrator, which means that the audiences cannot fully discern if they can believe and support the narrator or if the heroine is misleading us.

Wayne Booth (1961) famously defined the narrator as reliable "when he speaks for or acts in accordance with the norms of the work (which is to say, the implied author's norms), unreliable when he does not" (158-59). While this unreliability is presented in different ways including deliberate and accidental misleading of the audiences, the madwoman often falls within the category of the accidental unreliable narrator. This is to say that she is unaware of or disagrees with her own unreliability and believes in how and what she narrates to be true. Anna is convinced that she has seen the murder of her neighbour, Lisa, starting her investigations of not only her murder but also her perceived madness. Riggan (1981) further classifies the unreliable narrator into multiple categories such as the clown, the naïf, the picaresque and the 'madman', who is living with mental illness and is unable to tell the story accurately. According to Riggan, the madman is perceived as the least reliable narrator out of the four categories. Audiences are

'far more prepared at the outset to take the text as anything from incoherent ravings to rambling absurdities to clear but twisted logical musings—at any rate, not to accept it as authoritative in any sense. One is predisposed, rather, merely to listen to the madman talk, to watch him move, to study him as a case—he is called simply "a madman" after all' (Riggan 1981, 111).

Often the madman is so fully absorbed by "despair, self-effacement, world-weariness, coldness to religion estrangement, and anguish" (Riggan 1981: 139) that he becomes estranged to the audience, leading to a greater sense of unreliability. This happens through the narrator's "pronounced inability to distinguish reality from imagination, mark him as a patently unreliable guide to his past experiences and present circumstances" (139). There are moments of clarity and trustworthiness in Anna's narration, such as her decision to join a therapy group to deal with her grief. However, these are combined with obvious times of hallucinations and memory gaps, showing "the narrator's efforts

at speaking to his shadow and gaining some understanding of himself and of his ordeal [which] result only in continued confusion and darkness—even blindness in that darkness" (Riggan, 1981, 140-141). However, fighting the perceptions of the police addressing her as an unreliable witness, it becomes clear that Anna is set on continuing her investigations into the murder, even when at multiple points, she is wrong in her theories, having no proof for her accusations. The investigation helps Anna to stop using alcohol to cope with her trauma, seeing herself and her life more clearly.

This back and forth between moments of the narrator's clarity and confusion is evident in *TWOTHATSFGITW* when, at the end of episode five, it is revealed that Lisa is indeed dead, and her body is shown buried in the woods. It supports Anna's observation that Lisa was murdered but starts to throw suspicion on different people including Neil, as her partner, and finally, Anna herself. Firstly, her suspicions of Neil as Lisa's murderer are further fuelled by the stereotypical Gothic women's film plotline. Anna discovers that Neil's wife also died under strange circumstances, drowned in the lake near their house. Furthermore, she finds out that Neil likely had an affair with a teacher at his daughter's school, who also died in a tragic accident during a school trip. All of this evidence compels Anna to suspect Neil of murdering Lisa as well as his wife and Elizabeth's teacher. The Gothic women's film plotline that most domestic noir narratives also follow looks at the husband or partner as the main suspect, such as in *The Girl on the Train*. In these narratives, the 'Gothic investigator' as termed by Doane (1987) discovers her own victimisation by what Russ (in Fleenor, 1983) has termed the 'super-male'. The Gothic investigator is often the trapped woman who examines her own life and relationship by investigating the man's previous relationships. This echoes Bluebeard's tale and often also specifically evokes the unstable and mad woman, who is constructed by the people (often her own husband or other male figures in power) around her as imagining behaviours and events. This is caused by the abuse and manipulation of the 'super-male' who is in control of the narrative. Similarly, this is also how psychiatrists and other mental health professionals are typically constructed in Gothic narratives. They are the ones who are in control of diagnosis and treatment plan of their often female patients, painting a picture of female hysteria and madness, as with the example of the famous case of Freud and his patient, Dora (Showalter, 1993).

Domestic noir stories have exploited this generic expectation with the husband being suspicious but ultimately, he is not involved (for example in *Gone Girl* and *The Woman in*

the Window). Rather the madwoman investigates her own perceptions of reality and the possibility that in fact she is the perpetrator. Mental disorders and alcoholism are at the forefront of the narrative tension that domestic noir novels play on, constructing a suspenseful storyline through gaps, imperfect and imagined memories and observations. Until the end we are not sure if it was Neil or maybe Anna herself who has committed the murder. Importantly, Anna's struggles with grief and mental illness push her towards investigating the murder and addressing her own life. When talking to Rex (Benjamin Levy Aguilar), who works with Lisa on elaborate scams (and is another potential suspect in her murder), Anna explains 'I'm trying to figure out if I'm crazy or not'. This is a pivotal point in the narrative, as she recognises that she is perceived by society as an unreliable witness, which she pushes back on. This is also further reinforced by how her neighbours and the police have created the image of her madness and unreliability based on her mental illness and substance abuse. This of course also has a gendered component, invoking again the perception of the monstrous feminine and the unbeliability of women as well as how mental illness is culturally and socially perceived as unreliable (Scutt, 1997). Here, the Gothic mode allows for this to be explored alongside wider cultural anxieties about women not being believed by law enforcement and about their own victimisation, historically constructing women as already unreliable and hysterical (Scutt, 1997; Higgins and Banet-Weiser, 2023). Believability, as argued by Higgins and Banet-Weiser (2023), has always been political and "marginalised groups, such as women, queer people, and people of color of all genders, have historically been routinely positioned as unbelievable, untrustworthy, doubtful subjects—as subjective subjects par excellence whose truths will always remain not just unconfirmed, but unconfirmable" (8). Inconsistencies in women's narratives are then directly seen as mental instability, unreliability or dishonesty.

Anna's narration, which mixes both real and fictional narrative phases (daydreams and hallucinations) places the audience in a similar position to Anna, investigating alongside her and trying to figure out the mystery. Through the changes in narration, the audience then follows along how Anna experiences the fragmentation of her life, and how she tries to make sense of her loss and trauma. We get an insight into her life and trauma through the "rhythms, processes, and uncertainties of traumatic experiences" (Vickroy 2015, 3) creating a certain intimacy between narrator and audience, but at the same time, this alienates the viewers because of this insecure and opposing narration. This then reveals the obsta-

cles in communicating traumatic experiences, as argued by trauma theorists such as Elaine Scarry (1985). As Scarry has discussed, it is difficult to adequately put pain and its effects on emotions into words. Scarry states that it is "an interior and unsharable experience" (16) and that talking about pain is different to when someone experiences this pain themselves. The question is then how to represent pain - physical, psychological and emotional - in ways that allows audiences to start to understand this. The unreliable narrator is one such structural way that has been employed to give the audience some insight into the world of people who have experienced traumatic events. Audiences are asked to be further involved in the narrative, as they need to distinguish between reality and fabrications by the narrator. Through this involvement the audience also comes to understand that the unreliable narration is due to the trauma that Anna experienced, as "unreliable narration... is a mode of indirect communication" (Phelan 2007, 224). Similarly, Caruth (1995) examines the narration of trauma as incomprehensible and unrepresentable, always already distorting the truth and the effect of the traumatic experience. This means that the narrative representation "textually performs trauma and its 'incomprehensibility' through, for instance, gaps, silences, the repeated breakdown of language, and the collapse of understanding" (Caruth 1995, 121). This is Anna's way to express her traumatic experiences and life to the audience and how she copes with the loss of her daughter, including her hallucinations and the hauntings in the attic. Caruth further explains that "trauma is best conveyed 'directly'—since attempts to thematize and make it comprehensible betray its essence as unassimilable shock—then the best kind of text is one that actually induces trauma" in its audiences (Forter 2007, 262). This trauma is induced in the audience by way of mistrusting the narration of Anna while at the same time believing her observations, which makes the audience suspicious of all other characters, especially those they are familiar with from the engaging with the genre such as the husband or partner. This places the audience in a similar place to Anna, who does not know who she can trust and what is real or imagined. As the audience investigate alongside the heroine, her unreliable narration "colours our perceptions" with the heroine's perceptions, which "makes us doubt ourselves the same way we doubt her" (Thielman 2021). Anna's hallucinations and emotional outburst throughout the miniseries frame her narration of events and make the audience doubt her perceptions as well as their own, closely focusing on Anna's narration from the beginning. Le Rossignol and Harris (2022) define domestic noir as trauma survival fiction, which



FIG 5. (1.05)



FIG 6. (1.05)

allows for authors as well as audiences to explore gendered trauma and its consequences. The themes in combination with the structure of the mystery and the unreliable narrator in domestic noir is “a deliberately chosen strategy, as it mimics the unreliability of the traumatised mind —where clear thinking, blackouts, flashbacks and panic attacks are common” (Le Rossignol and Harris 2022,11). This is also evident throughout *TWATHATSFTGITW* but especially towards the end when Anna starts to doubt her own clarity and truly suspects her potential involvement. However, having someone that listens to her and believes her, as Rex does, Anna is able to see in what ways her madness and unbelievability has been constructed by others. Talking openly to Rex (see figures 5 and 6) helps Anna realise that this investigation is more about her own mental state, alcoholism and believability than solving the murder. Anna, like other Gothic heroines, understands her own victimisation in relation to the events of the murder and her ‘unbelievability’. Systems such as the police that are meant to support her, contribute to her feeling ‘crazy’ and unbelievable, dismissing her witness account and only seeing her as an unbelievable woman.

4. GOTHIC PARODY IN *TWATHATSFTGITW*

The above scene with Anna and Rex is also one that especially clearly highlights the aspect of parody in the series. Here, the show parodies the trope of the madwoman, exaggerating her alcohol consumption by showing her expertly pouring two full bottles into two glasses. The parodic aspects of this series are a crucial part to invite further reflection on the representation and construction of the madwoman in domestic noir narratives. This points towards popular narratives such as *The Girl on the Train*, and how these representations stereotype trauma and mental illness, especially by repeatedly using the same generic tropes around alcohol use and trauma. The title of the series itself strongly hints at a parody and points towards its relationship to narratives such as *The Woman in the Window* and *The Girl on the Train*, taking elements from both to construct an overly long title including common words of domestic noir titles such as ‘girl’, ‘woman’ and ‘house’. It released in January 2022 just a year after Netflix produced the 2021 adaptation of *The Woman in the Window* (2018), based on the novel by A.J. Flynn. This comes after Netflix’s renewal of domestic noir TV show *You* (2018-present) and adaptation of *Behind Her Eyes* (2017) as a TV series of the same name in 2021.

In an interview, one of the showrunners of *TWATHATSFTGITW*, Rachel Ramras, mentioned that “if I see a book or movie with ‘girl’ or ‘woman’ in the title, I’m buying it. I know what I’m getting. They’re always satisfying” (Feldman 2022). This shows that with *TWATHATSFTGITW* Netflix showrunners are strongly aware that domestic noir’s generic history is at a point of saturation, at which audiences are familiar and trained to expect and read certain tropes. Anja Munderlein argues in her book *Genre and Reception in the Gothic Parody: Framing the Subversive Heroine* (2021) that “many of the traits of the Gothic novel or of earlier romances are ridiculed, yet the parody only works because the reader recognises the generic traits of the Gothic novel” (30). *TWATHATSFTGITW* operates in a similar way allowing viewers to recognise important elements of the popular subgenre domestic noir, as mentioned above. Not only does the title itself indicate a parody of popular domestic noir narratives but, similarly to Laurence Raw’s (2020) analysis of Gothic parody, I have argued that *TWATHATSFTGITW* invokes many genre conventions of domestic noir (and with that directly of course Gothic codes of representation). Importantly however, it also critically reflects on the construction of domestic noir narratives and its tropes of mental illness and unreliable narration. The miniseries is

therefore not a straightforward generic production but employs parody to self-consciously expose, perform and exaggerate what is understood to be the core generic elements of domestic noir.

Within the first episode audiences' attention is drawn to its generic predecessors. Like other Gothic parodies, the mini-series aims to "copy and overdo" the application of generic knowledge (Münderlein 2021, 30). As Beer and Horner (2003) argue, generic parodies "exhibit... a keen sense of the comic, an acute awareness of intertextuality and an engagement with the idea of metafiction" (270). This acute awareness of domestic noir's generic characteristics is especially noticeable in Anna's unreliable, first-person narration of events. The mini-series not only draws attention to Anna's inner monologue from the beginning on, mentioning that "sometimes I like to speak with a British accent, even though I'm not British" but also parodies the heroine's narration and unreliability. Anna's inner monologue is also parodying that of other domestic noir heroines who begin their investigations into other people's lives but end up investigating their own lives, victimisation and perceived madness. In the third episode Anna muses,

'To get to the bottom of something, sometimes you have to remind yourself, that if you don't risk anything, you risk everything. And the biggest risk you can take is to risk nothing. And if you risk nothing what you're really doing is risking not getting to the bottom of something. And if you don't get to the bottom of something, you risk everything.'

This narration parodies the idea of the Gothic investigator and her exploration of the crime that she observed. Anna's narration here is repetitive while she delivers this in a way to encourage herself to start her investigation into Neil. What is also parodied are two generic tropes: that of the suspicious 'super-male' and the investigation into the heroine's self and her own involvement in the crime. The stereotypical investigation into Neil as the current partner of Lisa, who Anna also starts to be romantically involved with, is an important element of the parody. Here, Anna investigates Neil's background, and we see scenes that show Neil killing his first wife and the teacher, which we later find out are just creations of Anna's imagination. During her investigation, Anna also catches Neil with a large bag late at night, which she suspects contains Lisa's body. However, when confronting Neil about the bag, he reveals that he has indeed a body in his bag—that of his ventriloquist's dummy—and he is on the way to a performance.



FIG 7. (1.06)



FIG 8. (1.06)

This goes hand in hand with Münderlein's argument, that "the central points of criticism expressed through parody revolve around the accusation of "conventionality" and the lack of originality" (95). These parodic elements then exaggerate generic conventions and push them to the comedic, exposing and criticising the repetition and predictability of the tropes. This is especially important, as domestic noir narratives directly engage with representations of mental illness and substance abuse. The repetitive nature of these representations then does not allow for exploration of individual trauma but are often dealt with as a plot device to drive the plot and formulaic conventions and tropes. The use of mental illness as a plot device becomes apparent when Anna talks to her therapist, who is also, unknown to the audience, her ex-husband. She tells him after being asked how she is doing, that she feels "crazy", mostly because police, neighbours and even the audience do not believe her. Her therapist warns her that taking the medication together with alcohol can cause hallucinations and even lead to a psychotic episode, setting Anna as well as the audience up to suspect Anna to be the murderer. Towards the end of the series, Anna starts to be-

lieve that she might be involved in the murder, after having disorienting flashbacks of her angrily stabbing (see figure 7). Her fear becomes especially heightened, when she sees blood dripping out of the attic hatch. In panic she calls her therapist about this, thinking she is going 'crazy', as this must be Lisa's blood, and she did indeed kill her. Douglas then asks 'Anna, are you in the attic now?', combining the physical space with her mental state and drawing on the Gothic imagery of the madwoman in the attic (see figure 8). Anna only gains clarity that she was not involved in Lisa's murder when she confronts her madness and enters the attic, finding that the blood was red paint, and that Buell, her handyman, was secretly living upstairs, which also explains the noises she heard from the attic. As with other female Gothic narratives, all potentially supernatural occurrences such as hauntings are rationally explained. As Mitchell and Snyder (2001) argue, that disability is often used as "crutch upon which literary narratives lean for their representational power, disruptive potentiality, and analytical insight" (49). Giving an abundance of examples, they argue that it is an exploitative way to engage with disability as a narrative obstacle rather than exploring the cultural sig-

nificance of this. The continuous use of the unreliable female narrator in domestic noir, is parodied in this show because of its reliance on mental illness and the construction of the madwoman.

This is also evident in how Anna copes with her grief and the resulting hallucinations and ombrophobia. For example, *TWOTHATSFTGITW* depicts Anna's coping mechanism like Rachel's from *The Girl on the Train*, through the use of alcohol, specifically wine. While Rachel drinks to forget, especially to and from her journey to London, Anna drinks at home watching the neighbouring house. The drinking, however, is exaggerated for comedic effect with Anna filling a full bottle into a wine glass in the morning (see figures 9 and 10). The ombrophobia that keeps Anna often locked in at home, mirror's Dr Anna Fox from *The Woman in the Window*. She has agoraphobia, a type of anxiety disorder that can include a fear of crowds, enclosed or open spaces and leaving the home. It often makes it difficult for people with this disorder to leave their safe space and is linked to the need to feel safe and be able to escape from a situation or place (Capps and Ochs 1995). Anna Fox also takes her medication with wine, leading to a dangerous mix of the two. In comparison to agoraphobia, Anna is able to leave the house on sunny days and is mostly mobile to conduct her life and investigations. The fear of rain, while a very real and immobilising anxiety disorder, has been a point of confusion amongst audiences (Michèle 2022; Matadeen 2022). It is also a parodic element, as in the final episode Anna can move quickly past her fear to go to Neil's house, similarly Anna Fox's miraculous recovery from her agoraphobia at the end of *The Woman in the Window*. The parody then highlights the limits of the genre's representations of mental illness. Towards the end of the narrative, mental illness is no longer useful to the plot and needs to be resolved quickly, which of course does not reflect reality. By imitating the genre conventions and "contrasting it with the 'real' world, parodists can reveal moral-ideological problems inherent in the hypoggenre" (Münderlein 2021, 105) and instances, in which they are uncritical of these problems. This allows for further reflections on how mental illness is used as a 'narrative prothesis' (Mitchell and Snyder 2001) and is represented in domestic noir. Any narrative, especially those in popular culture, influence the way mental illness is understood by the public. A long history of misrepresentation of mental illness has influenced diagnosis and created stigma and misinformation, which some domestic noir narratives feed into as well. Gothic parody then imitates and transforms generic works and markers, and use especially,



FIG 9. (1.01)



FIG 10. (1.02)

"fundamentally Gothic elements, often overdrawing them or juxtaposing them with probability and reality" (Münderlein 2021, 73), which in this case is directly criticising the portrayal of mental illness and unreliable narration in domestic noir narratives. *TWATHATSFTGITW* directly draws attention to this amongst other generic elements through hyperbole and excess. Examining modern Gothic parody texts, Spooner (2006) explains that this is "part of its Gothicity. It's knowingness, its signalling of its place within a particular tradition, permits it to combine humour with horror" (Spooner 2006, 36). By drawing on Gothic tropes *TWATHATSFTGITW* is able to balance both humour and horror, exploring the effects of mental illness but also critically pointing towards the generic and exploitative tropes around representations of mental illness.

Münderlein (2021) divides this criticism of Gothic parodies into two main categories: literary-aesthetic and moral-ideological criticism, which often go hand in hand. While the first category is about exposing a genre's 'bad writing' in its predictable and formulaic style, the second category focuses on the detrimental effect on audiences consuming generic fiction. *TWATHATSFTGITW* also asks the knowing audiences directly to reflect on their engagement with the subgenre and the expectations they have of domestic noir tropes. This is further highlighted by Anna's reading habits, as she is represented as a reader of domestic noir fiction. In the first episode, Anna is pictured reading the fictional book *The Woman Across the Lake* and in the final episode she reads *The Girl on the Cruise*. Anna reading these books echoes previous Gothic parody novels that aim to tell a moral tale and remind readers how to conduct themselves. These novels, as explained by Münderlein (2021) warn readers "against flights of fancy induced by an overconsumption of (inadequate) literature" (75). It also directly hints at the popular consumption of these books by women and the perceived hysterical reactions as well as the notion of escapism that are often attributed to women readers in relation to genre fiction. Botting and Townshend (2004) further elaborate on this saying that "the heroine is a hysteric and the Female Gothic text is a hysterical narrative" (262). Consuming these excessive texts then would lead to a similar hysteria in the female audience and create a similarly "ill-balanced" woman who cannot control her emotions to the text (Withington 1890, 195). In this example Anna learns from the books how to act when witnessing a murder, taking the investigations into her own hands like other domestic noir heroines. Anna being a consumer of domestic noir fiction also feeds into the narrative of her own involvement in Lisa's murder. When

Anna first calls the police, they dismiss her not only because of her mixing alcohol with medication but also pointedly, ask her about reading domestic noir material with prominent generic markers such as 'girl' in the title. However, both times Anna is pictured reading domestic noir novels, she shortly after witnesses a murder, and it is suggested that her observations prove accurate, making her more observant in her investigations because of reading domestic noir books. This again counters the narrative of the unreliable and hysterical madwoman, and also directly addresses the audience and their engagement with these texts and tropes.

The show ends with Anna travelling by plane to visit her best friend, Sloane, in New York. During her flight, she meets a woman sitting next to her, asking if she would like a glass of wine. Anna answers in true parodic fashion that "I don't drink wine anymore" but then orders three small bottles of vodka, taking this with her Valium and falling asleep. When Anna discovers the woman's murdered body and is once again told she is imagining this, she finds the woman's handheld mirror and therefore, once again validating the account of the female narrator and investigator of domestic noir. This leaves the series, with a final "Bingo" from Anna, on a cliffhanger, inviting further seasons of this Gothic parody of domestic noir.

5. CONCLUSION

In this article I have looked at how generic tropes of domestic noir are integrated and parodied in the miniseries *TWATHATSFTGITW* with a specific focus on the portrayal of mental illness through the Gothic mode. Here, the tropes of the madwoman in the attic, the unreliable first-person narrator and the heroine's investigation of the crime and her own involvement were especially important to consider and how these were used to represent the protagonist, Anna. As with most domestic noir narratives, *TWATHATSFTGITW* asks the audience to investigate alongside the heroine, leading to an investigation of her perceived madness. This is further emphasised by the gaps in her memory and misremembered events, which constructs Anna as an unreliable narrator. The construction of the unreliable narrative both allows the audience to build an understanding of the heroine's experience and trauma and introduces doubts about the credibility of her account, further asking the audience to engage with the series and the reasons for her narration. This also introduces suspicion about the heroine's involvement in the crime, playing on the stereotypes of the violent and jealous monstrous

feminine. At its core, domestic noir explores traumatic experiences that are complex and therefore can only be told by the narrators in disjointed, fragmented and non-linear ways. As *TWOTHATSFTGITW* is not a generic production of the domestic noir genre, it introduces parody to pinpointed common generic tropes and conventions of domestic noir. This heightens and exposes how the genre has represented mental illness and the unreliable narrator repetitively as a crutch for the narrative. In this parody of domestic noir "the genre and its socio-political frames are being renegotiated and both affirmed and subverted through the reception process, thus paradoxically becoming stable through their constant instability" (Münderlein 2021, 58). As I have argued, the miniseries clearly lays bare and pokes fun at domestic noir's generic tropes and characteristics, affirming them in the process. Those who are familiar with reading and engaging with the subgenre of domestic noir, easily identify these parodic elements and their criticisms. Gothic parody is then "not laughing at what is copied, however, but with it—it is a joke that we all are in on" as the audience (Spooner 2006, 37). The parody only functions to its full potential with a knowing audience who are able to laugh with the jokes, excess and exaggerations playing on the popularity of the 'girl genre'. In this way the audience is able to understand this parody as an expansion of the generic frame, modifying this to include parody as part of the Gothic framework of domestic noir while at the same time criticising its representation of mental illness.

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- Jane Eyre* (1847)
- The Girl on the Train* (2015)
- The Woman in the Window* (2018)

A REBEL WITHOUT A CAUSE AND HIS PTSD: DEPICTIONS OF MENTAL ILLNESS IN *THE WINCHESTERS*

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ABSTRACT

The Winchesters (2022) tells the story of John Winchester (Drake Rodger) after his return from Vietnam. The show seeks to explore his PTSD through the monster of the week

format, exploiting the conventions of the horror genre without adhering to outdated and negative stereotypes. In doing so, showrunner Robbie Thompson challenges *Supernatural's* (2005-2020) narrative and the one proposed by other media focused on the same issues. However, the references made to Western ideals of masculinity ensure an all but 'sanitized' depiction that ultimately asks the audience to question the limits of empathy and their own prejudices. This essay aims to analyze the show through the lens of medical humanities, focusing on the portrayal of John as a patient-person and the ways in which his PTSD is depicted throughout the course of the show.

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1. INTRODUCTION

On June 24, 2021, Danneel and Jensen Ackles announced that their newly established production company would oversee the creation of *The Winchesters* (2022), a prequel to Eric Kripke's *Supernatural* (2005-2020). Despite the original's cult-like status, the involvement of fan-favorite Robbie Thompson, and the deviation from the original formula, fans reacted negatively to the news and quickly begun to voice their disappointment across a variety of social media platforms. Under different circumstances, the dismissal of the toxic and codependent relationship between Sam and Dean Winchester might have been appealing. Instead, the decision to focus on the characters' parents—specifically, their father, John—was perceived as further indication of the powers that be's reluctance to challenge the status quo and their desire to bully and mock the majority of their audience for partaking in slash shipping (tiktaalic 2021).

Notwithstanding such qualms, *The Winchesters* premiered on October 11, 2022, with 0.78 million viewers total, making it the most-watched pilot episode of the season (Mitovich 2022). Just like *Supernatural* had always allowed “feminist and/or queer readings” (Nicole 2014: 165), the prequel soon revealed itself to be neither conservative nor oblivious to contemporary socio-cultural developments. As a matter of fact, it set out to explore the very same trappings of masculinity and the dark side of “ancestor reverence” (Harris 2019: 91) as the original. The focus on a new set of characters and a different time in American history merely provided new insight into patriarchal legacies, exploiting all the possibilities *Supernatural* had exhausted, and ultimately mixing childhood abuse and the consequences of asymmetric warfare into a story centered around mental illness.

As a result, the show forced its audience to reckon with their misassumptions on patienthood and illness, while also challenging television's penchant for associating mental illness with “fear, dislike, and distrust” (Fruth and Padderud 1985: 384) and with a two-fold effect. On the one hand, the dismissal of the parasocial relation between viewer and fictional character was undermined by the show's focus on John Winchester in order to test the limits of empathy. On the other hand, the deviation from mediatic dehumanization (Wahl and Roth 1982: 604) and “sense of evil” (Gerbner 1980: 47) enabled the creation of new frameworks and axioms that do not hinge on the distinction between ‘good’ and ‘bad’ patients—or sick people.

At a time when people are more inclined to see Vietnam veterans (and volunteers at that) as butchers rather than heroes, *The Winchesters'* introduction of two mentally ill characters makes the story more effective. Unlike John, his friend Carlos Cervantez is more likeable and easily redeemable due to his diversity, not to mention more accepting of his problems and willing to seek help. The audience's potential favoritism, which seemingly transcends personal taste, may facilitate the emergence of a “real social bond” between reality and fiction (Hoffner and Cohen 2015: 1047) but simultaneously unveils the bias behind self-reflection through the other at the expense of less open characters.

After all, the on-screen depiction of mental illness can be as didactic (Nordahl-Hansen et al. 2018) as it can be harmful (Klin and Lemish 2008: 434). In operating outside this standardized binary and relinquishing the trend of turning mentally ill characters into “role models” (Iranzo 2022: 98), Robbie Thompson and his colleagues were given the chance to reflect on contemporary issues as, for example, the tendency to “deprive [patients] of their individual story” (Dignan 2022: 156) or to portray the mas nothing more than “disease anthropomorphized” (Gilman 1988: 2). The educational nature of serialized television, therefore, is not entirely lost, regardless of how unlikeable John Winchester may be, allowing *The Winchesters* to insert itself into the ever-relevant debate on the humanization of patients and medicine.

In light of these initial considerations, this essay aims to analyze the show through the lenses of Medical Humanities, highlighting its depiction of mental illness—more specifically PTSD. The first part will look at John Winchester as a mentally ill character and focus on the show's subversion of the typical connection between illness and criminality. In the second part, this essay will then move onto the show's depiction of mental illness and its use of the monster of the week narrative, exposing the ways in which the inability to distinguish “who's really the monster here” (“Art of Dying” 1.06) does not hinder a positive portrayal, not even at a time when audiences seek unproblematic fiction that offers a safe haven for all.

2. BORN IN THE USA: PORTRAIT OF THE ‘PATIENT’ AS A YOUNG MAN

Although *The Winchesters* takes place in a parallel universe and, as such, cannot be placed on the same continuum as *Supernatural*, first-time viewers may approach the show as if they were, resulting in substantial reservations as to the

prequel's effectiveness. After all, in Kripke's work, John Winchester embodies the real "moral evil" due to the persistent associations with the yellow-eyed demon Azazel (Bolf and Bolf-Beliveau 2014: 118). Certainly, softer and more positive depictions of the characters do exist within the show's canon as, for example, in "Lebanon" (14.13). In spite of never vindicating or fully redeeming the character, they do provide glimpses beyond "outlaw fatherhood" (Rosen 2014: 185). This occasional distance from immediate and unromantic representations of post-9/11 masculinity (George 2014: 143) bestows verisimilitude to any alternate version of John, posing questions on the nature of his authoritarian behavior.

In *Supernatural*, John's indifference and violence are a consequence of his wife's gruesome death—a life-changing moment that jumpstarts his quest for revenge and the ruin of his sons' lives. No reference is made to his status as Vietnam veteran nor does the show imply that John, too, found himself at the receiving end of domestic violence. All in all, he remains mostly unsympathetic and underdeveloped, two features that may consistently warp the audience's perception when placed in front of a younger and different iteration of the character. However, the discrepancy works in *The Winchesters*' favor because it fools viewers into thinking that the show will uncritically reproduce the societal stigmas that surround mental illness and PTSD (Parrott 2022). Moreover, given the prequel's focus on the Vietnam War, any fears on the reassertion of "privileged and dominant perspectives" (Quintero Johnson and Miller 2016: 12) are not entirely unfounded.

Hereby, the dismissal of danger, violence, craziness, and volatility (Mittal et al. 2013) become the more fruitful and expose the "moral economy [affected by] values, behavioral norms, and ethical assumption" (Higashi et al. 2013: 13) found in media, healthcare, and everyday life. Rather than working in terms of perjorativity and romanticization (Stuart 2006; Sieff 2003), the screenwriters introduce a more multifaceted portrayal that by-passes some of the fallacies inherent to on-screen mental illness (Spieker 2017; Sieff 2003; Hoffner and Cohen 2015). As a result, the show becomes richer and more complex than an initial and superficial approach may lead to believe to the point of inciting change and pushing people, like doctors, to "acknowledge, absorb, interpret, and act on the stories and plights of others" (Charon 2001: 1987). Because characters move in a world that is altogether not too different from the real one (Huxley 1963) and are driven by the same impulses that drive us, the "fears, desires, concerns,

expectations, hopes, and fantasies" of any patient (Cassell 1984: 47) are faithfully rendered and more easily explored.

For all his flaws, John Winchester remains a sick *person*, inserted in a specific socio-cultural landscape. As any patient, he exists outside of his diagnosis and symptoms and, even though he is not particularly keen on seeking treatment, his PTSD does not hinder him from completely living his life nor does it entirely alienate him from those around him. Moreover, as with Carlos who witnessed his family's murder by the hands of a demon, John Winchester's trauma is not exclusively connected to his time in Vietnam—though it may be the most recent event. His characterization strongly relies on traits that predate his military service, casting doubts on the real or, perhaps, original source of his mental illness. Given the show's propensity to discuss the failings of fatherhood and the harmful consequences faced by children, it is unsurprising that this alternate version of John Winchester finds himself in the same position as Sam and Dean.

John Winchester is a White straight male from a blue-collar family. He is "tall, dark, angry" ("Art of Dying" 1.06). He has a record of "assault, disorderly conduct, [and] vandalism" ("You've Got a Friend" 1.11) that makes his incrimination for murder believable despite his innocence. He has a propensity for self-destruction and violence, which he blames on his desire to keep people safe, especially his friends. When Mary calls him out on his suicidal tendencies and the recklessness that stems from his fears and desires, John deflects worries and accusations alike.

- | | |
|-------|---|
| JOHN: | <i>If getting you out of hunting alive means pushing myself, that's exactly what I'll do.</i> |
| MARY: | <i>So, you're doing all of this for me? That's the only reason?</i> |
| JOHN: | <i>Well, there is the whole 'saving the world' part.</i> |
| MARY: | <i>That's not what I meant. Your mom told me about you and danger and how you've run towards it every single time since you were a kid.</i> |
| JOHN: | <i>I don't need you or my mom psychoanalyzing me.</i> |
| MARY: | <i>And I don't need you using me as an excuse to avoid your issues.</i> |

("THE ART OF DYING" 1.06)

The exchange is a heated one. It questions the real motives behind John's interest in hunting, and invites the audience to look beyond John's embodiment of Western ideals of masculinity as, for example, "toughness, power, control, independence, differentiation from womanhood, restricted emotions, physical and sexual competence, assertiveness, and aggressiveness" (Canham 2009: 2). These attributes are close to the depiction of manhood found in "macho pulps" that used to circulate during the Cold War (Daddis 2020: 2), and do dictate John's actions.

A subsection of the fandom's displeasure stems from the belief that this type of portrayal reprises these images of bravado, conquest, and assertion to the point of either perpetrating racism and xenophobia, or defending American GI's. As such, the perspective of a Vietnam veteran appears both ludicrous and unforgivable (steveyockey 2022) and leads to the possibility of claiming the moral high ground while also inciting a cold and unsympathetic reading of the show's main character. Unlike his friend Carlos, who decided to enlist when a "judge said it was either jail or service" ("Masters of War" 1.04), John joined as a volunteer. Not only that, he joined the army between 1969 and 1970, years closer to the Fall of Saigon than to America's initial involvement. By then, disillusionment had already settled (Capps 1991), shattering the pretense of decolonization and the fight against the spread of communism.

In *The Winchesters*, there is no mention of the high casualty toll, a condemnation of war itself, or any interest in verging in on the debate surrounding the uniqueness of that moment in American history. Neither does the show open a voyeuristic window into the horrors of war: The Vietnamese landscape, a flying helicopter, the exploding landmines, and John's friend Murph turning around in distress and asking "John?" ("Pilot" 1.01) are enough to conjure horrific scenarios in the minds of the audience. However, as traumatic as these events may be, they are symptomatic of something else, as John's mother makes clear upon his arrival home.

MILLIE: *Far as I'm concerned, you're the same age as when you illegally joined the Marines.*

JOHN: *I had a waiver.*

MILLIE: *By forging your dad's signature. Two years gone, look at you.*

JOHN: *I'm fine, mom.*

MILLIE:

The hell you are. You've been chasing your dad since he walked out our door. I know that's why you enlisted. But it is time to let go of the past.

("PILOT" 1.01)

Millie's words expose the crux of the matter: John's incapability to forget about his father's desertion. Henry Winchester's voluntary disappearance incites guilt and feelings of inadequacy that survive well beyond childhood ("Reflections" 1.07). War is not the beginning and end of all things, even though it left Americans, like John, "sadder than it did wiser" (Kort 2018: 2). The restlessness and sense of futility that are associated with post-war America (Taylor 2003) shape John only partially. The ongoing reminder of John's pre-existing issues reframes the show's focus on his childhood and adolescence by hinting at the connection between absent fathers and children embracing patriarchal values and hypermasculinity (Perrin et al. 2009) as a form of compensation (Carls Smith 1964).

These feelings, that lead to seemingly extreme behavior, are only one part of Henry Winchester's dark inheritance, though they may be the most obvious ones. In *The Winchesters*' sixth episode, the monumental change brought on by a father's disappearance takes on new meaning through the introduction of domestic violence. Halfway through the episode, John is possessed by the vengeful spirit of a dead hunter, Mac. Mac was "a dark soul", "a damn good hunter", and had "a rough childhood... abused by his dad, bullied by the other kids, and he thought if he became a hunter and killed real monsters, that would help with the pain that the other kind had caused him" ("The Art of Dying" 1.06). Although, unlike Mac, John does never turn to magic, the two share a likeness. The momentary loss of control allows John to speak freely and reinforces *The Winchesters*' position inside the canon of family melodrama which, as noted by Elsaesser, leaves the audience with "the feeling that there is always more to tell than can be said [which] leads to very consciously elliptical narratives" (2012: 444). The use of a mediator is therefore necessary for truthfulness as it provides enough detachment to condemn the imposition and enactment of hypermasculine and patriarchal ideologies.

When Mac proclaims, "You can't hurt me. All I've ever known are clenched fists. Learned that from my old man. There's nothing that you can do to me that I haven't already survived" ("Art of Dying" 1.06) he is not only talking about his relationship with his father, but also John and Henry's by

proxy. Far from being a justification of John's behavior, it merely underlines the association between familial violence and emotional behavioral problems (Haggerty et al. 1996; Turner et al. 2006), anger and aggression (DiLillo et al. 2000; Turner et al. 2006), as well as depression (Branje et al. 2009). As the myth of the father/God comes tumbling down, the sense of dissatisfaction augments, together with the understanding that interpersonal relationships are the most important thing and ultimately have the potential of becoming the saving grace and redemptive force.

The reliance on meaningful connections is possible because "John isn't as closed off the way Henry was" ("Reflections" 1.07). Latika's understanding of her friend's past and present suffering confirms the possibility of empathy and, in turn, implies that to "supplant patriarchal power with fraternal equality" (Howell 2014: 173) is the only way forward. Fathers have to be forgotten if not forgiven to find fulfillment outside of the God-the-Father and Father-the-God model. For John Winchester such a dismissal is not an easy task despite the sense of belonging he feels within the 'Monster Club' and the contentment he did not manage to find in Vietnam. John Winchester's struggle is as expected as his final resolution to keep on hunting, leaving the show's final episode open-ended. The outcome of his choice is, perhaps, unimportant insofar that *The Winchesters* is not set up to be a trial. The audience is not asked to play judge and jury to establish whether or not John deserves to overcome his PTSD and start a journey out of anger and mental illness. What the show does do, is present a complex portrait of an unlikely patient while testing the limits of empathy and connection. In doing so, it challenges its own canon and the depictions of patients at large.

3. GOING UNDER: ILLNESS, MORALS, AND GENRE FICTION

Within the first two minutes of *The Winchesters*, the show establishes that John suffers from PTSD. Alone on a nearly empty bus, he wakes up from a nightmare —on alert and gasping for air. The brief array of images is sufficiently poignant and more effective than any possible voyeuristic window into the horrors of war. The brief, flashing memories at the beginning of the pilot episode are enough to conjure horrific scenarios in the minds of the audience. The sequence lasts three seconds, yet it provides an interesting portrait of the sufferer, iconographically linked to some of the tales of lonely repatriation featured in historical records. Furthermore, it

effectively paves the way for the writers' interest in mental illness and the depiction of the lasting effects of trauma.

The show's initial focus on Vietnam is perhaps a given, considering John Winchester's status as a veteran. However, the government's lack of interest in soldiers and veterans (Milam 2009) is only secondary, notwithstanding the discussion of such shortcomings in episodes like "Masters of War" (1.04). Even so, while not ongoingly remarked on, the kind of trauma caused by the active participation in the Vietnam War is never far. Firstly, because of the historical connection between PTSD and the anti-Vietnam War movement (Nicosia 2001) as well as PTSD's original iteration as Post-Vietnam Syndrome (PVS), a post-traumatic disorder with symptoms that ranged from intrusive thoughts to psychosis and paranoia (Friedman 1981). Secondly, because John's trauma takes on the shape of a matryoshka doll: war is the most recent and prolonged traumatic event in his life and, although the show will later add childhood abuse to it, it is the point of convergence between reality and symbolism. Notably, the presence of two different levels of interpretations does not result in vagueness for the temporal and geographical markers are ever-present, providing the show with a distinctive American uniqueness. The introduction of metaphors to speak of the unspeakable does not play into the fictional dichotomy of altered perceptions and delusion either. It merely offers the writers the chance to circumvent the limitations imposed by language (Cross 2010; Harper 2005) and the necessity to find ways of portraying a non-biological illness.

It follows that the show belongs to the slow-growing corpus of media that deals with mental illness (Pieper et al. 2023; Özkent 2023). At a time when quantity is not synonymous with quality and the "expressions of myths about the world" (Gilman 1988: 37) remain the same in spite of the push for more inclusivity and better representation, positive and/or neutral approaches cannot be taken for granted still. For example, *Legion* (2017-2019) and *Homeland* (2011-2020) are relatively recent but both television series embrace detrimental and overly dramatic renditions of mental illness (Sibielski 2021; Wondemaghen 2019). Amidst the larger group of media, *The Winchesters* provides an interesting portrayal because of its dismissal of negative stereotypes and sensationalism, as well as its refusal to look at the world with rose-tinted glasses, notwithstanding the discarding of an excessively pessimistic outlook.

The Winchesters is a product of popular culture. What's more, it is a show that aired on The CW, a channel still associated with female viewers between the ages of 18 and 34

(Gough and Hibberd 2008) and with trashy television shows focused on “daddy issues” (Moore 2022). While these two features often resurface in criticism, neither are a limitation. The necessity to produce low-class entertainment, characterized by “frivolity” and “mass consumption and mass distribution” in order to feed into “consumer culture” (Foster 2016: 6-7) does not affect the show and prove to be an asset insofar as the final product may end up reaching a larger audience. Furthermore, the writers’ approach to the story and to the depiction of mental illness does not lose any quality, allowing for the construction and re-proposition of a fresh exploration of *Supernatural*’s characters and themes. As a result, the writers manage to steer away the common misconception that mentally ill people are “confused, aggressive, dangerous [and] unpredictable” (Signorelli 1989: 326) or the adherence to any trope used for the depiction of disabled people (Barnes 1992). Simultaneously, they also avoid generalizations by refusing to exclusively depict veterans in terms of “corrupted, tarnished, and ruined innocence” (Dean 1997: 10).

The multifaceted nature of experiences, come together in stories about people “who have already shown their vulnerability by having collapsed” (Gilman 1988: 1), ultimately converge, aided by the exploitation of genre television and its conventions. By writing a horror show, the screenwriters are able to tap into the gothic genre’s “fixation on literal and symbolic transgressions” and its focus on “deep-seated, sometimes repressed, desires and anxieties” (Davidson 2012: 126). These set the foundations of what, in the *Supernatural* universe, is always referred to as ‘the family business’, marking the generational nature of trauma. Therefore, the introduction of monsters is not, as sometimes argued, about the introduction of the Other as the incarnation of minorities that must be killed in the name of White supremacy. Rather, the Other represents a shocking aberrations of humanity that cannot be discussed openly due to their taboo nature. The ongoing inclusion of storylines centered on lost childhood innocence, violent fathers, and patricide creates what Miller defines as “a complex tissue of repetitions and of repetitions within repetitions” (1982: 2) which, in turn, redirects the audience attention to subtextual matters of a certain importance.

The endless iteration is made possible by *The Winchesters*’ monster of the week format, which requires the use of episodes in which “the characters fight a villain who is expeditiously defeated at the end, never to be dealt with again” (TV Tropes n.d.). The ongoing battle against monsters, who necessarily retain some semblance to humans (Schrempp 2016), is a battle against the source of trauma itself and, in this instance,

represents the strive to overcome mental illness. Any hunter enters the lifestyle in the aftermath of a traumatic event, either because of prolonged exposure or a single life-changing moment that “temporarily or permanently alter[s] their ability to cope, their biological threat perception, and their concepts of themselves” (Van der Kolk 2000: 7). When Mary admits that “my parents never let me dream like that. Being a kid who killed monsters was my only option” (“You’re Lost Little Girl” 1.03), she not only hints at a broken childhood, but also at the real truth about hunting. “Monster Club is a secret” (“You’re Lost Little Girl” 1.03) out of necessity, shame, and guilt. To be a member of it implies an overall loss of innocence more than it implies an easy outlet for violence. It is the fight against “horrific damage and suffering” (Schmidt 2016: 169) and against its perpetrators.

In the case of John Winchester, hunting provides a framework that allows him to reframe his past experiences through abstract concepts in order to rationalize them and eventually overcome them. Even so, not all of these are treated equally. When, in the first episode, he is sitting in Mary’s car, he has a second flashback. This time, the audience learns that Murph stepped on a landmine right in front of him and, immediately after he turned around calling for his friend, blew up. The audience is aware that these flashbacks, dreams, and intrusive thoughts represent what the *Diagnostic Manual of Mental Disorders* (DSM-V) lists as “intrusion symptoms associated with the traumatic event(s), beginning after the traumatic event(s) occurred” (American Psychology Association 2013). John, on the other hand, is trying to avoid any stimuli in order to get rid of memories with “distinct here-and-now qualities” (Bar-Haim et al. 2021: 219). His suggestion that he is being haunted by a vengeful spirit is quickly refuted by Mary, leading them to the following conversation:

- | | |
|-------|---|
| MARY: | <i>You are not being haunted.</i> |
| JOHN: | <i>Why is that not comforting?</i> |
| MARY: | <i>Tell me what you are seeing.</i> |
| JOHN: | <i>I keep seeing my friend Murph. I still have pieces of his necklace in here. Silver cross. It’s all that was left of him. I see the face of everyone I couldn’t save.</i> |
| MARY: | <i>So, how do you cope with it all?</i> |
| JOHN: | <i>I’ll let you know when I find out.</i> |

(“PILOT” 1.01)

A reassessment of trauma thanks to the dismissal of the “wound inflicted [...] upon the mind” (Caruth 1996: 3) is hereby marked as impossible. The only ways forward are upward, out of anger and mental illness, or backwards, at the risk of succumbing to monstrousness and turning into one. It is precisely in these underlying tensions that the real and the metaphoric fight against mental illness sublimates. Their repeated interconnection ensures a point of no return, where quantifiable experiences turn into unquantifiable horrors. This transition is effortless and does not come at the expense of the show’s finesse and lack of interest in mental illness as plot device or plot twist.

When John Winchester runs to the bathroom after being triggered by a silver cross necklace, memories of Murph’s death flash in front of him. His hands are shaking and he is out of breath. John is a “trained [soldier]” but, more importantly, he is “a fighter since he was four years old” (“Masters of Dying” 1.04) and reacts violently by punching a metal dispenser of paper towels out of helplessness. As he does, the audience catches a glimpse of the episode’s villain Mars Neto, the God of War, who vanishes as soon as John turns around. His aggression and anger, however, are not a consequence of his mental illness. He is not “a criminal”, nor “morally tainted” and especially not “a *bad person*” as common misconceptions would have it (Wahl 2003, 75), notwithstanding his preference for the “more punchy” (“Teach Your Children Well” 1.02) part of hunting. Thanks to the clear distinction between realism and symbolism, the audience becomes aware of why and when *The Winchesters*’ main patient acts the way he does and, in doing so, manages to avoid the kind of norms that can be found both in fiction and real life (Stuart 2006) and ultimately provide an altogether more humane portrait of a mentally ill person.

The ongoing re-exposure to trauma creates a vicious cycle for which triggers and the exposure to “aversive details” (American Psychology Association 2013) are followed by momentarily relief, all of them fueled by a never-ending sense of obligation. This, of course, makes for an unsustainable environment that may end up being harmful in the long run. The downside of hunting surpasses the privileges even in those instances in which the day is saved because all does not necessarily end well. Thus, the existence of monsters that the characters must fight not only enables John’s confrontation with the cause of his PTSD, but also ensures an outlet for all of its symptoms at risk of making things worse.

The idea that all monsters must be killed indiscriminately (“Legend of a Mind” 1.05) feeds into hypervigilance and paranoia as well as reckless and self-destructive behavior,

which prolongs the “marked alterations in arousal and reactivity” (American Psychology Association 2013) of the patient and lead to persistent isolation. In John’s case, hunting becomes the reason for his crumbling relationships with former friends, such as Betty, and with his own mother too. When Millie tells him “We had a deal. You promised to come home. Instead, it’s your dad all over again. You disappear for a week and when you finally do come back, you’re covered in blood” (“Teach Your Children Well” 1.02) she exposes herself to her son’s annoyance and anger, but also anticipates John’s degenerative recklessness and self-destructive behavior. Indeed, seven episodes later, while hunting vampires, John will indeed kill himself (if only momentarily) in order to save the day. The ‘grand gesture’, however, is not praised. Rather, his observation that his “fate’s already sealed” (“Cast Your Fate to the Wind” 1.09) sounds like a cop-out that reprises previous remarks and strengthens the idea that John cannot overcome his self-blame. After all, his friends died in hell and all he got was “a lousy scar” (“Masters of War” 1.04).

These “negative alterations in cognitions and mood” (American Psychology Association 2013) manifest themselves repeatedly throughout the course of the show. However, they portray an uneven road to recovery rather than being used to “denigrate, segregate, alienate or denote the character’s inferior status” (Stuart 2006) as in other media. Indeed, because the members of the Monster Club share the same burdens, bonds are strengthened and do not become frail nor do they snap. John is not cut off from meaningful relationships — platonic and romantic — or from life. The “unstable” nature of folktales (Benson 2003: 22) from America and the rest of the world ensures the creation of connections and understanding even between individuals at different points of their journey out of mental illness. Poignantly, his mother repeatedly reaches out to him even after his disavowal of therapy and the fiasco at the veterans’ hospital. So do his friends, notwithstanding the chance that he, too, could become “more violent, more aggressive, and an even more effective hunter” because help, patience and understanding are the only feasible solutions under unprecedented circumstances (“Art of Dying” 1.06).

4. CARRY ON, WAYWARD SON: POSITIVE REPRESENTATION AND THE ROAD AHEAD

By the time *The Winchesters* started airing, the number of mentally ill characters on television and on the big screen was still relatively low despite the increase in representation

in the past fifteen years. Accurate and positive depictions were not necessarily the norm either, not only because of the occasional slip into dated conventions and tropes, but also because of the unrealistic and damaging portrayals as in the case of *Thirteen Reasons Why* (2017-2020) (Yu 2019). While these have historically led the audience to partake in activism (Olstead 2001), they are also at risk of warping people's perception of mental illness and painting an excessively negative picture.

The Ackles' announcement of a *Supernatural* prequel, online fandom's reaction to the news, and the subsequent development of the show make *The Winchesters* an interesting case study. Firstly, because it forces people to reconsider their perception of the characters as depicted in the original show. Secondly, because it challenges pre-existing narratives and misassumptions related to mental illness. Furthermore, because of the show's focus on John Winchester, questions about representation itself and empathy are also raised. These align with the prerogatives of the Medical Humanities insofar as they look beyond the mere illness and provide a portrait of the patient as person. In doing so, it flashes out an interesting and positive depiction of the patient and incites the audience to take into consideration their own bigotry and the easiness with which either by "bad luck, accident, or inverted destiny" (Schmidt 2016: 169) people may develop PTSD.

At the end of the show, when John Winchester's journey ends with the beginning of a new one, not all questions are answered. Even so, the open-ended nature of the finale does not undermine the positive approach because John is on the right path for recovery. He may not be there yet but not all is lost. The road ahead may be long and winding, though the means to go on living and handle his PTSD are all there, be it "meditation or therapy or something" ("Hey, That's No Way to Say Goodbye" 1.13). His decision to continue his pursuit of hunting is therefore unexpected in light of the necessity to leave the past behind. As John carries on with the promise of one day achieving both peace and freedom, the audience watches him and Mary driving across a stretch of American road while Led Zeppelin's "Ramble On" plays on the radio. In doing so, they stand witness, aware as much as the characters that recovery may be difficult but not entirely impossible.

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TV Series

The Winchesters (2022)

"A FUNNY SHOW ABOUT DEPRESSION": EXPLORING MENTAL ILL-HEALTH IN NETFLIX'S *BOJACK HORSEMAN*

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animation; anthropomorphism; serialization; television studies; *BoJack Horseman*

ABSTRACT

Bucking the trend of live-action television, the Netflix production *BoJack Horseman* (2014–2020) takes a rather unusual approach to its portrayal of mental ill-health. Often described as a “funny show about depression”, the animated series about an anthropomorphic horse named

BoJack relies on a colorful drawing style and an ensemble of wondrous characters to lure its audience into “dark places” of mental distress. Over the course of its six-season run, the show has managed to address a wide range of mental health issues, including trauma, depression, and addiction, as well as attempts to treat them. This essay examines how certain production choices – namely high serialization, animation, and anthropomorphism – can serve dramaturgical purposes in mental TV storytelling. Although the parameters are initially discussed separately, this study also attempts to present first assumptions about how their aesthetic interplay at the moment of reception may affect the audience’s perception of mental ill-health.

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“I am constantly filled with a lurking loneliness, a yearning, clinging to the notion that something outside of me will fix me. But I had had all that the outside had to offer!”

Matthew Perry (2022: 10)

1. INTRODUCTION

At least since the broadcast of *The Sopranos* (1999–2007), contemporary series have embraced a realistic approach to depicting mental disorders: whether it’s New Jersey’s infamous mobster Anthony “Tony” Soprano (James Gandolfini) seeking professional help for his debilitating panic attacks, Hannah Horvath’s (Lena Dunham) struggle with obsessive-compulsive disorder in HBO’s *Girls* (2012–2017), or *In Treatment* (2008–2021), which highlights a variety of mental health conditions by following along psychotherapist Paul Weston (Gabriel Byrne) and his weekly sessions with various patients.¹ Although these examples can undoubtedly be recognized as fictional, recent drama series strive for an authentic *modus operandi* in hopes of critical acclaim and cultural prestige (Kanzler and Schubert 2022, 9).² It seems unsurprising, then, that modern series like *This Is Us* (2016–2022) or award-winning television drama *Euphoria* (2019–) are conceived as *live-action narratives*; relying on human actors for their staging of depression, addiction and other mental dysfunctions.

Given this trend, it appears paradoxical that numerous reviews cite an animated series about talking animals as the poster child for shows about mental distress: the talk is of *BoJack Horseman* (2014–2020). Often considered to be the “funniest show about depression” (Lyons 2014), the Netflix production about eponymous lead character Bojack (voiced

by Will Arnett), an anthropomorphic horse and washed-up ‘90s sitcom star, has repeatedly been named “one of the most nuanced, honest depictions of [mental illness] on TV” (Kliegman 2015). Despite its bright and vibrant drawing style and its collection of whimsical characters, the series addresses a wide range of mental and neurological pathologies, such as existential crisis, substance abuse, or childhood trauma, as well as their treatment, whether through antidepressants, rehab, or individual coping mechanisms. Even though *BoJack Horseman* has received critical acclaim in the feature pages – Time Magazine called it “the most important animated series since *The Simpsons* [1989–]” (Berman 2019) –, until recently there has been a large void in the field of television studies.³ To date, there have been few essays that examine the mental states of the animated characters (e.g. Rivers 2024). Furthermore, existing research focuses almost exclusively on content, while aspects of narration and aesthetics are only mentioned in passing.

For this reason, the purpose of this paper is to explore *how* the stylistic choices of *BoJack Horseman* contribute to the way modern television is able to narrate mental disorders. This will be done in two steps, beginning with a synopsis of the series’ story (*histoire*) to highlight relevant motifs in accordance with existing research. This is followed by an analysis of the *discours* – “the modus of presentation” (Chatman 1980, 43). In particular, this article discusses three parameters that are essential to the show’s representation of mental ill-health, namely being a (1) highly serialized (2) animation (3) about anthropomorphic characters. The analysis is accompanied by the hypothesis that *BoJack Horseman* succeeds in its portrayal by artificially increasing the parasocial⁴ distance between sensitive topics and its audience due to the aforementioned production choices, thus creating a “safe forum” to engage, relate to, or identify with the characters and their “different ways of being” (Gleason et al. 2017). By focusing partic-

1 Especially the portrayal of psychotherapy has proven to be a popular narrative in recent decades. According to Kang (2023), television critic for *The New Yorker*, the increasing destigmatization of mental illness in the broader culture has led to an almost inflationary rise of a genre the author labels as *Therapy TV*. For further approximations, see Staines (2008).

2 In this context, reference should be made to *13 Reasons Why* (2017–2020), which has been unanimously chosen by academics and the popular press as a venue to discuss the limits and consequences of realism in depicting mental illness. Above all, the explicit depiction of the suicide of 17-year-old protagonist Hannah Baker (Katherine Langford) was criticized, leading to its subsequent deletion. Under the premise of a modern-day *Werther effect* – a media-induced mimicry of suicidal behavior – the series has been associated with an increase in American youth suicides (Bridge et al. 2019) as well as a significant rise in internet searches on the topic of suicide (for a summary of findings, see Arendt et al. 2019).

3 It wasn’t until 2024 – ten years after the debut season and about four years after the release of the final eight episodes – that a collection of critical essays took a systematic look at the series. *Aren’t you BoJack Horseman?* (2024) features a total of 14 contributions that explore interdisciplinary issues of identity, gender, mental health, and celebrity stardom.

4 This term refers to the concept of *parasocial interactions* associated with Horton and Wohl (1956), which is used to describe how recipients relate to protagonists portrayed in the media. Often circumscribed as “intimacy at a distance” (ibid.), this article assumes that said distance can vary, depending on *how* a story is told. While the concept originally referred to real people in non-fictional television formats, parasocial relationships – as various research has shown (e.g. Keppler 1996) – can also be applied to the personnel of fictional television content, including animated stories (e.g. Krug 2017: 223).

ularly on the stylistic choices of the series, this essay can be situated in a research tradition that defines itself under the keyword of *television aesthetics* (e.g. Cardwell 2006; Jacobs/Peacock 2013). If this approach is often (mis)understood as an effusive obeisance to legitimizing artistic value, it should be made clear that this essay is not intended as a normative judgment on narrative quality. The aim is not to argue that *BoJack Horseman* is the supposedly “best” portrayal of mental illness on television today, nor to determine the medical accuracy of the conditions from which the characters may suffer. Rather, in analogy to Nannicelli (2017, 202), this study attempts to illustrate *how* certain production techniques can (objectively) serve diegetic purposes, with particular regard to the overall theme of this journal’s special issue: mental TV storytelling.

2. STORY AND MOTIF IN *BOJACK HORSEMAN*

Set in a surreal, cartoonish version of Los Angeles (designed by illustrator Lisa Hanawalt), *BoJack Horseman* revolves around the misadventures and wrongdoings of its title character BoJack: a half-man, half-horse, narcissistic know-it-all, once famous for his starring role in the fictional ‘90s television show *Horsin’ Around*. What at first glance appears to be yet another self-reflexive meta-commentary on the abysses and clichés of American show business (see Rani 2024), turns out to be a philosophically motivated character study that addresses the mental hurdles of its cast from the very first second. As mentioned in the pilot episode “BoJack Horseman: The BoJack Horseman Story, Chapter One” (1.01), the diegesis begins nearly 20 years post-fame: BoJack – now in his 50s – ekes out an existence filled with booze and self-loathing, haunted by his fading success despite his continued wealth and privilege. Suffering from existential dread, BoJack makes various attempts during the series’ six season run to stay relevant in the “industry”: from working on his book *One Trick Pony* with ghostwriter Diane Nguyen (Alison Brie), to playing his childhood paragon *Secretariat* on the big screen to campaigning for award shows. While one could argue that the narrative rhythm tends to be tightly interwoven with different periods of his career, the show seems less concerned with whether BoJack succeeds in creating some sort of legacy than it does with raising the question why he feels this desire in the first place. And – as showrunner Raphael Bob-Waksberg (cit. in Pearl 2016) notes – there can be no simple answer to this.

Instead *BoJack Horseman* offers its audience a variety of explanations for why its protagonist is the way he is, paying particular attention to the *transgenerational transmission of trauma*. According to Chesters (2024, 102), BoJack’s “penchant for self-destructive behaviors like excessive drinking and self-sabotage is spurred on by the negative reinforcement he received as a child.” Raised by his abusive father, Butterscotch, and his manipulative mother Beatrice, BoJack’s life – as indicated in numerous dialogues (e.g. 4.10, 22:45) and flashbacks (e.g. 2.01, 00:05) – has been marked by a sense of guilt since early childhood. As can be seen in “Time’s Arrow” (4.11), Beatrice blamed BoJack for “ruining” her life, obligating him to be “worthy” (15:05) of the sacrifices she had to make, since his birth bound her to an unfulfilling marriage of emotional abuse and pain. Passing on the psychological damage she inherited from her father and husband (for a detailed analysis see Chesters 2024), BoJack has grown up with “a tattered self-concept and an unhealthy perspective about his intrinsic value” (ibid.: 102). Internalizing the idea that he is unworthy of love (4.6, 19:40) or any kind of approval (3.10; 03:15), BoJack is unable to maintain meaningful relationships, convinced that people will abandon him once as they get to know him better.⁵ This explains, for example, why he would rather publish an embellished version of his memoirs than face reality:

This [the memoir] is my last chance to make people love me again. If this goes out, everybody’s gonna see the real me. Now I spend a lot of time with the real me and believe me, nobody’s gonna love that guy. (1.11, 04:30)

BoJack’s longing for acknowledgment, his yearning “to be seen” – as described in “Free Churro” (5.06) – finds fertile ground in the neoliberal environment of *Hollywood* (see Gianniri 2023), making him extremely vulnerable to external validation. His attempts to feel less broken – whether through (romantic) relationships (2.06; 2.11; 4.07), his work (2.01) or other “small” objectives “like winning an Oscar” (3.03, 17:55) – are repeatedly disillusioned by the realization that none of these accolades can fix his depressive *status quo*. Among other scenes (e.g. 3.05, 20:50), this revelation is exemplified in the following dialogue between BoJack and

5 The depiction of trauma doesn’t function as an absolution of guilt – neither for Beatrice nor for BoJack – but illustrates the complexity of perpetration and victimization. This statement is repeated throughout the series, for example when Diane remarks “that there is no such thing as ‘bad guys’ or ‘good guys’”, since “we are all just guys who do good stuff sometimes and bad stuff sometimes” (5.12, 19:00).

his “frenemy” and former sitcom rival Mr. Peanutbutter (Paul F. Tompkins):

BOJACK: *Because... I'm jealous. [...] of everything. Everything comes so easy for you.*

MR. PEANUTBUTTER: *Oh, and it doesn't for you? You're a millionaire movie star with a girlfriend who loves you, acting in your dream movie. What more do you want? What else could the universe possibly owe you?*

BOJACK: *I want to feel good about myself. The way you do. And I don't know how. I don't know if I can.*

(2.8, 18:30)

While the attainment of wealth and showbusiness-related fame is often established as a thematic hook (Bandirali/Terrone 2021, 162), these story arcs are more likely to be understood as places where the spiritual struggles of the series' ensemble are illustrated exemplarily. These struggles may vary from character to character, but ultimately, they all revolve around and are invisibly linked to a common core: the perennial mystery of human respectively anthropomorphic existence. By using impulses from existential philosophy – the most obvious being Pascal's (1670/2014, 33–42) idea of *human insignificance*, Sartre's (1947/2007) radical understanding of *freedom* and Camus' (1942/2013) *philosophy of the absurd* – as diegetic guidelines, the show provides a narrative space in which the characters' predispositions are mixed with existential anxieties to create individual sentiments of mental discomfort.

This statement applies not only to BoJack, but to the entirety of the neurodiverse main cast: For Diane, the pattern of existential *angst* is filled with her self-proclaimed mission to “make[] a difference” (1.12, 21:30) by impacting society through her profession as a writer. This motivation comes to the fore on several occasions, whether on her trip to the fictional Third World country of Cordovia as a war correspondent (2.09–2.12) or by publishing investigative reports through the media outlet *Girl Croosh* (e.g. 6.03). The realization of one's own insignificance in moments of failure often becomes a catalyst for emotional distress: “I feel like I have no purpose. And I'm 35. And if I don't change something in my life, then this is how I'm gonna feel forever” (2.04, 22:50).

Even seemingly lighthearted characters like Todd Chavez (Aaron Paul), a human twentysomething and BoJack's permanent houseguest for several seasons, do not come without mental baggage: “I'm pretty much worthless. [...] I don't have a job. I don't have any prospects. I probably won't ever finish the rock opera I'm working on” (1.04, 04:48).

In its broad approach to depicting mental (ill-)health the series avoids using individual characters as embodiments of certain impediments (see Rivers 2024, 120), instead showing how the sense of *feeling unwell* can manifest itself in different facets, in different situations or develop over longer periods of time. *BoJack Horseman* accomplishes this by addressing an extensive continuum of mental states without determining their pathological extent: ranging from stressful, but fairly common experiences such as break-ups and divorce (5.02), grief and loss (5.06), an unhealthy work-life balance (5.05), the challenges of parenthood (6.02), or coming to terms with one's sexual identity (4.01) to severe psychopathologies at the other end of the spectrum, such as Diane's social anxiety (1.01), BoJack's sister Hollyhock's development of post-traumatic stress disorder (5.09), Beatrice's worsening Alzheimer's disease (4.05) or, perhaps most obviously, clinical depression to the point of suicidal tendencies (3.12). The series thus overcomes the distinction between disrupted characters and those with a “normative” mental state, allowing these categories to coexist within a single person and permitting gradual transitions between – what the *World Health Organization* (2022) refers to as – “mental states associated with significant distress or impairment in important areas of functioning” and their consolidation as chronic disabilities.

Just as decisive as addressing of these conditions is the way the characters deal with them, showing that there is no panacea for mental health problems.⁶ On the unhealthy side, we have BoJack trying to ease his worries with week-long drug benders (3.11), abusing painkillers (5.09) and alcohol – the latter being present in almost all the shows' 76 episodes – to reach a nihilistic daze of mind (3.11, 24:10), and later trying to turn his life around by visiting the rehab facility *Pastiches Malibu* (6.01). As a result, BoJack's mind oscillates between phases where nothing matters, and everything matters too much. His actions are often united by an escapist motive, where mental health is conceived as a spatial subject (“Escape from L.A.”; 2.11). Diane tries to deal with trauma

6 This belief may be one of the reasons why *BoJack Horseman* emphasizes multiple focalizations, sometimes devoting entire episodes to individual characters other than BoJack (e.g. 4.03; 6.02).

and anxiety through therapy (5.07) and prescribed antidepressants (6.07), while Princess Carolyn (Amy Sedaris) copes by working nonstop and developing a helper syndrome (3.09) to suppress her own difficulties. Todd, on the other hand, in line with Pascal (1670/2014: 34), takes it upon himself to distract himself with actions that the series refers to as "silly Todd adventures" (2.05, 05:16), "a series of loosely-related wacky misadventures" (ibid., 21:46) mostly detached from the overall narrative.

With all of the aspects above in mind, it seems fair to call the exploration of character psychology the show's common thread, making *Bojack Horseman* an existentialist take on mental health in a postmodern world. From this perspective, the true legacy of BoJack and his entourage is the pursuit of "real, lasting happiness" (3.3, 17:45), without finding "concrete answers or easy 'recipes'" (Gianniri 2023, 33) for it.

3. DISCOURS

3.1 *Serialization and Accountability*

Despite being labeled as a sitcom (Rivers 2024, 121) – respectively *sadcom* (Sawallisch 2021) – *Bojack Horseman* aggressively deconstructs the rules of episodic television.⁷ Unlike other animated shows, there is no diegetic reset after each episode ("reset button technique"); instead, the story unfolds in a highly serialized flow of events. This prerequisite is essential to the show's portrayal of psychological distress.

Opposed to animated protagonists like Homer Simpson or Peter Griffin, BoJack does not get his long-awaited "fresh start" (6.11, 23:08) – what's done is done, and even trivial nonsense like stealing the letter 'D' of the famous Hollywood sign (1.06) has long-lasting consequences that affect the characters' mental well-being (as well as the diegetic world). The

permanence of action recalls two decisive motives that recur throughout the series: accountability and change, both of which can be addressed as matters of *agency* that differ in their temporal orientation. As Gianniri's essay (2023, 37–40) affirms, accountability is offered as a retrospective of past (mis-)behavior, thus raising the question of responsibility. Watching *Bojack*, the audience witnesses many instances of questionable conduct, ranging from minor, forgivable offenses, such as stealing a bag of muffins from Navy Seal Neal McBeal (1.03), to drastically affecting the lives of those around him. To name a few examples: manipulating Todd's rock opera (1.4), sabotaging Diane and Mr. Peanutbutter's wedding (1.09), stalking and traumatizing 17-year-old Penny Carson (2.11; 3.11), strangling his co-star and love interest Gina Cazador while high on opioids (5.11), to being involved in the death of Sarah Lynn (Kristen Schaal) by causing her relapse after nine months of sobriety (3.11). In addition, the accountability motif is reinforced by flashbacks to the pre-diegesis timeline, which adds even more events – e.g. BoJack's betrayal of showrunner Herb Kazzaz (1.08, 13:20) – to his pile of guilt. Despite being held accountable by his friends, the media (6.12) or court (6.16), BoJack finds it difficult to take responsibility for himself. In fact, much of the narrative is driven by his argumentative efforts to emphasize his supposed innocence. Since BoJack can only find salvation by separating his actions from his "deep down" (1.11, 23:42), i.e. the claim that a morally good self remains beneath his narcissistic and self-destructive behavioural patterns, he is always quick to point to external stressors for everything that happens. Such excuses range from the influences of his spatial environment, e.g. his inability to speak underwater at the *Pacific Ocean Film Fest* (3.04) or living in the "tar pit" of Los Angeles (2.11, 19:48), to the idea of genealogical fatalism, he inherited from his mother: "You were born broken, that's your birthright. [...] You're Bojack Horseman and there's no cure for that" (2.01, 24:20). This, as a site note, explains why BoJack fundamentally rejects the work of Sartre, as he reveals in "Fish Out of Water" (3.04, 00:26) and "The Amelia Earhart Story" (5.05, 18:50). As described in *Existentialism and Humanism*, Sartre (1947/2007, 29) argues that "man is condemned to be free, [...] once cast into the world, he is responsible for everything he does", leaving him "alone and without excuses". The idea of absolute responsibility not only neglects BoJack's sense of victimhood, but also evokes an awareness of his own agency, making him "nothing more than the sum of his actions" (ibid.: 37) – an assessment echoed by Todd:

⁷ *Bojack Horseman* not only breaks the sitcom formula, it outsources it through the (omni-)presence of *Horsin' Around*. As a *mise-en-abyme*, the show-within-a-show functions as an unattainable antidote to diegetic reality. In this respect, the sitcom epitomizes the image of near-complete bliss; a state of domestic utopia (Ghiara 2019: 168–169) in a world where "no matter what happens, [...] everything's gonna turn out okay" (1.01, 01:40) and every issue can be "conveniently settled in 22 hilarious minutes" (3.11, 05:16). This is especially true for BoJack, whose compulsion to watch the show on repeat resembles a longing for an alternate past, filled with "good, likeable people, who love each other" (1.01, 01:38) that never existed. Consequently, any attempt to live one's life according to the rules of a sitcom (1.03, 17:00) is condemned to failure. Vice versa, high serialization itself becomes one of the major metaphors for actuality, or as Todd puts it: "[T]his is not a TV show, this is real life" (ibid., 16:00).

You [BoJack] can’t keep doing shitty things and then feel bad about yourself. [...] You are all the things that are wrong with you. It’s not the alcohol or the drugs or any of the shitty things that happened to you in your career, or when you were a kid. It’s you. Alright? It’s you.” (3.10, 24:50)

This insight seems especially hard to grasp for someone, who by his own admission “can’t even be responsible for [his] own breakfast” (1.01, 22:25), let alone his happiness. Another example of this obstacle can be found in “The Showstopper” (5.11). Here, BoJack, driven by a drug-induced paranoia, tries to find out who is sabotaging his newfound spark of happiness. Even when he’s on the bright side of life, he’s haunted by a feeling of distrust; a “little rancid itch saying something isn’t right” (03:18). It takes little more than a *Truman Show*-style epiphany – in the form of a surreal, giant balloon image of himself floating on the horizon – to convince BoJack that there are neither conspiracies nor a revolt “to reveal [his] secrets and destroy [him]” (15:50), but that he himself is the cause of his dysfunctional life.

On the other hand, the aspect of change is attached to BoJack’s ambition not to repeat hurtful behavior, making it a forward-looking vow of improvement. And even though there are sequences where this plan appears to succeed (e.g. 6.02–6.13), he seems to be caught in a vicious cycle that gets progressively worse with every failure. The motif is therefore addressed *ex negativo*, since no lasting change becomes apparent:

“It doesn’t get better and it doesn’t get easier. I can’t keep lying to myself, saying ‘I’m gonna change.’ I’m poison. [...] I come from poison. I have poison inside me, and I destroy everything I touch” (3.12, 10:49).

In a stereotypical sitcom structure, such absence of character development and the manifestation of a diegetic *status quo* might be perceived as sad, but less drastic. After all, the impossibility of progress is already inherent in the operational logic of the genre. As Schleich and Nesselhauf (2016, 120–126) point out with reference to Fiske (2011), the fundamental conflict of episodic television such as *The Simpsons* is designed from the outset to be intractable. As a result, the characters will repeatedly make similar mistakes over and over again and will not learn any lessons, because the dramaturgical framework prevents them from doing so.

The characters’ activities lose their scope, the possibility of acting responsibly is fragile, because the series’ memory of events is wiped clean at the beginning of each new episode. In this way, narrative worlds can be created – as *South Park*’s (1997–) Kenny McCormick is *living proof* –, in which even mortality loses its horror (see also Mittell 2015, 23). Not so with *BoJack Horseman*: by implementing narrative threads across episodes and seasons – the longest of which is probably the development of BoJack’s disgruntled mental state itself – every action is interrelated with the character’s mental health, forcing not only him but also the show’s writers’ room (Topel 2018) to commit to decisions made. This seems all the more plausible when one emphasizes that the diegetic events manifest themselves not only receptively in the cognitive understanding of its viewers, but – first and foremost – in the memory of the portrayed characters. Following Mittell (2015, S. 133), in order to have a chance for character development, the narrative must progress: “a core facet of seriality is that narrative events accumulate in characters’ memories and experiences.” From BoJack’s point of view, the psychic harm of many plot points derives from their potential avoidability, which exposes his good intentions as self-deception. This in turn leads to a circular pattern of behavior that Diane refers to as the *sad sack routine* (6.12, 02:50): “He’ll talk about his addiction. ‘Showbiz is awful. My parents were abusive.’ He’ll say he’s changed. That he’s not that guy anymore”, just to do it all over again. Linking Diane’s quote to Mittell’s (2015, 133) suggestion that a major part of television entertainment lies in “watching characters grow and develop over time”, it seems almost ironic that the audience can find something enjoyable in BoJack’s stagnation episode after episode. This makes high serialization all the more important, as it raises the question of whether this change will (still) occur over the course of the plot or if BoJack remains the same deeply depressed horse that viewers got to know (and possibly even like) in the pilot. Hence, high serialization is fundamental to the feeling of guilt and the steady deterioration of mental well-being, which reaches its ‘rockiest bottom’ (6.12, 05:50) just before the series finale. Ergo, the true tragedy of the narrative arises from the unrealized possibility of change, in the awareness that change could have been possible at any moment in the story. But – as indicated by the intro of the show – BoJack seems to be stuck in an eternal loop. What would make him the perfect sitcom character elsewhere, becomes the epitome of how difficult it can be to overcome psychological problems when there is no invisible reset button to press.

3.2 Bright Colors and Dark Places – Animation as a Form of Defamiliarization

While media studies have focused intensively on neurodiversity and its audiovisual representation in films of all kinds (e.g. *Wedding* 2023), the field of animated productions remains a blind spot in comparison. Despite the lack of research, there is an allusive, yet confident consensus that animation is highly suited “to provide the viewing audience an outlet for understanding people and popular issues” (Markovich 2021, 24). According to Declercq (cit. in Miller 2020), animated narration is particularly applicable to illustrate “inner worlds”, a quality that makes it useful for capturing experiences of mental distress. In opposition to live-action film, the author continues, animation does not reflect the world “as we see and hear it” and is able to offer “a window on experiences of mental ill health which may otherwise be inaccessible to some audiences” (ibid.).

Looking at *Bojack Horseman*, a first point of reference to justify this assertion in more detail is offered by Ristola (2024). In her essay, Ristola examines aesthetic techniques that she identifies as *scribbling* and *compression*. To emphasize the former, a scribble refers to a rushed and loose cluster of lines that often refuses clear form or function. With its aesthetic of liminality and transformative potential, *Bojack Horseman* uses scribbles primarily “to illustrate the fractured psyches” (ibid., 66) of its characters. Such use can be experienced in “Stupid Piece of Sh*t” (4.06): Ruminating on his worst mistakes, Bojack spirals into self-hatred. As part of his depressive state of mind, scribbles can be found in the background of the animation, hinting at the current chaos of the character’s thoughts. Thus, anarchic line work is used to visualize subjective experiences that are not indexically representational, in short: to “make the invisible visible” (ibid.: 65). To further understand of what is going on inside the protagonist’s head, the visualization is enhanced by the audio of an inner monologue, revealing a harangue of negative self-talk: “You’re a real stupid piece of shit and everywhere you go, you destroy people. Of course, your mother never loved you. What do you expect?” (22:50).

A similar scene can be found in “Good Damage” (6.10), when a combination of audio and scribbles illustrates Diane’s struggle with anxiety and self-doubt. In other scenes (4.11), the technique is used to make the symptoms of neurological disorders more tangible. With regard to Beatrice’s worsening dementia, the face of her former housekeeper, Henrietta, is blocked in flashbacks by constantly moving scribbles, im-

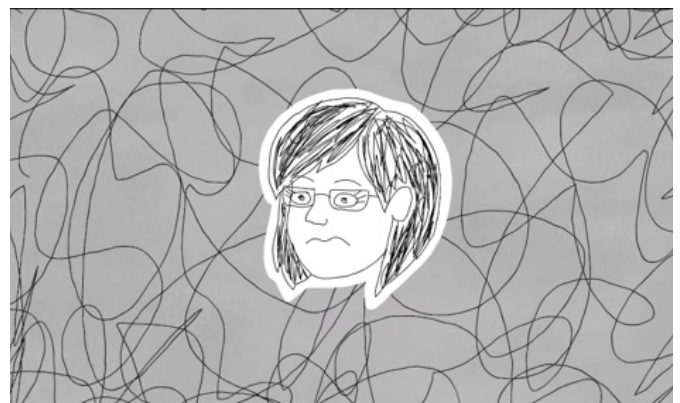


FIG. 1: USAGE OF SCRIBBLING IN “STUPID PIECE OF SH*T” (4.06), “GOOD DAMAGE” (6.10) AND “TIME’S ARROW” (4.11)

plying that her memory is rapidly deteriorating. As the use of scribbles illustrates, animation can play to its strengths when implemented as a narrative vehicle to render states of mind – whether hallucinations caused by drug excesses (1.11), depression (4.06), or even the cognitive process of dying as can be witnessed in “The View from Halfway Down” (6.15) – accessible that could otherwise only be observed externally.

While Ristola provides valuable information about scenic design choices, it remains unclear, how the general decision in favor of animation can affect the presentation of mental disorder. Considering this question, one could suggest that animation is initially used as a “welcoming” contrast to disguise the seriousness of the show’s fabula, as Bob-Waksberg (cit. in Kliegman 2015) renews his choice of medium:

We use how bright and cheerful the show is to go to dark places [...]. It feels more acceptable because it’s just a fun, silly cartoon – we can go to some of these real issues, and it doesn’t feel as heavy as it would in a live-action show.

This pragmatic conjecture – which has also been reaffirmed by the show’s voice cast (see Netflix 2020) – could be fruitfully linked to the theoretical concepts of neoformalist film theory. Animation’s ability to “let[] us see differently” (Ristola 2024, 65) can be interpreted as an act of aesthetic defamiliarization (see Thompson 1988, 10–11). By taking material from the everyday world (e.g. the feeling of being depressed) and placing it “in a new context and [...] in unaccustomed formal patterns” (ibid., 11), namely the cartoon universe of *Hollywood*, the series evokes strategic awareness of the issues presented, whereby the familiar appears strange in its new setting. This statement may be all the more true when one considers that the thematization of taboo subjects on television is primarily associated with the art form of *quality drama*.

Although defamiliarization is not an exclusive feature of animation, but is inherent in even the most conventional art forms, as Thompson admits (ibid.), there can be noticeable differences in intensity. If habitual, “everyday perception” is designed to identify the familiar as such as efficiently as possible (ibid., 36), defamiliarization strives for the exact opposite by artificially obstructing direct access to what is being depicted. Since live-action usually bears an evident resemblance to non-filmic reality, it could be argued that photorealistic series establish a referential connection more easily. As a result, the viewer “simply recognizes the identity of those aspects of the real world that the work includes” (ibid., 12). Animation, on the other hand, can be seen as a ‘roughened form’ *per se*; the possible illusion of reality is neglected from the outset due to its optical alterity. However realistic the *histoire* may be, animation maintains a certain distance simply by virtue of the composition of its media text.⁸ This, in

turn, requires that the audience is forced intensely “to concentrate on the processes of perception and cognition” (ibid., 36) in order to draw conclusions about the similarities between the content presented and its overlap with the real world. This hypothesis can be described using the example of explicitness. While certain plot points would make for graphic scenes in live-action television, e.g. the retroactively deleted depiction of Hannah Baker’s suicide in *13 Reasons Why*, animation seems to raise a barrier that can weaken the affective impulses a series provides. According to Hanawalt (cit. in Bradley 2018), it’s the child-like innocuity of animated storytelling that forms a seemingly unfitting – to not say *de-familiar* – juxtaposition to the “super-real” issues it depicts. It allows the writers to “go to darker places [...], because it doesn’t feel too dark” (Netflix 2020).



FIG. 2: COMPARATIVE PORTRAYAL OF HEROIN ABUSE IN *BOJACK HORSEMAN* (3.11) AND *13 REASONS WHY* (2.13)

tionships with characters portrayed by real human actors than with characters that are solely animated, as indicated by Sheldon et al. (2019). Although the study refers to the technique of *computer-generated imagery* (CGI), this finding strengthens the suspicion that animation is generally received in a less ‘narrow’ way, allowing for identification at a safe distance.

8 This may be also the reason why viewers tend to form stronger parasocial rela-

The result is a distorted picture of reality that must first be resolved through cognitive effort. This feature becomes particularly important, when one considers that it is not unlikely that there is a segment within the audience that is affected by mental issues themselves and may be susceptible to this kind of material – keyword: *trigger warning*.

All in all, the animation in *BoJack Horseman* could function as a first step to increase the distance between the emotional realism portrayed and the viewer’s lifeworld to possibly prevent harmful reception experiences (Arendt et al. 2019). In contrast to other series, the viewer is not confronted with the image of a human counterpart, but can behold familiarities of the real world through the lens of the absurd; a point that can also be examined in relation to the show’s anthropomorphic ensemble of characters.

3.3 Anthropomorphism

As the dominant trademark of the show, anthropomorphism is one of the most discussed topics for deciphering the media text of *BoJack Horseman* (e.g. Alberti 2024, Varela 2024, Haga 2024). After all, as the title of the series and the outro song make unmistakably clear, the audience is dealing with a character whose identity incessantly oscillates between the categories of horse and (hu)man. With this choice, the Netflix production makes use of a storytelling technique whose roots go back to antiquity and the fables of the Greek poet Aesop: understanding mankind by using animals as surrogates. While anthropomorphism has a long history in literature, its use in film and television is comparatively recent. And even though the creators of *BoJack Horseman* (cit. in Di Placido 2020) affirm that they “were always looking for opportunities for humor” and no lectures, they still seem well aware of the “cultural footprints” they are following, when they turn the parable *The Tortoise & The Hare* into a subtle background joke (5.12, 08:45). Even if anthropomorphism can occasionally be used for no apparent reason (Haga 2024: 47) or simply function as leeway for plump animal puns like the cameo of celebrities like Quentin Tarantino (1.07) or Maggot Gyllenhaal (2.03), it would be thoughtless to assume that hybrid characters in *BoJack Horseman* serve no parabolic purpose.

Undeniably, animals are an integral part of the narrative world. Because they coexist as equals and share a similar way of life, it’s perceived as perfectly normal for humans to interact, work or party with animals on a daily basis, or even to engage in interspecies relationships with them (for a detailed

analysis, see Alberti 2024). As the concept of anthropomorphism is not conceived as a strict dichotomy in which characters either behave in accordance with their animalistic origins or fully human, it’s surprising how *humanized* the ensemble of *BoJack Horseman* is constructed. As Haga (2024, 46) points out, the narrative is based on the premise “that every character behaves like humans, even though their visual appearance is that of an animal.” As further explained, *BoJack Horseman* rarely derives from these principles. Since *deviations* – as the author calls the transition to *pure animal behavior* – are largely absent and not subject to any functional logic, animality is present primarily as a matter of visibility; hence framing BoJack as a “human trapped in a horse’s body” (ibid., 58):

The reason we accept BoJack as a relatable person is through his performativity. Although he is aware of being a horse, this is only on the level of visual appearance. He behaves like a human being: he hides pills like a human addict, lies, eats, mourns, and worries like a human. (ibid., 57)

Balancing a human inner within an animalistic exterior resembles a dramaturgical tightrope maneuver, since the series must simultaneously succeed in creating a sense of resemblance that is nonetheless perceived as defamiliar to create an “ideal playground in which to explore the internal issues of mental health” (Rivers 2024, 127).

Resemblance, in the sense of a representational, “true-to-life” quality, can be found in the emotional realism of the show, which expels the character’s experience of mental distress as recognizable to its (human) audience. As the series demonstrates in many places, BoJack’s problems are rarely caused by his animalistic nature; especially his conflicted family situation is framed as relatable since Diane suffers from comparable problems (6.10). According to Keppler (1996, 17–18) such conformity is essential to enable parasocial interactions, since the interest we take in the life of a fictional character arises in much the same way that viewers engage with fellow human beings. This impression is echoed by Krug (2017, 237), who says that animated creatures are particularly well received when they are endowed with identifiable human characteristics.

BoJack’s horse body, on the other hand, provides a “palatable vehicle” (Varela 2024, 31) to explore these uncomfortable, sometimes hurtful human experiences in a compelling manner. First, by making the characters humans in disguise, the series creates a momentum of universality (Haga 2024, 47).

Asked about his decision for an anthropomorphic cast, Bob-Waksberg (cit. in Topel 2018) commented that:

by making Bo[J]ack a horse, it allows an audience to project themselves on him in a way that if you were looking at a picture of Will Arnett, you might not be as inclined to. [...] By making them more foreign, they become more relatable.

While “universal” characters might benefit possible identification, it should not be overlooked that the character design also comes with critical implications. For Robertson (2015), anthropomorphism functions as a form of whitewashing, allowing the show “to take all the shortcuts that come with not having to consider race a factor in [...] life.” If BoJack wasn’t a horse, Robertson continues, not only would *BoJack Horseman* be just another show about another difficult male antihero in the vein of Walter White or Don Draper, but many of the show’s elements would be considered as problematic (for an opposing position see Alberti 2024). Although Rivers (2024, 128) agrees with the statement that “if BoJack were not a horse, he would essentially be a white middle-aged man”, she nevertheless sees anthropomorphism as expedient in the depiction of mental illness. To the author, “othering” BoJack is a necessity to provide the distanced space required to explore his mental (ill-)health effectively:

His horseness allows him to be disconnected from the typical constructs of a white middle-age male lead, and that of a position of power, and highlights the humanity of his struggles all the more poignantly as a result. (ibid)

The process of artificially creating and utilizing incongruity thus seems to be a double-edged sword. On one side, anthropomorphism may diminish the importance of cultural influences; on the other side, the oddity of the characters provides an easy way for the audience to engage with sensitive subjects beneath the bright, colorful, animalistic surface.⁹

Last but not least, anthropomorphism provides ground for humor, which in turn allows viewers “to better connect with stigmatized and uncomfortable topics” (ibid., 127). Since

it is often assumed that irony and sarcasm can be used to distance oneself from the earnestness of life (e.g. Martin 1998, 42), this effect is twofold in *BoJack Horseman*. First, BoJack distances himself from his own feelings by using sarcasm to confront hurtful thoughts, e.g. by repeatedly referring to himself as “a dumb sitcom actor” (2.9; 22:30) or diagnosing himself with “an internalized self-hatred of horses” (6.6, 15:50). This distance is doubled when the show offers its audience comedic exaggerations of sensitive issues like alcoholism, while still reflecting on their harmful effects. In short, it may be a simple presumption, but it just seems less bad, when a 1200-pound animated horse drowns its sorrows in horse tranquilizers (1.2) or needs only “one vodka bottle for every day of the week” (5.9, 08:15) that when a human behaves that way.

4. CONCLUSION

Even if neither Bob-Waksberg nor Netflix (see Kliegman 2015) originally intended *BoJack Horseman* to be a multi-season revelation about the depths of mental distress, the series has claimed a unique way of doing so as it got progressively darker throughout its run. The feat achieved is a narrative that does not shy away from tackling sensitive topics, but presents them to its audience in a tolerable, considerate way. This impression is attributable to a balance of dramaturgical procedures of approximation and defamiliarizations. The serial form, or more precisely the high degree of narrative serialization, can be seen as an imitation of the finality of (real) life, whereas animation and anthropomorphism simultaneously obscure the view of this very reality. While both parameters are said to be capable of creating aesthetic distance on their own, it seems plausible to assume even stronger “distancing effects” (Rivers 2024, 127) when these factors are in play together and mutually reinforce each other. It’s not without reason that animation and anthropomorphism are often conceived as an inextricable unit. Varela (2024, 30), for example, formulated that it’s the *animated anthropomorphism*, which functions as a device “to develop challenging discourses in an allegorical and more palatable way for audiences.” Perhaps to gently teach us – as human viewers – that when we look at BoJack Horseman and the *Hollywood* ecosystem, we often look at ourselves (in a highly exaggerated way, of course). The element of humor, which also distinguishes *BoJack Horseman* from contemporary depictions of mental ill-health, and which unfortunately came up short in this essay, certainly contributes to this as well.

⁹ This conclusion is also supported by a study from the University of Toronto. Although the study by Larsen et al. (2017) refers to the effects of anthropomorphic characters on the learning behavior of preschool children, the author’s findings support the impression described here that human characters have a greater potential for identification with the recipient.

Further research would therefore be promising. Especially in light of years of stigma, it seems all the more important for research to open up to new, unconventional approaches and to redefine television (aesthetics) as a useful avenue to understand psychopathology (see Wedding 2023). After all, and this does not seem to have changed to this day, media is still "the public's most significant source of information about mental illness" (Baun 2009,32); not only for people without experience of mental health conditions, but also for those troubled with mental agony. In this context, to quote creator Bob-Waksberg (cit. in Netflix 2020) one last time, shows like *BoJack Horseman* can provide their fans helpful "vocabulary to talk about feelings that they have had, relationships that they never quite understood", which may allow them to get help they didn't quite know how to ask for. Or to end with the last lines of Todd Chavez: "Isn't the point of art less what people put into it and more what people get out of it?" (6.16, 10:53).

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THE MEANING OF CAREGIVING IN KOREAN TELEVISION DRAMAS WITH PROTAGONISTS WITH MENTAL OR DEVELOPMENTAL DISORDERS

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ABSTRACT

This article examines underlying themes in popular Korean television dramas' depictions of mental and developmental disorders. I specifically focus on three television dramas whose plots center around various mental and developmental disorders: *It's Okay, That's Love* (2014), *It's Okay Not to Be Okay* (2020), and *Extraordinary Attorney Woo* (2022). I utilize disability studies and feminist theoretical framework of caregiving to examine how

these dramas concurrently move beyond and perpetuate the stereotypes surrounding various types of mental and developmental disorders. I argue that the above three dramas diverge from the trend of problematic depictions of disorders in Korean documentaries, films, and novels that other disability scholars and activists have analyzed and critiqued in depth. The three dramas successfully contest the false and homogenizing equivalence between caregivers always being the non-disordered and the cared always being the disordered, which perpetuates social discrimination and stigma against people with mental and developmental disorders. Instead, the dramas complicate the binary of the caregiver versus the cared and that between the disordered and the non-disordered through camera techniques and plot devices and thereby effectively contests some of the premises for Korean societal prejudice against those with mental or developmental disorders.

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1. INTRODUCTION

Antisocial personality disorder, Schizophrenia, and Autism are categorically different types of disorders in that the first two are mental disorders, and the last one is a developmental disorder. However, they are treated similarly in Korean popular discourse for two reasons. First, they are all deemed to be in a state of mental non-normativity, and second, they are considered to be a danger or detriment to society due to their non-normativity. While this is the case in different cultures, as many scholars have observed, the stigma and the resultant discrimination against individuals with mental disorders are more severe in Asia than elsewhere in the world (Krendl and Pescosolido 2020, Ran et al. 2021). While these research findings are important, scholars also acknowledge that these findings lack nuance due to the breadth of their research which disregards racial and ethnic minority status and financial and social circumstances that distinguish the mental well-being of individuals within a country (Badran et al. 2023). They contend that more nuanced research on individual cultures is also necessary (Badran et al. 2023). Following their suggestion, this article specifically focuses on one country- South Korea- and the intersection of media and social perception of mental disorders.

I focus on South Korea because it is a country that many scholars and policymakers around the world have pointed to as a country with alarming statistics of mental disorder crisis (Lee et al. 2017). Out of the population of 51 million, roughly 4.1 million Koreans visited a doctor's office in 2021 due to a variation of mental disorders, with the number of people not seeking medical care presumably larger due to stigma about mental disorders (Kim 2023). 26.5 per 100,000 persons commit suicide in the country, which is a higher percentage of people than any other OECD (Organization for Economic Cooperation and Development) country (Kim 2020). However, the nation only spends a third of the financial expenditure allocated for the care for mental disorders compared to the average expenditure in other OECD countries (Oh 2023). What is driving the negative feedback loop between mental disorders, social stigma, and the dearth of care options in Korea?

It would be presumptuous to pinpoint one specific cause of the negative feedback loop. Thus, scholars point to multiple factors, including financial factors and a culture of comparison and competitiveness against each other, as possible causative factors (Pak and Choung 2020). Many Korean scholars point to media as one of the key factors in influencing social perceptions about mental disorders (Hyun, Cho Chung, and Kim

2017, Lee 2019, Yang et al. 2022). News media sensationalize stories of incidents involving individuals with mental or developmental disorders.¹ The same applies to a majority of documentaries and fictional films that vilify mental disorders (Kim 2017a). The underlying tone in many of these sensationalist stories poses those with disorders as a danger to society and blames their caregivers for not being able to control them.

In such an environment that perpetuates the negative feedback loop that exacerbates the stigma surrounding mental disorders, Korean television dramas are perhaps exceptional in that they are popular media that often portray mental disorders in a multitude of ways. While some dramas (mainly crime genre dramas) perpetuate existing stereotypes of mental disorders, others (melodramatic genres) provide surprisingly nuanced portraits of the disorders. The three dramas selected for this article are the types of dramas that provide nuanced and empathetic portrayals of mental disorders. Through critical analyses, this article contends that *It's Okay That's Love* (2014), *It's Okay Not to Be Okay* (2020), and *Extraordinary Attorney Woo* (2022) use plot devices and filming techniques to successfully portray nuanced stories of the relationships between the caregivers and the cared and contest the false and homogenizing equivalence made between caregivers always being the non-disordered and the cared always being the disordered. Such disruptions of the binary between the caregiver and the cared directly address the ongoing debate in feminist and disability studies regarding the politics surrounding the discourse of caregiving (Molyneaux et al. 2011, Oksala 2016), which I examine in further detail in the next section.

2. MEDIA'S ROLE IN NORMALIZING CURATIVE VIOLENCE

Mothers as reproductive subjects are especially focal in the societal conception of the boundaries between disordered

1 For instance, see articles such as: Kang, Sung-Gil. "Defendant for the "Kicking Incident" Diagnosed with 'Antisocial Personality Disorder'... Same as Kang Ho-Soon ['돌려차기' 피고인 '반사회성 인격장애' 판정...강호순과 동일]." KBS News (Seoul), 6/15/2023 2023. <https://news.kbs.co.kr/news/pc/view/view.do?ncd=7700250>. Or Donga Ilbo. "The Schizophrenic Patient Who Attempted to Murder the Senior Citizen Association President Due to 'Ill Feelings' Received a Suspended Sentence ['악감정 때문' 노인회장 살해하려 한 조현병 환자 '집유']." Donga Ilbo (Seoul), 1/31/2024 2024. <https://www.donga.com/news/Society/article/all/20240131/123320700/1>. Or Choi, Seo-In. "14-Year-Old Son with Autism Spectrum Disorder Killed His Mother after Being Berated by Her ['명절이니 시끄럽지' 야단 맞자...엄마 살해한 14살 자폐증 아들]" The JoongAng (Seoul), 10/3/2023 2023. <https://www.joongang.co.kr/article/25196879#home>.

and non-disordered. Therefore, if they give birth to a child with a disorder, they are blamed for their child's disorder (You and McGraw 2011). According to Alison Kafer (2021), society demands that disabled folks deserving of care must be innocent of the cause of their disability. Such "innocence" of the disabled mandates the blame for the disorder to be cast elsewhere, which oftentimes means the mother (Kafer 2021, 422). As primary caregivers, they are tasked with the affective labor (the combination of physical and emotional labor) of being good mothers to their disordered children (You and McGraw 2011). As many scholarly researches also indicate, the societal assumption is that the caregiver is the non-disordered individual doing all the labor. At the same time, the cared is conceptualized as someone with a disorder who is the passive recipient who gives nothing back to the caregiver and the rest of society except emotional and financial distress (Dawson et al. 2016, Akbari et al. 2018, Nam and Park 2017).

However, the binary of caregiver and the cared, as well as that between disordered and non-disordered, is a fallacy, as pointed out by many disability studies scholars (Calderbank 2000, Molyneaux et al. 2011). Some scholars go as far as to argue that future scholarship should discard the use of the term carer/caregiver because the term supposedly creates an unnecessary binary between caregiver and the cared that disregards the reality where such binaries do not exist (Molyneaux et al. 2011). Through analyses of cancer patients, senior citizens, people with disabilities, and their relationship with their caregivers, they contend that often, the caregivers become the cared, thereby disrupting a fantastical binary between caregiver-cared and disordered-non-disordered (Molyneaux et al. 2011). However, such fallacies are popular because media often perpetuate the stereotypes of the dynamic between the caregiver and the cared (Chae 2015, Holcomb, Latham, and Fernandez-Baca 2015, Ho 2022).

Furthermore, according to some critics, the discourse of caregiving that focuses on the giver's supposed emotional, psychological, and physical sacrifice doubly marginalizes both the caregiver and the cared by flattening the intersecting and complex identities of the former and relegating the latter to a perpetual state of being a burden to others (Crosby and Jakobsen 2020, Morris 1991). Caregivers are expected to lose their sense of self by sacrificing their entire beings to being caregivers (Nam and Park 2017), and such societal expectations often foster mental disorders in the caregivers, who then become in need of care themselves (Molyneaux et al. 2011). This article agrees with the arguments of disability studies scholars. Nonetheless, this article still uses the

terms caregiver and cared not to perpetuate the fantastical binary between the two terms but to demonstrate how such binaries are disrupted in the three Korean television dramas analyzed in this article.

Analyses of the media's depictions of mental disorders and the role of the caregivers are important because the media plays a vital role in shaping societal perceptions of mental disorders (Yang et al. 2022). As Seo et al. point out, "Nevertheless, fear disseminated by media without direct experience tends to aggravate the perception of dangerousness regarding people with mental illness" (2023, 8). This is because discrimination is primarily enacted through social distancing (Seo, Lee, and Lee 2023). Social distancing refers to attempts to institutionalize people who do not abide by social norms (You and Hwang 2018). Nowadays, when overt discrimination against people with disorders is illegal, there are still attempts to alienate people with disorders through microaggressions that make them feel unwelcome in public settings (Park 2017, Lin, Yang, and Zhang 2018). Therefore, many individuals do not have direct experience with people who are open about their mental or developmental disorders. Eunjung Kim (2017a) defines such concerted efforts by society to ostracize individuals with disorders as "curative violence" whereby only those who are "cured" of their disability can belong in society. Kim's critique of Korean cultural conceptions of mental disorders aligns with the debates in disability studies that "has long challenged these narratives for their focus on overcoming, on the good work that good patients do to rehabilitate into good citizens after their tragic injuries or illnesses or catastrophes" (Kafer 2021, 417). Extending from Kim's argument, this article suggests that the media's depictions of individuals with mental disorders as "others" who do not belong in society and have to be under constant surveillance by their caregivers is yet another form of mediated curative violence. Therefore, nuanced depictions of mental disorders, albeit in fictional television dramas, can be an important method of undoing and moving beyond such mediated curative violence.

Granted, Korea is not the only place where media significantly shapes social perceptions of mental disorders. Past studies on media depiction of mental disorders around the world assert that those media negatively impacted societal perceptions of mental disorders (Coverdale, Nairn, and Claasen 2002, Stout, Villegas, and Jennings 2004, Riles et al. 2021). Studies focusing on television dramas and soap operas worldwide echo the grim findings in the abovementioned research analyzing other media types; while there are a few

exceptions, many popular television series still perpetuate stereotypes of mental disorders (Wilson et al. 1999, Tietjen 2020, Lopera-Mármol and Pintor Irazo 2022).

According to Kimberley McMahon-Coleman and Roslyn Weaver (2020), even though Netflix is slowly changing the overarching trend of negative depictions of mental disorders, there is still a difference in how mental disorders are treated, with violent and problematic characters often being diagnosed with mental disorders that are pointed to as the cause of their violent behaviors. Meanwhile, the main characters, who are endearing and productive members of society, are depicted as having certain traits of disorder, and yet, their disorders are never openly acknowledged and discussed, thereby limiting the chance to educate the public and to empower viewers who have the same disorders (McMahon-Coleman and Weaver 2020, Stratton 2016, Rajan 2021).

In that regard, Korean television dramas that depict endearing main characters who are upfront about their disorders are rather novel amongst popular media that garner transnational viewership. Furthermore, as with other forms of media, these dramas have the potential to influence viewers' perceptions greatly. Numerous scholarly works on Korean television dramas have established their impact on domestic audiences' conception of their own lives and the society around them (Abelmann 2003, Kim 2009). Furthermore, as an integral part of the global popularity of Korean popular culture – a phenomenon known as Hallyu – Korean television dramas have shaped the world views of fans worldwide (Gammon 2023, Liew et al. 2011). Their verified impact on societal norms and world views of domestic and global viewers makes Korean television dramas an important form of media to explore in terms of their depictions of mental disorders. In the following sections, I analyze three Korean television dramas that offer a relatively more liberating depiction of mental disorders than other forms of Korean media through the complication of various social norms, including the binary between caregiver and the cared and between the disordered and non-disordered.

3. IT'S OKAY THAT'S LOVE AND SCHIZOPHRENIA

In the drama *It's Okay That's Love*, male lead Jae-Yul is a famous fiction writer and radio deejay in Korea. However, unbeknownst to him, he has schizophrenia. When he was young, he grew up with an abusive stepfather who beat Jae-Yul as

well as his older brother Jae-Bum, and their mother. One day, while his stepfather was beating him, Jae-Yul stabbed his stepfather with a knife. Although the stepfather survived the stab wound, in a panicked moment of a dissociative psychotic episode, the mother sets the house and the stepfather on fire, thus killing him. Because the mother suffered a dissociative episode, she does not remember the incident. Jae-Yul, who did not want to incriminate his mother, falsely testified that his older brother was the perpetrator responsible for the stepfather's death, which resulted in the older brother's decade-long prison sentence. Jae-Yul's schizophrenic episodes become worse when he interacts with his brother or mother because of his guilt. He sees hallucinations and shows increasingly self-injurious behavior as the drama progresses due to his subliminal desire to die. While suffering from schizophrenia, he meets the female lead, a psychiatrist named Hae-Su, who, albeit not diagnosed with a disorder, has an aversion to sex because of her trauma of witnessing her mother's infidelity when she was young. The television drama starts when these two people—Hae-Su and Jae-Yul—serendipitously end up living together in the same house as roommates.

The drama's plot complicates the false equivalence between the caregiver being the person without a disorder and the cared being the person with the disorder. Jae-Yul, the protagonist with schizophrenia, often serves as the caregiver to his mother and to his girlfriend, Hae-Su, neither of whom are diagnosed with mental disorders. He financially provides for his mother and protects her from going to prison for murdering her husband. In his relationship with Hae-Su, he is the one who helps her overcome her aversion to sex and hatred of her mother through in-depth conversations and love. The drama dedicates a significant portion of an episode to emphasize Jae-Yul listening intently to Hae-Su's traumas while sitting at a beach and telling her that none of what happened was her fault so that she could overcome her aversion to sex. The scene makes Jae-Yul appear to be Hae-Su's caregiver. The caregiver-cared relationship is only reversed near the end of the drama when Jae-Yul's schizophrenia worsens, and he becomes suicidal. While Jae-Yul was always the one making decisions for his family, this time, his mother, as his caregiver, decides to take him out of the hospital so he could recover in a rural village.

The binary of caregiver and the cared shifts throughout the drama as the plot develops, rather than those without disorders being permanently situated in the caregiver position and the protagonist with schizophrenia being stuck in the position of the cared. The exchange of the role of caregiver

and the cared throughout the drama addresses and problematizes the social assumption that creates a binary between the two concepts when, in reality, many caregivers also need care, often provided by the family members to whom they provide care (Molyneaux et al. 2011). The plot devices depict the protagonist as a filial son and a caring love interest to endear him to the viewers. Instead of a drain on society, he is portrayed as an upstanding son, boyfriend, and citizen capable of financial and emotional caregiving.

Relatedly, the drama uses camera techniques that foster empathy for the protagonist rather than fear and aversion to him due to his disorder. *It's Okay, That's Love* uses a lot of extreme close-ups of the characters' faces. Close-ups are frequently used in television dramas to capture the characters' emotions. In the scene I analyze below, this camera technique is incredibly potent because viewers are led to empathize with mentally ill characters who would stereotypically be considered impossible to empathize with based on the Korean social practice of "curative violence" and institutionalization. In a scene where the audience finds out that Jae-Yul is schizophrenic and that Kang-Woo, a student who constantly keeps him company, is his hallucination, the camera captures a scene of Jae-Yul and Kang-Woo running alongside each other. They laugh and high-five each other because they ran into a girl that Kang-Woo loves. The camera takes a full-bodied two-shot of them having a good time, then takes a close-up of Kang-Woo running and laughing; the camera then pans to the left to capture Jae-Yul laughing and running; finally, the camera pulls out again to reveal a full-bodied two-shot but this time, the viewers do not see two men running, but only see Jae-Yul gesticulating to someone invisible at his side. Before that scene, the viewers are unaware that Kang-Woo is a hallucination and that Jae-Yul has a mental disorder.

The way the scene builds up to the revelation of Jae-Yul's mental disorder makes it so that the viewers do not see his illness through the portrayal of him as a stereotypically dangerous schizophrenic who needs to be institutionalized and ostracized, as many schizophrenic patients have been throughout Korean history (Park et al. 2012, Seo, Lee, and Lee 2023). Instead, the viewers are nudged into seeing the world from Jae-Yul's perspective. Scholars have contended that when those identified as having mental disorders speak directly to the viewers, the latter garner more positive images of mental disorders than when they were told about such disorders in disembodied and abstract manners (Coverdale, Nairn, and Claasen 2002, Parrott et al. 2021). In this context, the realistic aspect of television dramas combined with the

point of view that we are getting of a person with a mental disorder synergistically creates a moment in which the drama disrupts the negative feedback loop that imagines those with mental disorders as complete "other" who are incapable of taking care of themselves let alone others. The drama twists Kim's (2017a) concept of curative violence to demonstrate how Jae-Yul, who had uncured schizophrenia for most of his adult life, is a widely accepted member of society due to his socioeconomic success. While he is exempted from the curative violence and marginalization that other schizophrenic patients experience in their lives, his exemption is based on his ability to appear as if he is abiding by social norms, such as being a caring provider, boyfriend, and son. *It's Okay That's Love* disrupts the stigma of the supposedly dangerous schizophrenic and the binary between caregiver and the cared, as well as that between disordered and non-disordered. Similar themes can be found in other Korean television dramas, including *It's Okay Not to Be Okay*, which I will analyze in the following section.

4. *IT'S OKAY NOT TO BE OKAY* AND PERSONALITY DISORDER

The drama focuses on the relationship between Moon-Young, a successful picture book writer with a personality disorder, and Kang-Tae, an employee at a psychiatric hospital whose life seems to revolve around taking care of his autistic older brother Sang-Tae. Moon-Young's psychopathic behaviors unnerve Kang-Tae who wants to live a peaceful life with his autistic brother. Furthermore, the big mystery that both of them have to resolve throughout the drama is the question of who murdered Kang-Tae's mother. The drama implies that it is Moon-Young's psychopathic mother and that she is lurking in the protagonists' vicinity, trying to jeopardize their romantic relationship.

It's Okay That's Love, and *It's Okay Not to be Okay* share similar themes in that both dramas' plots disrupt the assumption that people without disorders are the ideal caregivers and that those with disorders need to be cared for. Societal assumptions expect the family members of the person with disorders to be selfless caregivers who not only provide affective labor for the person with disorders but also guard them against freely roaming in society (Yoon 2003). The caregivers are forced into paradoxical positions where, on the one hand, they are expected to give unconditional love and labor to the person they are caring for. On the other hand, they are

expected to perpetuate “curative violence” against the cared individuals by preventing them from becoming a part of society unless they are “cured” (Kim 2017a).

The drama highlights the conflict between the two positions that the caregivers are expected to embody to complicate the binary of the non-disordered caregiver versus the disordered cared. For example, in one of the episodes, a young man named Ki-Do with a manic disorder is admitted to the psychiatric hospital. As he talks about how he ended up at the hospital, the scene changes to Ki-Do staring straight at the camera/audience while the background changes to show him at a club with dizzying light and constantly moving people. His card is declined at the club, and the club bouncers chase after him. He starts running in the street, and the mis-en-scene makes him look like he is the main character of an action movie. He starts stripping naked as he runs on the street. Cars collide and burst into flames as he finishes his story. The scene establishes that he is a danger to society, so he has to be confined to the hospital. Up to that point, Ki-Do’s family appears to have been the perfect caregivers, doing everything they can to protect him and society from each other.

However, Moon-Young, the protagonist with a personality disorder, sees the situation differently. When she runs into him on a highway as he is trying to run away from the hospital, without question, she lets him escape by having him get in her car. Without asking him, she knows where he wants to go: his father’s political campaign event. When Kang-Tae, who is Moon-Young’s love interest and an employee at the psychiatric hospital, attempts to stop their escape, he echoes the sentiment that the mainstream society, including the viewers, presumably had at the time: Ki-Do and Moon-Young’s escape is a danger to society and themselves and they need to be stopped. However, Moon-Young ignores him and speeds off, forcing him to follow Ki-Do and Moon-Young after failing to stop them. The three of them arrive at Ki-Do’s father’s political rally, where the rest of his family is campaigning alongside the father. Ki-Do runs up to the podium, and the camera takes a close-up of his face as he confesses his status as the “ugly duckling” in the politician’s family. He talks about how he did not meet his parents’ expectations and was beaten, ignored, and neglected throughout his childhood. Then, the camera takes a long shot of him in slow motion as he tries to escape the grasp of the bodyguards. Because the scene is in slow motion, it appears as if they are all dancing together. Suddenly, after a close shot of Kang-Tae’s face, the person dancing changes to that of Kang-Tae, who is wearing the outfit that Ki-Do was wearing in the previous shot and dancing

freely. In the next shot, the dancing person reverses to Ki-Do and shows Kang-Tae staring at him from off-stage to show that the last scene was Kang-Tae’s imagination of himself dancing so freely and envious of Ki-Do’s freedom.

The scene is significant for how it complicates the depiction of relationships between the caregiver and the cared as well as that between the disordered and non-disordered. Through Ki-Do’s story, the drama subverts the assumption that caregivers can be both caring providers and stern guards that protect the person with the disorder and society from each other. In Ki-Do’s case, the family focused on their latter duty and ended up triggering and exacerbating his psychosis. They strictly abided by the concept of “curative violence” (Kim 2017a) and attempted to segregate Ki-Do from society under the assumption that it would be in everyone’s best interest. The false equivalence between the non-disordered and the ideal caregiver is shattered through this scene.

The episode complicates the assumptions that divide the caregiver and the cared into two separate categories. It shows Kang-Tae – the traditional caregiver – imagining himself as Ki-Do. Before the scene mentioned in the previous paragraph, he abides by a strictly binary understanding of the non-disordered caregiver versus the disordered care recipient. In some ways, he adhered to what Kafer calls the “innocence of the disabled” (2021, 422), whereby he carried unwarranted guilt for his brother’s disorder and mandated himself to take care of his innocent brother who, due to his innocence, is deemed a worthy care recipient. Kang-Tae, much like other caregivers of disordered people in real life, deprived himself of joy under the assumption that it is his duty to his autistic brother and that isolating and depriving himself of the joys of life is the only way he could be a dedicated caregiver (Kim and Bae 2021). However, in the scene mentioned above, Kang-Tae fantasizes about becoming Ki-Do, a person with a mental disorder, because he envies the latter’s ability to act freely against social norms. After using his imagination to put himself into Ki-Do’s shoes, Kang-Tae changes and discards his assumption that there must always be a strict binary between the caregiver and the cared and between the disordered and the non-disordered. A few days after the incident, Kang-Tae uncharacteristically gets into an altercation with a guy who punches Moon-Young on hospital grounds and gets fired from his job as a caregiver at a psychiatric hospital that was closely tied to his identity as a caregiver.

Superficially, Kang-Tae seems to harm his career. However, in the process, he also regains the freedom and a sense of self he lost while acting as a caregiver both in his workplace and

private life. For instance, after Kang-Tae leaves his job, he smiles the brightest and the most genuine smile the viewers have seen since the drama began. At that moment, he quits being the caregiver employed by the psychiatric hospital. He stops acting responsible and sacrificing his desires all the time to be a devoted caregiver to his autistic brother. He learns that he needs to lead his own life and give his brother independence instead of assuming he cannot care for himself (Kim and Bae 2021).

The drama ends with Kang-Tae completely dissolving the binary of caregiver and the cared that existed between him and his brother. Kang-Tae's brother is commissioned to use his excellent drawing skills to publish books. This is the second attempt that Kang-Tae's brother makes to live an independent life apart from his brother. During the first attempt, earlier in the drama, Kang-Tae prevents him from doing so because he cannot imagine his life away from his role as a caregiver for his brother. However, in the finale, Kang-Tae waves goodbye to his brother with a smile, and the camera zooms out to show the two cars, one with Kang-Tae's brother and the other with Moon-Young and Kang-Tae going in opposite directions. The drama does not portray a one-sided cure from the caregiver to the cared; it shows both individuals being "cured" by being freed from various social burdens. While the two dramas I discussed thus far primarily examine the relationship between the caregiver and the cared through the platonic lens, the last drama I analyze in this article introduces the issue of romance and sexuality to complicate the binary of the caregiver and the cared even further.

5. EXTRAORDINARY ATTORNEY WOO AND AUTISM

Extraordinary Attorney Woo is about an attorney named Woo Young-Woo, who has autism. She has a photographic memory of Korean laws and graduated at the top of her class at Korea's most prestigious law school. Her mother, who discarded Young-Woo, is the CEO of one of the largest law firms in Korea. Young-Woo is employed at a rival law firm from her mother's, and the drama narrates the story of Young-Woo's trials and tribulations as she navigates the various cases she has to defend while dealing with interpersonal drama with her colleagues, her mother, and her love interest. Her love interest, Joon-Ho, is a paralegal at the law firm where Young-Woo works. He is depicted in the drama as a kind-hearted and handsome man who is one of the most

popular bachelors in the law firm. While his interactions with Young-Woo initially start as him helping her when she is in difficult situations, his feelings for her grow to that of love, and they form a romantic and sexual relationship with each other despite concerns from everyone around them.

The drama depicts the nuances of the conceptions of the caregiver and the cared in romantic relationships. Social perception and the perception of even some non-autistic individuals in romantic relations with autistic partners is that the non-autistic partners either have suspicious intentions or that they are somehow sacrificing themselves by resorting to a caregiving role for their lovers (Sala et al. 2023). The latter assumption paints the romantic relations between autistic and non-autistic partners as equivalent to the dynamic between the caregiver and the cared. However, the drama complicates such a narrative that falsely creates a strict and unidirectional flow of emotion and labor between the two romantic partners.

In one of the episodes, Young-Woo defends a man named Jung-Il, who is accused of sexually violating a woman named Hae-Young with autism. During their initial interview, Jung-Il tells Young-Woo, "Why doesn't anyone believe [that we were in love]? Is it because she [Hae-Young] has a disability? Is it that impossible to believe that a non-disabled person can love a disabled one?" The scene immediately following his exclamation is of Young-Woo in a restaurant, telling her friend that Jun-Ho confessed his feelings to her. The juxtaposition of the case with Young-Woo's personal life continues throughout the episode to draw parallels between Hae-Young, the "victim" and Young-Woo. For instance, in one scene, the camera takes a close-up of Hae-Young's hands as she nervously taps her one hand with her fingers, and then the camera cuts to Young-Woo's hands to show that she is doing the same thing. Such camera work and plot device indicate that while Hae-Young and Young-Woo are different in their autism spectrum and aptitude to express themselves to others, they are similar in that they are women with autism who have non-autistic boyfriends in a society that looks at such relationships warily.

The show refuses to pass judgment on Jung-Il or Hae-Young. Even after Young-Woo finds out that Jung-Il has manipulated other women with disabilities in the past by being romantically involved with them and swindling them of money, the next scene is not of Young-Woo upset or confronting him, but that of a romantic date between her and her boyfriend, Jun-Ho. They hold hands as they walk on a scenic route when a close-up of their faces is interrupted by an off-

screen woman's voice calling Jun-Ho. A full shot of three of Jun-Ho's friends from across the street continues as they walk towards the couple. The woman assumes that Jun-Ho is volunteering with a disability assistance organization and that Young-Woo is one of his charity cases. Her assumption reflects the societal belief that disabled women can only experience intimacy through a kind-hearted caregiver (Kim 2017a). Jun-Ho and Young-Woo are relegated to the caregiver-cared status. When Jun-Ho corrects the woman's presumption and tells her that he is on a date and that Young-Woo is his girlfriend, his three friends smile awkwardly and formally greet Young-Woo, which they did not do when they assumed that Young-Woo was someone whom Jun-Ho was caring for due to his kind-heartedness. The significant question becomes whether Young-Woo and Jun-Ho's relationship, as well as that between Hae-Young and Jung-Il, as many people in the drama assume, resemble monodirectional and hierarchical caregiver and cared prototypes or whether the relationships comprise a multidirectional flow of feelings and reciprocal desires.

The episode's most revelatory and didactic scene comes when Young-Woo encounters Hae-Young outside the courtroom. The latter begs the former to help Jung-Il get out of prison because her mother and other volunteers coerced her into saying that Jung-Il raped her. Young-Woo concludes that "Jung-Il is a bad man. [...] Nevertheless, disabled women have the right to fall in love with bad men too." She advises Hae-Young to testify and make her voice heard in the courtroom because neither her mother, the volunteers, nor the prosecutor can dictate what she says and how she feels. After she testifies, the jury finds Jung-Il not guilty of rape, but the judge decides to give him a two-year prison sentence. The proud face of Hae-Young's mother and the volunteer workers around her cheering at the outcome is contrasted with a close-up of Hae-Young's face as she starts crying out loud in the middle of the courtroom. The mother is bewildered, and the scene fades with the mother continually asking her why she is crying. The interaction between the mother and Hae-Young indicates that even though the caregiver – in this case, the mother – thinks that she is operating in the best interest of her daughter, she misjudges her daughter's capability to be sexually autonomous and to form mutual relationships with a lover.

Even when the court case ends, the viewers are left with mixed feelings about how to assess autistic women's sexuality. After all, much research has been conducted regarding people with developmental disorders and their exposure to sexual violence, and it seems to indicate that individuals

with disorders, particularly developmental ones, are disproportionately at risk of sexual violence (Meer and Combrinck 2015, Kim and Kim 2017). However, too extreme of an embrace of the idea that those women's sexuality can only be discussed in the context of violence creates unfortunate situations like the one described above, where any form of intimacy between disordered and non-disordered individuals is presumed to emulate the power dynamic akin to a stereotypical caretaker and cared relationship in which the latter is entirely deprived of agency and ability to take care of themselves.

The drama attempts to contest the social assumption about romantic relations between autistic and non-autistic individuals by demonstrating an intimate moment between Young-Woo and Jun-Ho at the end of the episode after the court case ends. The automatic light in Jun-Ho's apartment corridor dims as the medium shot of the couple reveals him leaning forward towards Young-Woo, but a close-up of her feet shows that she backs away when he leans forward. The light turns back on as Jun-Ho backs up. Then, the camera turns from a full shot to a close-up and shows Jun-Ho from an angle that allows the viewers to take on Young-Woo's point of view. The camera takes an extreme close-up of his lips and her hands as she caresses his shoulders. She kisses him, and the camera takes a close-up of her feet approaching him in contrast to how her feet backed away at the beginning of the scene. She is the one in control of her sexuality.

The scene defies the misconception that a romantic relationship between a mentally disordered and non-disordered individual inevitably emulates the dynamics of a caregiver and cared whereby the latter does not have agency and is merely a passive recipient of the other's labor and love. The drama's strengths come from its complex portrayals of sexuality and romance that make the viewers question their assumption that individuals with disorders – particularly women, are asexual or are only sexualized in the context of sexual violence.

6. THINKING BEYOND THE CAREGIVER-CARED DYNAMIC

Thus far, this article has examined how the three dramas have a similar underlying theme that challenges the societal embrace of the problematic binary conceptions of the caregiver versus the cared and its false equivalence to the binary of the disordered versus non-disordered. In these dramas, the

protagonists with mental disorders are often depicted as the most insightful individuals who can serve as caregivers for others in need. Through such representations of individuals with mental disorders caregiving, the dramas complicate the presumed connection between non-disordered and caregiving. Furthermore, the dramas demonstrate similar traits in questioning the binary of disordered and non-disordered by juxtaposing the main characters with diagnosed mental disorders to other characters who exhibit more problematic behaviors – such as murder, gaslighting, and manipulation – than the former who are categorically non-disordered.

Besides the two similar tropes, there are other similarities in the three dramas regarding their attempts, or lack thereof, to disrupt the stereotypes surrounding caregiving. First, the dramas, to a varying extent, blame mothers for their children's disability and, therefore, unanimously demonstrate their adherence to the stereotype of mothers as the primary caregivers to their families. Kim (2017a) points out how, throughout Korean history, mothers were thought to be the cause of disability and, therefore, the key components for decreasing the number of disordered children. The dramas echo such sentiments. For instance, *It's Okay Not to Be Okay* describes that Moon-Young's disorder has a cause – her mother's manipulative and amoral lessons during childhood. The other two dramas blame the mother figure more subtly. In *It's Okay, That's Love*, Hae-Su experiences aversion to sex because of witnessing her mother's adultery, and Jae-Yul has schizophrenia because he saw her mother commit murder. While Jae-Yul's father is primarily to blame, the show argues that the mother's incompetence as a caregiver to take responsibility for her actions and protect her children causes one of her children to go to prison and the other to suffer from schizophrenia. Similarly, *Extraordinary Attorney Woo* depicts Young-Woo's mother as someone who discarded her to obtain her own socioeconomic success. The drama portrays the mother as someone who exacerbates the protagonists' difficulties by selfishly not taking on the role of caregiver. While the drama disrupts the socially presumed binary of caregiver and the cared, it does not disrupt the problematic gendered social stereotype that designates mothers as the primary caregivers to their children who are blamed for their children's mental and developmental disorders (Hyun, Cho Chung, and Kim 2017, You and McGraw 2011). Granted, they show mothers who have mental disorders and require care, which aligns with the feminist disability scholars' (Crosby and Jakobsen 2020) calls to complicate the idea that mothers can only be caregivers and not the cared. However, the dramas do not show the

mothers through a sympathetic lens. Instead, they are largely blamed for the difficulties faced by their children.

Second, the protagonists in all three dramas are "cured" of their disorders through the power of love that they find in a person other than their mothers, who did not adequately perform their caregiving roles. The implication is that the love they lack in their interactions with their mothers is fulfilled through the love interests who cure the protagonists' disorders with their affective labor of love. For example, in *It's Okay, That's Love*, near the end of the show, Jae-Yul is forcibly institutionalized because his schizophrenic episodes get worse, and he is deemed suicidal. However, he pleads with everyone to let him out of the hospital and finally succeeds in convincingly lying his way out of the hospital. While back home, he makes a miraculous recovery that he was unable to during his weeks in the hospital. This miraculous breakthrough arrives in the form of one phone call from Hae-Su. She calls Jae-Yul to give him an ultimatum and says that he needs to look at his hallucination in the face and discover that it is not real, or they will need to break up. Likewise, in *It's Okay Not to Be Okay*, the protagonist with psychopathic tendencies and her lover suffering from the burden of caregiving "cure" each other of their disorders by helping each other address their past trauma. Young-Woo in *Extraordinary Attorney Woo* is also able to be "cured" of specific symptoms of autism by meeting Jun-Ho, her lover. She can hold hands and kiss him in ways that she was opposed to doing with anyone else due to her hypersensitivity to touching. Posing love as the ultimate solution to mental and developmental disorders is questionable because such misinformation blames the caregivers for the people they are caring for being uncured (Kim 2017a). According to this problematic logic, the caregivers with uncured family members or love interests are not loving their cared subjects enough to miraculously cure them. While the dramas engage in thoughtful reflections of the problematic nature of the binary of the caregiver and the cared, they nonetheless still abide by societal expectations for caregivers to carry all the burden of cure and guilt associated with caregiving.

7. CONCLUSION

Media accounts can exert exorbitant power over their audience and, therefore, can be effectively used as a mode of activism (Philo et al. 1994, Kim 2017b). This is especially important in Korea because, as Dong Chul You and Se Kwang

Hwang argue, disability and disorder activism in Korea is “still yet to instigate sufficient social and cultural impacts on Korean society that change the traditional negative perceptions of disability and disablement” (2018, 1271). Perhaps Korean television dramas could assist in such efforts. After all, as some scholars (Kim, Jang, and Kim 2022) mentioned, Korean television dramas have the potential to become social phenomena that exponentially raise people’s awareness about mental and developmental disorders.

More research should be done on this issue to verify the viability of television series in changing stereotypes and misconceptions about mental and developmental disorders. In the meantime, television shows should not be discounted as superficial and meaningless entertainment, primarily because, as Nicholas Mirzoeff mentions, “popular visual culture can also address the most serious topics with results that traditional media have sometimes struggled to achieve” (1999, 21).

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