

## ABSTRACT

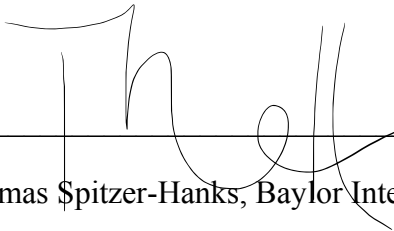
### The Rhetoric of Psychopathology: An Interdisciplinary Approach to Understanding and Talking About Mental Health

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This thesis explores the manner by which psychopathology, the study of “abnormal” cognitions and behaviors based on societal norms, is influenced and changed by language use patterns. There is a historical cycle of abuse against individuals experiencing psychopathology, which I examine through the lens of Foucault’s analysis on Europe in the age of the Enlightenment and the rise of asylums in France and Gould’s examination on the growth of the hereditarian movement in the United States. These historical abuses, in the contexts of confinement, exploitation, othering, and ostracization, are predicated on the notion that certain diagnostic terms were used invectively, thereby creating a divide between acceptable and unacceptable cognitions and behavior. Utilizing rhetorical theories posited by Burke and Butler, this thesis explores the manner by which certain language can change society’s perspective regarding the reality of psychopathology. The modern day exigency for this analysis comes in the form of horror film and digital games, as well as other popular culture platforms like Tumblr and YouTube wherein negative and fear-based narratives of psychopathology are perpetuated as incontrovertible truth. In reality, these accounts linguistically reflect exaggerated or entirely false accounts. Using an example of a podcast published on YouTube and the supportive aspects of the Tumblr platform, this thesis will examine the manner by which positive, empathetic portrayals of psychopathology can change the narrative of the aforementioned false reality. Finally, this thesis will offer potential solutions by which society can presently change the reality of fear and othering that it has instituted in these various platforms. The explored solutions consist of implementing positive, widespread portrayals of psychopathology and establishing quality mental health education for children and teenagers.

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THE RHETORIC OF PSYCHOPATHOLOGY: AN INTERDISCIPLINARY  
APPROACH TO UNDERSTANDING AND TALKING ABOUT MENTAL HEALTH

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## CHAPTER ONE

### Scope of the Problem

The most salient way to begin a project of this caliber is to begin with addressing a common quarantine activity: binge watching shows on Netflix. Certainly, the conversation of our nation, and broadly on the global spectrum, is centered and gravitating around the Coronavirus pandemic. Although this is not the subject of this paper, the pandemic has dramatically impacted the manner in which we engage with the world around us. Regarding media consumption specifically, per the point I made in my opening statement, relative to March 2019, March 2020 saw an increase of media consumption by 215% (Nielsen, 2020). Certainly, this is a trend we would anticipate, but the global average increase in media consumption, operationalized as the amount of time watching video content, is 60% (Nielsen, 2020). Undeniably, this pandemic equates to more exposure to media and its messages, which gives that form of creative expression more exigency in terms of influencing the public's perception of any phenomena that they are exposed to.

In following the trend of the rest of the world, I turned my attention to a show called *Criminal Minds*, which is about the Behavioral Analysis Unit of the Federal Bureau of Investigation. The show is incredibly scintillating, as it focuses on the investigations of serious criminology supplemented with plenty of action and suspense. This show, amongst many others, engages in discussion surrounding psychopathology, the general study and categorization of mental disorders as codified in the Diagnostic and Statistical Manual of Mental Disorders (DSM). *Criminal Minds* enters into this

discussion by highlighting the most extreme, violent, and unusual cases of psychopathology, and in so doing, they contribute to the perception that people experiencing symptoms of psychopathology are dangerous or worthy of ostracization from others.

One of the episodes that stands out in this regard focuses on Tobias Hankel, an individual that is experiencing Dissociative Identity Disorder (DID), which is the disorder formerly known as “Multiple Personality Disorder.” DID is a relatively rare form of psychopathology that develops from extreme childhood trauma, and manifests in order to protect the person’s mind from experiencing the present moment trauma or memories. As a result, the person will develop alters, other independent individuals that exist in the person’s brain, who have memories and life experiences that are often inaccessible and independent of the person experiencing DID. *Criminal Minds*, similar to what I have just explained here, includes all of this information in episodes surrounding the presentation of DID, and is faithful to the origin and diagnostic criteria of this disease. That being said, the episode to which I am referring here portrays DID as being a cause of murder, as is the case in all other episodes of the show that mention DID. In the case of Tobias Hankel, his alters are both murderous in nature; one is functioning as an archangel that is delivering punishment to individuals that he perceives to be sinners whereas the other is actually the character’s abusive, religiously zealous father who is also delivering retribution to sinners he is enraged against. Moreover, Tobias is shown to be a submissive accomplice to the actions of his alters, even though he is not consciously aware that they are his alters. He works as an IT person, and he thusly is able to hack into all of the computers of his clientele, thereby providing a means to witness them committing sins

and provide the motivation to deliver justice, which is often brutal and publicly streamed for the world to watch online. Ultimately, the episode culminates in this character kidnapping a member of the BAU, Spencer Reid, and torturing him over a prolonged period of time. Eventually, Spencer is recovered, and Tobias is killed in the resulting confrontation. It was a sad episode with a disappointing ending for the character that had experienced tremendous pain throughout the duration of his life with no satisfactory resolution for any of the involved parties.

In looking at the name of the show, *Criminal Minds*, there is a clear association between criminality and the individuals who are shown as experiencing aspects of psychopathology. Almost all of the perpetrators of the crimes throughout all fifteen seasons of the show are described as having some sort of diagnosis that falls within the DSM V, which communicates the idea that there is a higher proclivity for neurodivergent individuals to manifest as criminals, thereby effectively othering them as a group independent and out of touch with normalcy. The episode with Tobias Hankel, although it is suspenseful and well written, is certainly one branch of the show that contributes strongly to the narrative that people with psychopathology, and specifically DID in this case, are dangerous and predisposed to commit serious crimes. Already, this disorder is fraught with uncertainty and concerns over whether or not it is a true state of reality for any individuals (Merckelbach et al., 2002), particularly given the overabundance of individuals who have utilized the excuse of DID in order to plead not guilty by reason of insanity in criminal investigations (Farrell, 2011). That being said, DID rarely goes on to predict criminality, as can be seen in the infrequency of cases resulting in the acceptance of the defendant having DID (Nakic & Thomas, 2012). More often the court will



determine that no evidence exists of the guilty party truly having DID, which speaks to a very small case count wherein DID is involved in somehow playing a part in a person's propensity to commit crime. This is one of many disorders portrayed in a similar manner in *Criminal Minds*, and although there are moments wherein individuals with psychopathology are portrayed sympathetically (such as in the case of Dr. Spencer Reid who is portrayed to be neurodivergent in some way, but is ultimately a beloved and goodhearted main character throughout all fifteen seasons of the show), the main focus of the show is on the criminology associated with psychopathology.

As a result of the abundance of episodes detailing such occurrences, the viewer is left with the sense that individuals experiencing psychopathology are dangerous and very likely to commit bizarre or heinous crimes. It's also important to note that the example given here does not take into account the numerous other movies, shows, and even video games that contribute to this narrative of danger associated with psychopathology. Even contemporarily, many of the popular horror games like *Amnesia*, *Outlast*, and *Silent Hill*, all of which have been played by famous public figures on YouTube like PewDiePie (who is the single most subscribed to person on the platform) depict mental illness and insane asylums as insurmountably frightening and dangerous. Because of this immense exposure of psychopathology and associated institutions in the public eye across age groups and platforms, there is an overarching indication that psychopathology as horror is a cultural movement that has created a pervasive sense of fear amongst the general populace. The fear of neurodivergent populations is so pervasive, in fact, that the interactions with psychopathology have progressed to the point where my friends would actually comment on how scary some of these instances of psychopathology are, and how

they would not know how to interact with somebody expressing such symptomology, and nor would they care to learn.

Obviously, based on the cases illustrated here, there is an ongoing conversation about psychopathology, which has only grown with the increased exposure and attention that has been provided via portrayals in popular culture such as in the case of *Criminal Minds*. Psychopathology comes up frequently in conversations without our thinking about it. What this looks like in the real world is the utilization of words like “crazy,” “psychopath,” or “nutcase,” which most often manifest in the form of phrases like “that’s so crazy!” or “you’re absolutely insane, and I can’t believe you did that.” The frequency with which people utilize the aforementioned psychopathology-based words and phrases in casual conversation is astounding, and speaks to the notion that we neglect our role in contributing to the narrative of psychopathology in addition to pop culture influence. One aspect of communication that contributes to this reality is simply that the pace of a natural conversation does not permit careful consideration of words. When talking to another person, stopping to think through the effects of our words often feels unnatural and potentially may communicate disinterest. Moreover, because there is a delay between the conversation and potential negative effects for people experiencing symptoms of psychopathology (for example, words often do not lead to immediate ostracization or confinement), there does not appear to be good reason to monitor language so carefully in a regular conversation. Contrarily, there is no doubt that language has an incredible amount of power in terms of how we think and interact with the world. The power of language is even more relevant when taking into consideration the uniquely human attribute that this sort of communication comprises. *Criminal Minds* is by no means alone

in contributing to the overarching negative interpretation of mental illness, and because it is so high profile and visible to the public, it is easy to make the connection regarding how media references to psychopathology have immense power.

In order to provide a more seamless framework through which to universally interact with these instances of psychopathology-based rhetoric, I have composed an acronym that I will utilize throughout the remaining content of this work.

Psychopathology and the Rhetorical Effects That Equate to Negative Desirability in Society, or PRETENDS, will function as a tool to effectively unify the connection that exists between rhetoric, psychopathology, and the resultant societal effects. Indeed, as we will see in future chapters, it is language that has spoken to a historical cycle of abuse and confinement related to psychopathology. Moreover, as I will address in chapter two, the acronym PRETENDS speaks to the rhetorical theory from Burke's *A Grammar of Motives*, and the performative nature that PRETENDS plays in order to reduce guilt of identification with the object of one's vitriol. PRETENDS began as a system of diagnostic labels that allowed for the categorization of people into unacceptable and acceptable existences. These categorizations created convenient paths through which the unacceptable populations could be removed from society to be hidden, exploited, and abused in institutions like asylums. These words, which we will discuss thoroughly later, are still utilized in the common vernacular and they all are used invectively, which contributes to the ongoing, negative perspective that surrounds experiences of psychopathology. The negative perspective of psychopathology is further exacerbated in the horror genre and popular culture, although we will also see the capacity that these platforms have in positively changing this perception.

Because our use of PRETENDS usually happens without an understanding the effects our language has, there is a necessity for an interdisciplinary approach regarding how discourse affects experiences of psychopathology. The Linguistic Society of America defines discourse analysis as “the analysis of language ‘beyond the sentence,’” which implicates the broader discursive context and how this affects the meaning of the sentence (Tannen, 2020). Certainly, the contextual circumstances drastically impact the manner in which our words are received. For example, a commonplace occurrence is, when a sibling is standing in front of the television, and you yell at them to move, a parent may interpret this interaction as rude, and you may get in trouble. On the other hand, if a boulder was rolling down a hill at you, and a passerby shouted at you to move, you would do so with incredible gratitude for the individual’s intervention. Thusly, it is clear to see that our words are very much subject to the context within which they were used, and in the case of the study I collected regarding contemporary interactions that focus on PRETENDS, I will be engaging in a degree of discourse analysis in order to properly elucidate how the context impacts the meaning of the phrase and how this impacts the ongoing conversation about psychopathology.

In thinking about the conversation of psychopathology, I mentioned before that PRETENDS is extremely integrated in common dialogue, and this is true to the point that it would be unusual to go a full day amongst one’s peers, neighbors, and/or family members without hearing a related phrase like “that’s insane” come up. But if psychopathology has been othered and smothered with fear rhetoric, why then would we talk about “crazy people” so often rather than simply keeping silent? Already, we are told to avert our eyes, so why do we not do the same thing linguistically? In order to address

this complicated question, Kenneth Burke has posited a rhetorical theory in *A Grammar of Motives*, which is known broadly as the dramatistic pentad. The dramatistic pentad explains that our interactions are typically guilt motivated. That is, when we assign labels to things, we likely see something in ourselves that is related to the subject of dialogue, and we experience a guilt for identifying with that phenomenon (Burke). Thus, the only way that we may purge that guilt and distance ourselves from something that is purported to be shameful, is via the utilization of language in a derogatory way in order to dichotomize the good versus bad or us versus them narrative. In so doing, we are able to, in our own minds and hopefully in the minds of others, remove ourselves from that identification (Burke). In personal conversation, the utilization of PRETENDS may not always be expressed with an intention to harm others; that is, when saying “that’s so crazy” in the form of praise for something the individual has done, there is no deliberate intent to harm people that have been clinically assigned labels that amount to the word “crazy.” Regardless, however, such expressions are largely reductive for the population they represent, and using these words in any capacity neglects the painful, abusive history that they were utilized to promote and carry out. The guilt theory in Burke’s rhetorical framework of the dramaturgical cycle goes some distance towards explaining why we feel compelled to engage in this othering in relation to psychopathology via PRETENDS, but it does not excuse the negative outcomes that factor in as a result.

One of the most common manifestations of PRETENDS presents in the form of societal or individual ostracism. Ostracism, as it is related to othering, is an incredibly painful experience; we have all had the horrible feeling of sitting a table amongst one’s peers and feeling as though nobody wanted you there, or that everybody was ignoring

what you were saying as superfluous. It is painful, and yet we turn around and engage in similar actions every day. When driving in the car, people avert their eyes from those that are experiencing the difficulties of homelessness. I recall my friends telling me not to roll down my window, and to keep my gaze straightforward at the road so as not to be approached by the “weird guy on the corner.” This is a form of ostracism, which ultimately denies people four of their fundamental social needs: belonging, self-esteem, control, and meaningful existence (Williams, 1997). Moreover, within the brain, we have a pain circuit, which consists of the dorsal anterior cingulate cortex, insula, somatosensory cortex, thalamus, and periaqueductal gray, and it exists in order to alert the body to pain so as to draw resources and attention towards improving this condition. The pain network is clearly implicated in the case of physical pain, but also in the case of social pain, such as would be incurred by ostracism’s deprivation of the four fundamental human needs (Lieberman & Eisenberger, 2009). The notion that there is a biological basis through which ostracism can cause pain equivalent to physical sensation is demonstrative of the exigency to not engage in ostracization.

That being said, however, ostracization still occurs, and substantially encompasses the negative effects as posited by PRETENDS. In a study conducted by Wesselmann et al. (2012), they observed that when people are confronted with an individual that was assigned to be the ostracized group member, rather than being supportive, they would also join the group mentality of ostracizing them. This behavior of joint ostracization increased in prevalence when the group member was perceived to be somehow burdensome, which in the context of the study meant they would be bad at catching the ball in a simple throw and catch activity. This study demonstrates our

individual propensity to engage in this othering and subsequent ostracization, and certainly we apply this in the context of PRETENDS and psychopathology more broadly.

Often, we engage in this ostracization and othering unconsciously, as Wesselmann et al. (2012) demonstrated via their study wherein nobody was instructed to ostracize the group member, but rather the social cues of others and the language they utilized to interact with the ostracized member informed the manner in which the studied individual treated them. This societal neglect and negative desirability certainly applies to individuals experiencing symptoms of psychopathology, and is based primarily in the unconscious language utilization patterns that we employ conversationally. In engaging with PRETENDS via phrases like “that’s so crazy” even in a positive context, there is the underlying implication that the object of attention is somehow unbelievable, thereby assigning some amount of disbelief to the word “crazy” which broadly affects people experiencing psychopathology and discredits the way they interact with the world. Thusly, this phraseology contributes to the concept of othering, which is providing distinctions for certain individuals and marking them as part of a group with significant negative connotation, which can then be utilized as categorizations for ostracization.

In order to avoid this ostracization, social psychology says that our sense of self and our own self-concern strongly motivates our social behavior. That is, we adjust our behavior to meet the expectations that others have of us, which is often rooted in the arbitrarily defined standards of what is societally acceptable (Andersen & Chen, 2002). The behavior adjustment happens in response to the labels and attempts to distance ourselves from association with the object of our own guilt and shame, per Burke’s rhetorical theory, the dramaturgical cycle, and PRETENDS. Frequently, then,

psychopathology and its symptoms are classified as socially unacceptable, and grounds for the aforementioned ostracization and ridicule. In looking at the history of psychopathology, particularly as expressed by Foucault, we see a trend wherein the expression of psychopathology has resulted in centuries of subjugation, abduction, and imprisonment for those that were deemed to be “societally unfit” which often equated to some degree of psychopathology (but not always, as we will see in the case of some immigrants and ethnic minorities that were attributed these qualities without base). There is not an abundance of literature examining the influence that PRETENDS has in creating this narrative and allowing for the dehumanization of an abundance of people, but this thesis will attempt to demonstrate the manner in which PRETENDS can and has contributed to such drastic consequences. In particular, the work by Foucault will examine, through previously determined diagnostic criteria, the manner in which those labels permitted the grouping of individuals experiencing psychopathology and the dichotomization of normal versus abnormal.

Broadly speaking, language can behave detrimentally on both macro and micro scales. That is, language has the aforementioned power when applied over a conversation in a coffee shop, but also in broad academia and the medical field when diagnosing and seeking answers. Furthermore, I propose that this subjugation occurs cyclically. The pattern typically follows the institution of a word which may be innocuous in its conception, it starts being used colloquially with vitriol, the recipient of the word is made to feel lesser, it leads to the metaphorical or literal subjugation of the group it describes, and then finally the word will either die out and be replaced or it will continue to be utilized without regard for the history it represents. Foucault points this much out in his



work on the history of madness in saying that this subjugation of psychopathology has occurred previously, and that future generations need to exercise caution and awareness since this discrimination facilitated by PRETENDS is likely to reemerge in the cyclic pattern previously described. Moreover, Burke's rhetorical theory also functions in the form of a cycle wherein new language utilization patterns subsume the former ones after the individual has done all they can to distance themselves from the previous label. Thusly, the historical and dramaturgical cycles work in tandem to produce conditions for subjugation and devaluation of individuals experiencing symptoms of psychopathology, which warrants tremendous contemporary caution in order to avoid this development.

Given this pattern, it is easy to see that, even in the case of well-intentioned words and actions, there is always the potential for corruption and manifestation of PRETENDS with psychopathology as a result. For example, in the case of psychological testing and measuring IQ, they were designed in order to determine whether individuals needed different educational standards than what had been universalized previously. However, in spite of these good intentions, this testing was utilized by hereditarian movements that argued for the extermination/sterilization of individuals that were in some way neurodivergent in order to "purify" the race of humankind (Gould, 1981), which demonstrates the manner in which diagnostic labels and categorizations can contribute to dangerous consequences for groups experiencing psychopathology. The danger that is alluded to by Foucault in saying that the historical cycle of abuse will return is shown in this more contemporary example with this hereditarian movement to be true. Thusly, this thesis is going to advocate for more consideration, caution, and understanding to be implemented amongst the general populace and psychological field as a whole. A good

parallel can be drawn between this situation and the utilization of the “n word,” wherein its power was so destructive and negative that it has effectively been removed from common dialogue to the point where I would not want to say it even in this context, and certainly such a thing can be done for individuals experiencing psychopathology. This is imperative given the prevalence of psychopathology across the United States of America, which may be as high as 20% of all Americans with fewer than half receiving treatment (National Institute of Mental Health, 2019). The likelihood that the reader of this paper has experienced or knows somebody that’s experienced symptoms of psychopathology are immense, which speaks to a greater exigency for improving the surrounding social conditions and climate.

Ultimately, the broad and relatively intense focus on what is wrong with people rather than what is right with them has contributed to a stringent system of diagnoses, confinement, and the pervasive notion that psychopathology equates to being broken and “other.” The central focus of academia being placed here has extrapolated out and provided this notion to the general public, but without the added understanding of how psychopathology progresses, functions, and exists. Thus, there has been an exorbitant amount of fear (either of being “infected” or endangered) that is born of the uncertainty and misinformation that has been spread in response to the budding of this field. It is a complicated issue because, although it is good to know more in order to improve quality of life for individuals that may be suffering from symptoms of psychopathology, the knowledge is concentrated amongst individuals in the field of psychology, and has not been appropriately spread to the rest of society.

Given the more recent instances of subjugation that were inflicted such as in the case of the hereditarian movement within the last century, there is clear potential for society to move towards re-institutionalization of people experiencing symptoms of psychopathology, or, if not physically, then it may be a mental block that pushes for ostracization under the narrative of brokenness. In this sense, people would feel trapped in a societally imposed identity that could ultimately worsen symptoms and vastly decrease their sense of wellbeing and security. Already, there are instances where people are afraid to share that they are encountering difficulties with psychopathology because they may be ostracized, kicked out of their homes, or abandoned by loved ones. A result of this ongoing fear, as I've mentioned, is that fewer than half of the people experiencing symptoms of psychopathology seek help (National Institute of Mental Health, 2019). Thus, in order that we may move away from the suffering in silence narrative and allow for the broad growth, flourishing, and improved wellbeing for all, this thesis will argue for the caution with one's language choices, as well as for inclusive and well thought through terminology in the psychology field such that the diagnostic process does not assign identity to those experiencing symptoms of psychopathology.

Of particular consideration is the manner in which PRETENDS functions as a microaggression. Microaggressions, broadly speaking, are defined as “every day, subtle, intentional – and oftentimes unintentional – interactions or behaviors that communicate some sort of bias toward historically marginalized groups” (Limbong, 2020). These are typically codified in association with racial bias, but certainly have a part to play with psychopathology on the whole. That is, we frequently use these words invectively, and with intent to construe hate, and to spread personal misinterpretation and the

misattribution of dispositional attributes as static. In fact, the psychopathological rhetoric that is employed on the everyday, micro scale is almost exclusively comprised of microaggressions that speak to a broad lack of knowledge regarding what psychopathology is, how it manifests, and the manner in which individuals in that group should or should not be included societally.

In order to make this argument with particular emphasis on the cyclic nature and microaggression application of psychopathology, I will begin by doing a review of relevant literature in order to examine and explain the historical exigency and past treatment of psychopathology. Thusly, chapter one will apply a historical analysis utilizing the works of Michel Foucault in *Madness and Civilization*, and *The Mismeasure of Man* by Stephen Gould. This chapter will work to bridge the European treatment of psychopathology to the subsequent translation into the United States, and the way immigration played into the narrative of defect. Moreover, it will examine the manner in which diagnostic labels were historically applied to bolster the confinement and othering towards individuals who either experienced symptoms of psychopathology, or were intentionally pathologized due to “aberrant” thought, ethnicity, or even gender in the case of women.

Chapter two, building on the exigency described by historical treatments of psychopathology, will then describe the functioning of Judith Butler’s ideologies in *Excitable Speech* surrounding hate speech and the aforementioned dramatistic pentad as posited by Burke dealing with guilt motivation and the manner in which we purge the guilt linguistically. Then, I will go on to apply this theory specifically in the context of psychopathology, which will be a conversation supplemented by chapter one’s historical

narrative, and the words of Foucault and Gould on how interactions with psychopathology have changed detrimentally over time. In order to emphasize the manner in which linguistic determinism plays into psychology, this chapter will demonstrate the connections that the rhetorical theories posited by Burke and Butler factor into the ongoing, everyday conversation of psychopathology under the framework of PRETENDS.

Chapter three will examine the effects that the horror genre, specifically in film and video games, has on perpetuating a fear of psychopathology. Horror frequently makes use of psychopathology as a villain with most of the most famous horror movies like *The Shining* and *Halloween* depicting individuals experiencing symptoms of psychopathology. The portrayals of psychopathology are often exaggerated, but regardless they are creating a conditioned fear of psychopathology that often becomes generalized to encompass many diagnoses given that the villains usually are undiagnosed. This chapter will also explore the notion of asylum imagery, and the way the negative, fear-inducing portrayals of facilities meant to foster wellbeing may serve to dissuade someone from seeking help. The chapter will move from entirely fictionalized accounts to true crime in order to demonstrate the manner by which this fear and othering happens in all degrees of believability.

Chapter four will deal more with contemporary exigency, and I will be examining psychopathology in media and popular culture, and the manner in which that portrayal influences dialogue and subsequent interactions on a smaller scale. Utilizing the demonstrated connections in chapter two between rhetoric and subsequent/possible maltreatment of individuals experiencing symptoms of psychopathology under

PRETENDS, I will examine present day interactions with psychopathology in the context of Tumblr and YouTube. This chapter will be an examination into public interaction and engagement with the media, and the manner in which this interaction perpetuates general misunderstanding regarding the manner in which psychopathology manifests on the individual level. Utilizing the theories from chapters one and two, this chapter will investigate the effects that these linguistic portrayals of psychopathology in this medium have on the general populace.

Finally, in the conclusion chapter, we will look to future directions, and the manners in which we may appropriately interact with psychopathology that would move the conversation thoughtfully forward with the wellbeing of all at the forefront of our minds. Specifically, it will examine the value that the newly founded field of positive psychology, and focusing on positive diagnoses rather than negative can have for wellbeing, state of mind, and ultimately the treatment of present conceptions of psychopathology. Moreover, this paragraph will tie together all of the previous chapters in order to consolidate the functioning of psychopathological rhetoric as hate speech, and more positive, appropriate words that speak to understanding. It will also briefly examine how psychopathology presents, and how we can promote empathic understanding across generations and between individuals.

## CHAPTER TWO

### The Cyclic History of PRETENDS

Psychopathology and its manifestations have existed since the beginning of humanity; there are a myriad accounts in some of the oldest literary references, the most prominent of which is the Bible, that describe abnormal or aberrant behavior. Biblically, this behavior is usually attributed to demonic possession, but this perception morphs into other interpretations of psychopathology as time progresses. One of the most famous examples is in the case of the man possessed by a demon named Legion in Mark 5:1-20 (*The New Oxford Annotated Bible*, 2010). An excerpt from this section of Mark that best depicts this behavior states “when Jesus got out of the boat, a man with an impure spirit came from the tombs to meet him... No one was strong enough to subdue him. Night and day among the tombs and in the hills he would cry out and cut himself with the stones.” Summarily speaking, this passage portrays an unnamed man with a purportedly unclean spirit who would frequently go into the hills in order to engage in self-harm behaviors, which is a coping mechanism associated with different forms of psychopathology. In this case, the Bible attributes the unusual and contextually unacceptable behavior to demonic possession by a demon named Legion, and the man required the intervention of Jesus Christ in order to expel the demon. Thusly, even one of the oldest, most read texts in the history of the world has something to say about psychopathology, and where it originates from. Of course, there is certainly a negative connotation drawn here between “abnormal” behavior and the evil, demonic power from which it originates, which truly must be separated from that which is holy in order for any purification to happen. This

focus on evil and exorcisms in the Bible is what lead the predominant church authorities throughout history to implement such rituals in their common doctrine and tradition, and even to this day the Catholic Church and other branches of Christianity continuously engage in exorcisms to expel like “evils” from those experiencing symptoms of psychopathology (McNamara, 2011). Granted, in the contemporary period, trained exorcists are required to consult with appropriate medical authorities to ensure that these underlying psychopathology symptoms are addressed appropriately, but this revision in standard exorcism treatment was not implemented until 1999, when this ritual has been in practice since the beginnings of the Christian faith tradition (McNamara, 2011).

That being said, however, psychopathology and its symptoms are not solely depicted as being maladaptive or warranting an exorcism. Historically speaking, the Christian tradition of interacting and interpreting psychopathology is predicated on the Platonic values of “good and bad madness” which are ultimately based on the norms of the society within which they are placed (Screech, 2004). Thusly, when Christianity was first taking root in the times of Christ walking the Earth, it was considered to be a good variety of madness, and in fact Early Christians welcomed depictions and descriptions of their being mad, since they felt that their divergence of thought from the majority was the correct belief system (Porter & Pits, 2012). Thusly, the word itself did not always have a negative connotation within the Christian tradition, nor was this form of psychopathology deserving of any retribution, repentance, or purification rituals. In fact, one of the most revered figures in the Christian tradition was St. Augustine, who was so influential that he actually received sainthood under the Catholic Church. In his writing in *Confessions*, St. Augustine (1998) describes experiencing hallucinations, such as, in a moment of



despair and in crying to God, he hears children's voices telling him to pick up and read the book in front of him. Thusly, this symptom of some forms of psychopathology is interpreted by St. Augustine to be a divine intervention and calling to follow the Christian tradition, and is not portrayed to be a demonically oriented case of possession. The difference between this case is not deeply rooted in genuine difference between manifestations of psychopathology, but rather in normative interpretations of good versus bad psychopathology. When an individual engaged in things that were appropriate in the Christian context, it was a divine madness, whereas if they did not, then it was demonic. Thusly, although there are positive and negative portrayals of psychopathology in the Christian tradition, there is a very clear skew between acceptable and unacceptable interpretations being arbitrarily rooted in what was considered to be normative in the Greco-Roman society. It was not a simple overarching acceptance of psychopathology or a total lack thereof, but once again we see a split of acceptability and the dichotomy of good versus bad expressions of madness.

In order to get a better understanding of the range of theological acceptability of divine madness, we can actually look to a Pagan interpretation on the part of Plato and Socrates and the manner in which some of their philosophies factored into the Christian understanding of expressions of psychopathology. In the Platonic dialogue called *Phaedrus*, Socrates explains that, although sanity should be cherished and considered necessary, he denies that all forms of mania are to be feared (Plato, ca. 370 B.C.E./2008). In fact, Socrates explains that the greatest blessings are delivered through the gods in the form of manias, of which there are four identifiable kinds: prophesying, mystical initiations and revelations, poetic inspiration, and madness of mutual lovers (Porter &

Pits, 2012; Plato, ca. 370 B.C.E./2008). The privileges portrayed as resulting from these conditions of mania, which are now referred to as manifestations of psychopathology, are often so tied to happiness, that individuals experiencing this divine blessing would not want to return to their mundane existence afterward (Screech, 2004). What is interesting is that there is a connection between “organic” manifestations of psychopathology and divinely inspired ones wherein both are associated with this unbelievable happiness and ecstasy, which certainly speaks to a positive view of psychopathology on the whole in this early period of history since *Phaedrus* was written in 370 BCE. More will be said about this later as we progress through the historical narrative, but this perspective will be revived and adopted more fully in the period of the Renaissance, which contributed at that point to a solid, societal acceptance and even reverence of psychopathology on the whole.

In thinking of a different directional focus of Plato’s philosophy as it relates to psychopathology, in addition to thinking about good versus bad manifestations of psychopathology, he also examined anatomical ideologies, which would inform periods beyond the Renaissance, and therefore must be established before proceeding into the movement through history. For example, in the *Phaedo*, Plato discusses the Forms, which are immaterial, soul-like conceptualizations that function independently from the body, and this is where he posited that our conscious, thinking self was located (Plato, ca. 360 B.C.E./1911). This interpretation is one of the places where individuals began to think about locational origin of our thoughts, and this theory specifically spoke to the philosophical concept of dualism (Zalta, 2020). The idea that the soul, or the immaterial form of our consciousness, is different from the body originated here in Platonic thought,

and was built upon by philosophers throughout history. Of particular note is Descartes' principle of mind-body dualism, or what is now referred to as the theory of Cartesian Dualism; that is, the argument that the body is entirely separate from the mind and the two can exist independently of one another (Descartes, 1641/1986). The separation of mind and body, alongside the demonic rhetorical association (which is arbitrarily determined based in the societal and theological norms), has contributed to the contemporary narrative that issues of psychopathology are both incurable and even the person's fault to have developed. That is, in the case of demonic possession, this is typically associated with either sin, or a consequence of witchcraft/voodoo, both of which fall in the domain of personal control and are thus the person's fault (Davey, 2014). Moreover, in thinking about the mind and body as separate entities, the narrative becomes that, although there is little to no control over the developing of bodily illness beyond simply taking care of one's health with proper diet, exercise, etc. there can be some degree of control over thoughts and behaviors since they are entirely independent of physical ailments. Therefore there is some personal responsibility in this domain of life, as in the case of demonic possession, and a person should face the consequences of their wrongdoing via manifestations of psychopathology. There is no world within which we would tell a cancer patient that their disease is their own fault for overthinking and being vulnerable to illness, or that God or some religious entity hates them and is punishing them for some perceived disobedience. This is an inconceivable reaction since this is clearly a bodily disease, and though it has no cure, the person has done nothing to provoke the onset of their cancer. In the case of psychopathology, however, these are frequent accusations that individuals are met with; that is, they are told that it's based in

their own overthinking, or to just stop being sad, or they have sinned and the development of psychopathology serves as divine punishment.

Granted, the brain is a more complicated organ than the rest of the body, but certainly it is still a part of the body, and the lack of medical attention and research dedicated to the brain throughout history predominantly stems from these theories of independent functioning of the brain from other medical practice. The lack of understanding about the brain, then, has led to a need to try to better understand why and how we act the way we do, and this has manifested in the form of rhetoric and attempts to engage thinking about origins of psychopathology and whether they are good or not. That is, people have been coming up with diagnostic categorizations of psychopathology since the beginning with these alleged demonic possessions and divinely inspired blessings, which is certainly a rhetorical explanation that has not been effectively regulated until relatively recently, per an earlier conversation. So too are the philosophies of Plato and Descartes attempting to provide explanation for these abnormal thoughts and behaviors that have presented as a result of psychopathology. The ongoing conversation of psychopathology has some of its roots here, and certainly these interpretations have informed present day understanding, particularly in some Christian fundamentalist perspectives. Clearly, then, this initial rhetoric and early attempts to explain and understand psychopathology have a significant role to play in the historical framework throughout the progression of time even so far as to the present day.

That being said, interpretations of psychopathology did not exclusively land on the negative side, but rather have fluctuated throughout history between positive and negative lights. We have seen this already in the theological realm, but so too was it

applied societally in different historical periods, although there were cases of positive and negative interpretations that presented simultaneously throughout history. One period that was especially influential in terms of broadly applied positive interpretations of psychopathology was the Renaissance, which preceded another, impactful shift into the Enlightenment during which the development of the aforementioned Cartesian philosophy took root as a common point of interpretative understanding of psychopathology. As I mentioned briefly, this period saw the adoption of the Socratic interpretation of psychopathology in mainstream Christian theology, which helped to inform a more broad, societal understanding and positive interpretation on the whole (Screech, 2004). Granted, as with any period, there are cases within which psychopathology is portrayed less than favorably, but there was a societal consensus that psychopathology could be charismatic amongst public imagination (Screech, 2004).

One work that first portrays the positivity of the Renaissance, and explains how it moves to a negatively centered period of confinement (specifically within France) is *Madness and Civilization: A History of Insanity in the Age of Reason*. In this work, Foucault describes the process by which madness, which is presently referred to as psychopathology, changed from acceptable interpretations to a more divisive, othering series of interactions through the transition of time, specifically between the Renaissance and the Enlightenment. In looking at some of the popular literary works of the Renaissance, it is clear to see that there was a general consensus regarding the acceptability of such displays of abnormal behavior (Foucault, 1998) that corresponded to a theological acceptance of the Socratic “good” form of madness in divine ecstasy. Consider the case of *Don Quixote*, within which the eponymous main character is

portrayed engaging in unusual acts such as the infamous scene wherein he fights windmills whilst under the impression that they are giants. Ultimately, throughout the story, it appears that Quixote is relatively out of touch with the reality the other characters are experiencing. Regardless of this possible expression of psychopathology, the story was received extremely positively across audiences, due to an extremely positive and empathetically driven portrayal of Don Quixote throughout the story. The story was so influential, in fact, that it remains well known in the literature world, and is presently the best-selling book in the world, with many proclaiming it to be the greatest literary masterpiece of all time (Depner, 2019).

Shakespeare was also one of the great playwrights of the Renaissance, and his portrayals of psychopathology were tremendously influential in terms of subsequent public perception, particularly given the immense popularity of Shakespeare's plays throughout this period. Some of the best examples of such characters are Lady Macbeth and Ophelia from *Macbeth* and *Hamlet*, respectively. In the case of Lady Macbeth, in response to her influence in the plot to get Macbeth onto the throne via the murder of the former king, appears to undergo a state of delirium wherein her guilt drives her to behave strangely, and to hallucinate that there is blood on her hands that she cannot wash off. Thusly, it appears she was experiencing symptoms of psychopathology given the tremendous stress that she had undergone, and although she had done something bad, the evil act she committed came prior to the development of these symptoms and rather these were symbolic of repentance for what she had done. Moreover, although certainly Lady Macbeth is not viewed in the same positive light as Don Quixote, it is through her and specifically this portrayal of psychopathology that some fundamental truths about the

reality of guilt, repentance, and attempting to make right her wrongs are communicated to the audience (Foucault, 1998). Her delusions are ultimately what help to bring about the revelation of truth, and therefore allows the play to end with these evils being corrected and appropriately accounted for with justice at the forefront, even though Lady Macbeth is a villain in the play.

In the case of another of Shakespeare's famous characters, Ophelia from *Hamlet* also appears to struggle with depression and grief. She is depicted as suffering from madness, and the onset of this state of mind comes from the discovery that the man she loves, Hamlet, killed her father whom she was incredibly close to. This devastation, although it may be considered overly pathologizing Ophelia for a reasonable expression of her grief, ultimately sends her into a spiral of unusual behavior that leads to her death by drowning. Although the fact that both of Shakespeare's characters that experience possible symptoms of psychopathology die, the onset and progression of their individual psychopathology is incredibly sympathetic given that there is sufficient reason for these displays (tremendous guilt for wrongdoings, and despair over a father's death) which ultimately create conditions for understanding and acceptance from the audience. Thus far, we have a very empathetic portrayal of these three characters, but admittedly they are not overtly positive given that one is a satiric representative of Spanish elites, one is a villain, and the final commits suicide in the midst of the play. Still, the importance of the empathy that the audience is implored to feel for these characters should not be overlooked since these portrayals still contributed to the narrative of normalcy and public acceptance of these delineations of psychopathology.

One book that emerged from the Italian Renaissance, in particular, had quite an extreme effect on promoting research on wellbeing and good mental health, even though none of the characters within it were portrayed to be experiencing psychopathology beyond the plague anxiety. Namely, it is Boccaccio's *Decameron* that had such a profound and lasting influence on his society and the Renaissance more broadly as it spread throughout Europe. Boccaccio lived through the plague of the Black Death which ravaged Florence, Italy in 1348, and what he noticed was that family would turn on themselves, parents refused to help ailing children, and there was a general, pervasive public fear of the pandemic (Wills, 2020). The *Decameron* is not told as one cohesive story, but rather is a collection of multiple frame stories that are intending to depict a variety of different messages and tales, but what is profound is that Boccaccio intended to send a message to the people of Italy regarding what they could do in response to the plague. That is, the characters in the book are depicted as staying put, and telling each other stories in order not only to pass the time, but to promote their mental health via encouraging happiness and community with one another. This work of Boccaccio was so influential, in fact, that these ideologies were applied in the medical field across class lines in order to address mental health productively and with compassion in the face of tremendous adversity of a relatively incurable plague (Wills, 2020). Although this work does not deal directly with portrayals of psychopathology, the influence that it had in broadening the surrounding conversation of mental health, and even proffering some early coping mechanisms to improve wellbeing should not go without recognition in the historical narrative. This is particularly true since we are examining the cultural spectrum of the Renaissance being more accepting and understanding of psychopathology as



opposed to previous or forthcoming time periods. Moreover, this work helped inform early medical interventions in the field of psychopathology, and began a focus on psychological wellness as a counter to immense stress. Thusly, one of the defining features of the Renaissance was a more openminded, willingness to accept psychopathology as it was viewed publicly.

That being said, however, the Enlightenment (17<sup>th</sup> – 18<sup>th</sup> centuries) saw a different perspective shift wherein the public did not want to see or interact with psychopathology on the whole. Certainly, as is the case of previous era, this was not universal, but it was broad enough so as to change how psychopathology was dealt with at an institutional level. Foucault explains that “in the history of unreason, [the onset of the Enlightenment] marked a decisive event: the moment when madness was perceived on the social horizon of poverty, of incapacity for work, of inability to integrate with the group; the moment when madness began to rank among the problems of the city,” (1961/1998) thereby inciting a need for more serious governmental intervention to deal with psychopathology. With the age of Enlightenment on the rise, so too did the philosophical framework turn to the glorification of reason, wherein “madness was torn from that imaginary freedom which still allowed it to flourish on the Renaissance horizon... in less than a half-century, it had been sequestered and, in the fortress of confinement, bound to Reason, to the rules of morality and to their monotonous rights” (Foucault, 1961/1998). As aforementioned, the principle of Cartesian Dualism, which, because it originated and spread during this period on the basis of the superiority of reason, did much to push the narrative that issues involving the mind were both untreatable and hopeless. Given that there was essentially nothing to do if someone began developing symptoms of psychopathology, there was a

subsequent and pervasive discomfort that perpetrated the general populace with any displays of unusual behavior or thought pattern. Thusly, there was a broad, universal movement to remove such displays from the public eye in order to establish a new precedent of comfort amongst the French via the institutionalization of those suffering from symptoms of psychopathology into asylums (Foucault, 1961/1998). Confinement in an asylum did not begin in this period of France, but this was the first time that any government took steps to create these institutions and help to confine individuals in this way. The French government handled this perceived issue with such efficiency, in fact, that one out of every hundred individuals in Paris was subjected to this confinement in order that they would no longer have any access to the outside world (Foucault, 1961/1998). Madness, in this age of the world, was marked by an imaginary stigma of disease, which contributed to the fear rhetoric and the perceived necessity for the physical separation of psychopathology from the rest of society, since it had come to be perceived as a social problem amongst the general populace (Foucault, 1961/1998). Moreover, this period of subjugation and confinement was marked by the manifestation of regular imprisonment, which was utilized so frequently and widely that not only were all jails filled disproportionately with what people who were quoted as being “the raving mad,” but the overpopulation of prisons due to high prevalence of psychopathology amongst new prisoners actually merited a need for a separate institution (which became the asylum) all together (Foucault, 1961/1998). Thus, the rise of the asylums was an impending doom for those that had become associated with this state of madness.

Interestingly, the original narrative of confinement did not speak to hiding individuals experiencing symptoms of psychopathology away. Rather, the observational

fear grew over time, and originally they were utilized and displayed for public entertainment in the early stages of the asylum growth (Foucault, 1961/1998). This unfortunately contributed to the social dynamic of the impoverished being imprisoned towards this end, while the rich aristocrats were able to partake of this variety of entertainment. The best parallel to draw is to a circus; in the present day, people go to circuses to see unusual people and talents for the value of entertainment and fascination. Circuses tend to play on people's fascination with the macabre, and because the growth of the circus took place in the late 18<sup>th</sup> century, it has been argued by some that it was precisely due to these exhibitions of madness that the industry prospered so much and connected psychopathology with high entertainment value and subsequent profit (Stoddart, 2000). That being said, however, these were not positive depictions of individuals experiencing psychopathology. This was not the first time nor the only place this occurred with asylums, since in Germany, they began installing barred windows at their psychological facilities, so this way passersby would be able to look within the room in order to observe the confined individuals who were often suffering and chained to the walls (Foucault, 1961/1998). In the hospital of Bethlehem in England, they would charge a penny each Sunday to whomever wanted to come and view the exhibitions of psychopathology based on the patients seeking or confined to "care" in the facility, and this was so financially successful that it accounted for four hundred pounds or 96,000 visits a year (Foucault, 1961/1998). One of the original goals of confinement consisted of finding something to do with people that would not or could not contribute to the labor force, so in this capacity, not only would they not be on the streets, but they would actually be involved in an intake of revenue from the elite sectors of society who paid to

observe this treatment. Thusly, the individuals experiencing symptoms of psychopathology were subjected to mocking laughter and hateful comments frequently within the framework of an institution that was supposedly committed to their wellness, and they were assigned to the same level as “monsters” in the public eye whose sole purpose was to entertain the masses with their unusual behavior and bring in revenue (Foucault, 1961/1998).

Prior to moving on from this conversation, I wanted to spend some time addressing the Bethlehem Royal Hospital, which, although it opened the doors for public spectating in the period of the Enlightenment, did exist and was providing “treatment” for psychopathology prior to this point. The hospital is famous for prolonged, extensive abuse of the patients that were either forcibly confined there, or went voluntarily in search of treatment and alleviation of their personal discomfort. In fact, much of the cruelty that we typically think of regarding treatment for psychopathology in the present day horror trope comes from accounts of the Bethlehem Royal Hospital, which consisted of torture like electric shock therapy, complete isolation (purported to be necessary to “stabilize the mind”), flogging, and starvation, which were conducted as far back as 1377 (Arnold, 2008). Around mid-sixteenth century, the hospital’s name changed to “Bedlam” (Arnold, 2008), which is synonymous with pandemonium. Here, then, we find the origins of a still commonly used phrase that has been intrinsically associated with a negative connotation of uproar or mayhem. The fact that this word typified the confined patients at Bedlam demonstrates a connected, intrinsic association with something averse and disruptive for those around them. This connotation, since it took root prior to the state’s response to the growth of asylums, helped to create the narrative that not only were these

individuals dangerous for other reasons (which is the perception that grew over time), but they were disruptive to public harmony and liable to create conditions of bedlam. Thusly, this rhetorical marker had a profound impact on the manner in which individuals experiencing psychopathology were treated in that historical present, but also contemporarily since the word “bedlam” resides comfortably in the modern vernacular.

The word bedlam contributed to an ongoing false rhetoric of the origin and progression of madness, which became the subject of casual conversation amongst Europeans. The conversational roots of these accusations implicated the aforementioned need for confinement in the vein of the “out of sight, out of mind” mentality, and thus, as in the case of the word bedlam, rhetoric had a significant, causal role in the rise of the asylums as I discussed earlier. So too, then, did linguistically centered diagnoses have a role to play in organizing confinement of individuals experiencing symptoms of psychopathology as criteria for confinement. Specifically, Foucault (1961/1998) says that associations of madness are siphoned into the following diagnostic labels: melancholia, mania, hysteria, and hypochondria. There was little that actually distinguished between these manifestations of psychopathology per their historical descriptions, and they were exclusively utilized in order to provide a rationale and justification for the institutionalization of whomever they deemed unfit to be an active member of society. As we progress into American interactions with psychopathology diagnoses, we will see a repetition of this corruption of diagnostic criteria and labels, thereby implicating a repeated, deeply-rooted cycle of rhetoric leading to abuse via ostracization in the form of this separation from society, and othering with these labels.

The word asylum, interestingly enough, is an innocuous word that is meant to mean refuge for those that seek it. However, in this period, the growth of the asylum saw incredibly poor conditions for those that were frequently and unwillingly admitted to their ranks. The way that asylums were founded and run spoke to the dehumanization of the patients that they were meant to be treating to the point that outsiders who entered the asylum would describe an utter and immense horror at what they found inside (Foucault, 1961/1998). The people that were imprisoned in the asylums across Europe were subject to total depravity wherein they'd be chained to walls, forced into overcrowded rooms, and not provided with access to basic, humane necessities (Foucault, 1961/1998). It is no wonder, in looking at the reality of horror that was perpetrated against the asylum's prisoners, that this archetypal asylum became the subject of the horror genre from literature to film to video game adaptations and stories, but this conversation will be elaborated on in later chapters. At this point in the historical narrative, there was no treatment being provided to individuals in asylums; their only purpose was simply to confine and hide away the now shameful manifestations of the then accepted standards of psychopathology (Foucault, 1961/1998). The fact that there existed a period defined by such abject horror is truly appalling, but it did mark a significant enough low point from which to see a resulting uplift for those experiencing symptoms of psychopathology. Thusly, the aforementioned imagery and association with monsters, and the subsequent fear and mockery that encompassed the treatment of those experiencing symptoms of psychopathology ultimately informed the maltreatment and confinement that characterized the period of the Enlightenment.

Dews (1984), in publishing an analysis of Foucault's *Madness and Civilization*, provides an in-depth, secondary analysis to the concepts related to psychopathology and the conditions under which society associated with individuals that were diagnosed under the then contextualized criteria for confinement. Specifically, Dews describes the distinction that is made in Foucault's work wherein psychopathology is portrayed as manifesting in the form of a social problem. One of *Madness and Civilization's* biggest strengths is that it explains the first time in documented history that psychopathology is addressed via a qualitative transformation between the people and the state's respondent measures. Thusly, this period of the Enlightenment marks a historical departure in Europe regarding the manner in which public entities interact with psychopathology, and demonstrates a new systemic "solution" to the perceived issue therein. Dews offers an analysis on what it would mean that psychopathology was classified as a problem requiring governmental intervention and regulation, and the possible impacts that this conceptualization speaks to for the future of psychology as a field of study. That is, when grouped alongside poverty, unemployment, and inability to work, the state will devote attention in equal measure to this problem thereby politicizing an entire group of people (Dews, 1984). What this means is the state would have reduced individuals experiencing symptoms of psychopathology to the label of being a "problem to solve" rather than empathetically looking at how to improve their individual wellbeing. This label ultimately informed, as described by Foucault, the inhumane conditions of confinement which appeared to solve the problem for the general populace, whilst instituting further problems and undue stress onto this population. Because Dews published this piece on the heels of Foucault's initial work, it thusly provides some insight into the reception of

the work in the relatively immediate aftermath of its publication. Moreover, Dews examines the work of Foucault in such a manner as to speak to the meaning of psychopathology that Foucault was stipulating, but also the way that this meaning was interpreted from a sociological standpoint. Sociologically speaking, then, Dews explains that not only was this confinement motivated by public disgust and fear, but it also was a mechanism by which to induce forced labor of these confined populations in order to bolster a faltering economy. This problem was particularly profound since individuals that experienced symptoms of psychopathology and were categorized as the cultural elite with the aristocrat label were not reduced to the problematic diagnoses and given the label of societal burden. Clearly then, this problem was, at least in part, a narrative of othering and differential treatment based on social class. This is not the first time in documented history that such abuse occurred in this manner, but it was an intrinsic association that was cultivated in relation to psychopathology and problem, which has informed state-based systems of othering based on these labels through to the present moment.

Because there was a multipronged approach to determining the rationale of confinement, including examining behavior, economic gain, and the examination of arbitrary diagnostic criteria, it was a difficult process to combat the misperceptions and system of institutionalization in order to move the focus towards liberation of individuals associated with psychopathology. Thusly, a variety of scientists and empathetically oriented individuals began working to further the supposition that this group had done nothing to warrant their mass institutionalization. Philippe Pinel, a French physician who gained prominence toward the end of the 18<sup>th</sup> century, was vastly influential in this field,



and he went on to pioneer the humane treatment for those that were mentally unwell in order that they would actually improve rather than languish in societal neglect (Foucault, 1961/1998). In fact, upon his promotion to becoming the chief physician at the Paris asylum, his first radical change was to begin unchaining the prisoners, many of whom had been confined and chained to the wall for decades (Foucault, 1961/1998), which was followed by face to face, interpersonal therapeutic sessions. This shift from talking-about to talking-to was a move towards the humanization of the patients, which was inherently rooted in this linguistic exchange, thereby implicating the imperative role that language can play in helping individuals fulfill the need of social belonging in order to reverse the effects of the previously incurred ostracism and abuse. Even when not therapy-based, these interactions helped to create a more positive sense of humanity (both for the patient directly, but also the broad understanding of humanity as it had come to be known to them) in direct contrast to the previous and prolonged experience of fascination and disgust for the amusement of passersby, with their only interactions being in the framework of jeering and mocking (Foucault, 1961/1998). The juxtaposition of this newfound state of humanization and positive treatment with the initial utilization of confinement in the mental asylum is startling. The new interaction with psychopathology as posited by Pinel is what spoke to genuine recovery and improvement amongst the previously confined population, particularly when they were put in new locations with regular access to the outdoors and basic resources. Although the resulting fear interactions in association with psychopathology began decreasing at this point, certainly there was now a societally ingrained sense that these were scary individuals for one

reason or another, which was a difficult mentality to overcome and contend with (Foucault, 1961/1998).

Rhetorically speaking, Foucault's piece is uniquely effective in creating the argument that it was primarily sociological phenomena, specifically with regard to the economic state and the government intervention and regulations surrounding psychopathology, that provided the means for the escalation of the social situation to the point where individuals experiencing psychopathology were confined and subjugated (Dews, 1984). That is, of all of Foucault's writings that employ this same rhetorical methodology of discourse analysis, this particular work in *Madness and Civilization* stands out in terms of its rhetorical efficacy. In spite of this, however, there were still criticisms of this work in saying that there was not sufficient empirical support for the arguments that Foucault made, and also that the concepts Foucault addressed presented an oversimplification of psychopathology on the whole (Gutting, 2005). There is an academic split between support and criticism, and supporters are typically impressed with Foucault's unique identification of madness as a "variable social construct, not an ahistorical scientific given" (Gutting, 2005). Moreover, other academically oriented readers have challenged the notion that Foucault's historical analysis was unsubstantiated in saying that the book is challenging to read, and further translational issues have contributed to broad misunderstandings of Foucault's writings (Gutting, 2005). That being said, the narrative that Foucault illustrates about psychopathology, and the manner in which society on the whole has the tremendous and sufficient influence to negatively impact generations of individuals experiencing psychopathology based simply on the way they discuss it speaks to the exigency of this project. In order to circumvent the repetition

of history that plagued psychopathology in Europe, there requires an understanding of how this maltreatment arose in the first place. Foucault, in providing this analysis, gives us this precise narrative and warning for future generations to abide by, so we can have more compassion in the way we interact with one another to never again create conditions for confinement. Although it seems the words we utilize are not overly influential, Foucault's work here demonstrates clear culpability and cautions us appropriately.

The historical narrative does not end with Foucault, however, as this is a problem that has occurred and shifted to meet historical situations across time. The work of Stephen Jay Gould in *The Mismeasure of Man* goes on to demonstrate the manner in which American society appropriated and accommodated these issues of psychopathology and applied them to our own population. One of the great names in psychology, Alfred Binet, a French psychologist that gained prominence in the early twentieth century, began researching a manner by which to measure intelligence. Binet was employed by the French government as part of a project to design a new school system that allows for children with special needs to receive additional, specialized instruction (Gould, 1981). Binet's desire in doing so was virtuous; he wanted to provide a means by which individuals with different levels of neurodivergence could receive a supportive and fulfilling education. Unfortunately, the scientific theory that was functioning in psychological and anthropological circles whilst Binet was conducting this research was a study called craniometry, which spoke to the idea that a person's brain size and shape would be equated with their intelligence.

In thinking more about the origins of craniometry, Samuel Morton, a man who gained tremendous acclaim and praise in his time regarding his pioneering of the study of craniometry, was largely responsible for pushing the narrative that craniometry demonstrated an undeniable proof for racial and intellectual inferiority across humankind. Morton was prominently involved in the scientific community, and his ideologies were communicated widely to the public via the papers and texts that he produced prolifically throughout his era of research, thereby changing fundamentally how people interacted with this pseudoscientific racism. Morton proposed that he was able to determine the intellectual capacity of a race based only on the volume of the skull (Figure 1). Morton utilized this volumetric data as a measure of racial development in a hierarchical framework. As a prominent figure in the emerging American scientific field, Morton had a tremendous amount of sway, which allowed him to establish the field of craniometry as an accepted manner by which to determine intelligence on the basis of head size and race. In reality, however, Gould (1981) addresses the lack of empirical evidence that underlaid Morton's research, and even explains that it is likely Morton intentionally manipulated his data and the skulls he worked with in order to foster support for this unbased theory. Moreover, it has been shown that brain size is more highly correlated with body size and thusly varies between individuals within a single race, and thusly one cannot make broad, overarching comments on the intelligence of a race based on head size/shape even though this was the narrative of othering that dominated the early American system of science. Because this notion of intelligence, or rather perceived deficits in intelligence, are so deeply ingrained in public ideology of psychopathology, the narrative proffered by Morton and bolstered in American society helped to bolster the narrative of

psychopathology being othered. Similar to the previously described French manifestations of othering of psychopathology, this was a sociologically defined manner by which to disqualify certain races from participating in society on the basis that they are associated with the othered populations of psychopathology due to a falsified intellectual inferiority. Thusly, we again find a case of systematic othering, and although this time it wasn't solely focused on impoverished communities, there is still a notion that these individuals are less than, just at this point it was based on race and intellect.

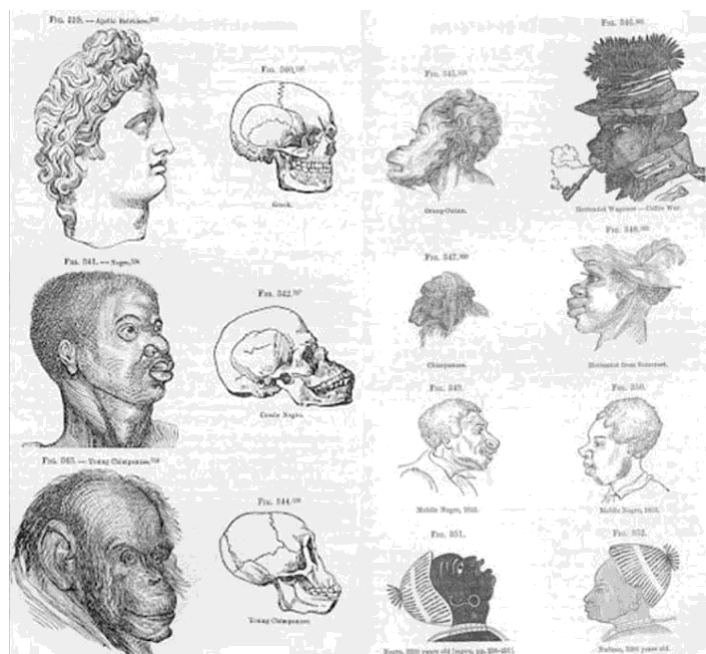


Figure 1: Morton's skull identification system from *Crania Americana*, 1839

*Note.* Photo depicts Samuel Morton's perception of biological differences between humans of different race. This diagram is one of the images commonly utilized to bolster scientifically supported racism because it demonstrates inherent inferiority by associating certain skin colors and ethnicities with different species of animals. It has since been totally discredited as scientific evidence.

Ultimately, such examples of pseudoscience, that is, not empirically supported standards from which some scientists would draw conclusions, were frequently employed in order to subjugate specific groups of people. Alfred Binet is among the individuals who, whilst conducting his own research in the social climate of pseudoscience popularity, argued against such methodologies being utilized for these racist and otherwise discriminatory purposes. In the case of Binet's research, then, he wanted to focus predominantly on the manner in which he could help create appropriate educational conditions for individuals of varying intelligence (outside of any racial component). Thusly, Binet was able to pioneer the field of IQ testing, and he established a mathematical formula ( $\text{mental age} / \text{chronological age} \times 100$ ) by which to categorize individuals across a scale of intellectual ability (Gould, 1981). IQ testing did prove to be beneficial, and it even provided a basis of knowledge that allowed the entire education system to adapt their lessons to suit the cognitive capacity and reasoning capability that becomes more sophisticated as children grow up (Gould, 1981). Although Binet was motivated purely by his own sense of altruism and compassion for those experiencing symptoms of psychopathology, the aforementioned social interest in psychologically based discrimination would eventually use his work in order to bolster their own agenda in categorizing and separating individuals that fell lower on the scale that they presumed to be a foolproof measure of intelligence.

H.H. Goddard, an American psychologist who gained prominence in the early twentieth century alongside a massive influx of immigrants to America, utilized Binet's research in order to effectively determine which individuals expressed symptoms associated with psychopathology in order that he may prevent them from reproducing

(Gould, 1981). Goddard was expressing the hereditarian fallacy, which states that if something is hereditary it is thusly inevitable. If people are expressing symptoms of psychopathology or falling on the left end of the IQ bell curve (Figure 2), then, according to Goddard, allowing them to reproduce would inevitably provide the means to spread these perceived deficiencies to their progeny (Gould, 1981). In order to see this fulfilled, not only did Goddard insist upon IQ testing implementation in all schools, hospitals, legal systems, and the military, but he also utilized the immigration influx center, Ellis Island (which remained in operation until 1954) to “catch” immigrants that he perceived to be deficient in order that they would not intermingle and spread their genes through the American population. Of course, there was tremendous bias in so doing, and not only did this foster further pseudoscientific-based racism, but these IQ tests were administered after a long period of travel in a language that was largely unfamiliar, which contributed to an overabundance of diagnoses as “mentally deficient” (Gould, 1981). The hereditarian and eugenicist movement was widespread in the United States, and bore some resemblance to the Salem witch trials wherein individuals were hunted down in order to be confined and otherwise kept from reproducing and spreading what had discriminatively been determined to be “defective” genes. This discrimination was so pervasive and widespread that every domain of American life was affected either in mindset, or in utilizing physical repercussions such as testing and subsequent confinement or separation of some sort.

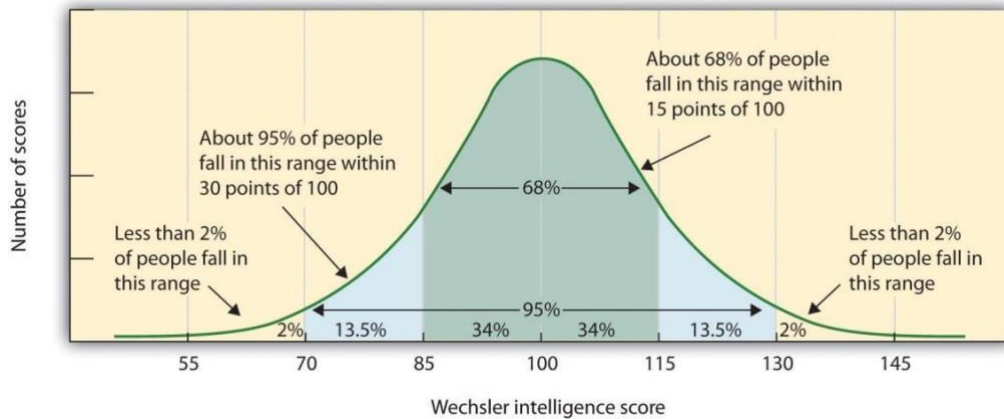


Figure 2: The Stanford-Binet IQ Curve

*Note.* This model demonstrates the IQ bell curve through which individuals are assessed to determine whether or not there are developmental issues. The average score is 100, and either end depicts an extreme deficit or sufficiency. Adapted from Lumen Learning. (<https://courses.lumenlearning.com/suny-lifespandevelopment/chapter/extremes-of-intelligence-intellectual-disability-and-giftedness/>). In the public domain.

Because of this influx of new cases supposedly deserving of confinement, so too was there a need for more diagnostic labels and criteria to organize and justify the actions perpetrated by Goddard. These labels consisted of words like “imbecile” and “idiot” which were, in this context, scientific, medical diagnoses that functioned in a similar way to Foucault’s diagnoses of melancholia, mania, hysteria, and hypochondria. It is this negative interpretation of psychopathology as perpetrated by the hereditarian movement and rise of eugenics that led to these diagnostic words, imbecile, idiot, and moron, becoming common in the language of invectives. The establishment of these words as insults was so effective and widespread that it has impacted modern rhetoric to the point where they are still used today. That is, the general populace saw this label, and because they attributed it to a negative manifestation of existence in the form of psychopathology, they would use it invectively to make fun of one another or the individuals directly. The



terms became associated with a lack of intelligence, similar to the work of Morton in creating a narrative of intellectual deficit correlating with race, and even when utilized with playful intentions (such as jokingly or affectionately calling a friend an idiot), they communicate that still this is a negative association to be compared to the group that had been attributed this diagnosis. Of course, the more common utilization is not done playfully, but rather as a direct insult, and utilizing this connection attributes an inherent flaw in individuals experiencing psychopathology such that others in no way want to be associated with that narrative. The integration of this invective language was so seamless, in fact, that not only has it persisted to the present moment, given that these are words that are familiar in the common dialogue, the majority of people who utilize these words don't realize the history that they have as medical diagnoses and tools by which to other and ostracize "deficient" populations (Gould, 1981). In fact, not only is this history not made accessible in the general scope of education, but it also is not addressed commonly in the field of psychology, which has permitted the continued utilization of this hateful, invective rhetoric that ascribes inferiority to individuals experiencing symptoms of psychopathology.

These new interactions with psychopathology as encouraged by Goddard were uniquely American in origin, which speaks to contemporary relevance in American society, given that the corruption of formerly altruistic endeavors to support populations experiencing psychopathology happened with American institutions after years of suppression and confinement in Europe. In effect, this Americanized system of discrimination took steps towards reversing the good that Pinel accomplished on the European landscape for patients in the asylums, and once again the narrative of

dehumanization took root with a new, hereditarian audience. That being said, Goddard did not advocate for the same standard of treatment that was enforced in the original European asylum, but rather he went in a different rhetorical direction in saying that the individuals he identified as needing to be separated from society should be treated “as though they were children” (Gould, 1981). In effect, such a sentiment strips the group it describes of their autonomy, and reduces them to the level of dependent children, but without the ability to ever grow from that point onward. Thusly, they may not have been hurt by their physical separation from society, but they are still unfairly dehumanized and relegated to a lower societal position on the grounds that they will never progress beyond the cognitive level of a child.

What this view of IQ testing and hereditarianism did, in effect, was provide yet another means by which the government could yet again take control and change the interpretation of psychopathology to be a social issue worthy of governmental interference and legislation. This is a physical manifestation of a repeated occurrence of Foucault’s analysis on government intervention and the subsequent institutionalization that took place across Europe throughout the Enlightenment. In this case, however, the need to do this was based in the perception that these individuals, who were often categorized somewhere in the umbrella of psychopathology, were not worthy of integration into the public domain, which corresponded with Morton’s ideology of pseudoscientific racism that equated other racial identities with deficient intelligence. Thusly, building on some of this research cyclically, individuals experiencing psychopathology or immigrants that were assigned this label outside of genuine experience on the basis of intellectual deficiency per their IQ score were able to be

effectively separated with government support, as in the case of France. This notion of replicated historical components provides support for the idea that history has cyclical potential for this discriminatory, legal/governmental action taken against individuals experiencing symptoms of psychopathology. The perception that the government must be involved in aspects of psychopathology, and specifically in the educational system began with this prodding and the insistence of H.H. Goddard and related individuals in the twentieth century (Gould, 1981). Even through the present day, although we do not require IQ testing as part of the public education system, all students at multiple timepoints in their life are required to engaged in some sort of standardized testing (Garrison, 2009). Not only does this allow the differentiation of students at different developmental points, it allows also for the comparison between students and creates a narrative of failure equating to stupidity, or succeeding equating to intelligence, which applies broadly to all sorts of tests like the STAAR, the SAT/ACT, the GRE, etc. (Linn, 2010). These labels differentiating between sufficiency and insufficiency, particularly among children but also adults, eventually can become self-fulfilling prophecies indicating that student's wellbeing will likely be worse, teachers will be less likely to believe in their capability which will inform the quality of education the student receives, and even just the stigma of needing remediation in some way changes the way a student interacts with the education system. Thusly, the manner in which we label and psychologically classify students based on our ideals of what intelligence should look like at any age in the public system of education informs greatly the outcomes that they will be able to achieve and to some degree whether or not their self-perception will be positive.

This form of othering, ostracism, and defeating narrative of failure and low intelligence that occurred in conjunction with the results of the IQ tests alongside other standardized testing methodologies is one of the most egregious and vile outcomes that were directly facilitated by the categorization of people based on psychopathology diagnoses. Were it not for the fact that there was an implemented rhetorical system of medical labels, there would not have been an appropriate mechanism through which Goddard could have bolstered support for the connection between IQ testing and mental deficiency. The diagnoses of “imbecile” and “idiot” eventually morphed into the label of “high-grade defectives,” which at the time became the butt of the public’s jokes (Gould, 1981). That is, the phrase was utilized to spark amusement in the same manner that knock-knock jokes would be applied contemporarily. Once again, such linguistic markers begin marking a departure from understanding and compassion being attributed to populations that express differently than what people expect. The worst aspect of this outcome is that it began with purely altruistic and empathetic intentions, but was corrupted and continues to be employed such that all students, throughout their lifetime, have received these labels based on their scores on single instance standardized testing. These labels can eventually speak to new diagnostic labels being attributed to them, such as in the case of specific learning disorder or attention deficit hyperactivity disorder (ADHD), which also speak to the narrative of being other and deficient in the ways their peers may not be.

Interestingly, the label of “gifted” on the opposite end of the diagnostic spectrum, may also negatively impact students, their self-perception, and their productivity. Granted, giftedness is not typically considered to be a form of psychopathology, but these

individuals are often excused for any instance of societally perceived abnormal behavior on the basis of their having superior intelligence and being in a different, internal social environment. Thusly, again, we see an intrinsic association of acceptability with intelligence, and the way that this factors into discussions of expressions of psychopathology such as unusual behavior. Moreover, although this label of “gifted” appears to be positive, it also presents a narrative of ill effects that occur in direct relation to being assigned this identity, which is still linked behaviorally to psychopathology even though it is not explicit as in the case of lower IQ’s. The narrative that is given to individuals that are identified to be gifted is that their intellectual output must be extremely high in order to meet the societal expectations to fulfill their sense of worth. Unfortunately, this can create such an abundance of stress to meet the high expectations that others have based on this label of gifted that it can result in burn out, or even the onset of other symptoms of psychopathology based on a self-perception of worth that is not met unless in these specific circumstances of achievement and test scores (Snyder et al., 2014). As we see in this case, then, even labels that may be intended with positive outcomes could be perverted in such a way as to negatively affect the individuals the labels describe.

One of the pioneers in research on giftedness was Lewis Terman, and based on the success that Binet’s IQ testing had in terms of achieving prominence, he thought it would be prudent not only to help adapt that system (in fact, he is the one that created the Stanford-Binet revision to IQ testing, which is now utilized almost exclusively as the source for IQ testing), but also to study what happens on the high end of the IQ bell curve (Gould, 1981). Terman wanted to study if children that were especially gifted in terms of

their IQ would go on to achieve more than individuals anywhere else on the spectrum, and he hypothesized that they would be more world leaders, or otherwise conventionally successful individuals in terms of their outcomes in adulthood (Gould, 1981). Contrary to these expectations, Terman found that very few of the gifted children in this study went on to achieve the high acclaim he expected, and the rationale for why was attributed largely to the fact that intelligence, on its own, does not speak to capability and propensity for achievement. That is, individuals of any intellectual background or capability are equally capable of achieving the level of greatness described by Terman in his hypothesis for this study. Moreover, it was seen that many of the students in the study tended to crack under the immense pressures put on them not only by Terman, but by those around them, speaking to this same degree of burnout as described earlier. What is interesting, then, is that even to this day they still have the designation of “gifted” students in the context of the educational system. To this day, there is special education set aside for students that the school deems to be bright, and deserving of special attention in their educational field. I, myself, was designated as part of the “gifted and talented” program at my elementary school, and the unfortunate thing is that many of my peers felt the enormity of the pressure placed upon us was so immense that they no longer feel adequate without achieving the level of perfection impressed upon us as children. Grades, more than anything, speak to our worth as human beings, and we no longer feel adequate falling anywhere outside the range of near perfection, specifically in the context of academia, but this informs the rest of our lives and interactions with others as well, since one’s sense of self and self-worth factors so heavily in interacting with others.

It is interesting how the history of psychopathology and the rhetorical markers and labels that have changed and defined the populations of individuals experiencing psychopathology play into a single, unifying narrative of abuse that has continued into the present day. Certainly, we do not chain people to walls in America presently, but we do still assign labels and expectations that speak to the wellbeing and treatment options for those that are experiencing symptoms of psychopathology of any sort, as is demonstrated with modern standardized testing and ideologies surrounding the idea and label of giftedness. Historically speaking, the labels surrounding psychopathology have informed the manner in which individuals can be subjected to ostracism, confinement, dehumanization, and maltreatment, which has unfortunately occurred cyclically throughout history and was not limited to a single time in place (with the first being the growth of the asylums in Europe during the Enlightenment, and the second being with the hereditarian/eugenics movement in the United States as recently as the 20<sup>th</sup> century). It is clear, after examining this roadmap through history, that the rhetoric of psychopathology, particularly as it pertains to diagnostic labels, has immense and often serious consequences for the population it represents and is frequently reductive of. Now, I will turn to a discussion as to why this rhetoric contains the enormity of power that has been described here, and why it is that we utilize such words if we are at all aware of what they can do.

## CHAPTER THREE

### Rhetorical Theory in the Psychopathology Framework

Having demonstrated the historical significance that PRETENDS poses in terms of its direct consequences, which have the potential of tremendous good or ill, there is now reason to discuss how language works with its enormity of power. Specifically, I will be discussing the rhetorical theories posited by Kenneth Burke and Judith Butler, which deal with the dramaturgical cycle and invective speech, respectively. These rhetorical frameworks will help demonstrate the reason why PRETENDS has manifested consequences such as confinement, exacerbation of symptoms, and generalized maltreatment for psychopathology in this historical narrative. Moreover, they will help to provide groundwork in support of the notion that PRETENDS can still be utilized in the present day to create similarly negative consequences for psychopathology, which will be explored in future chapters in the context of the horror genre and popular culture more broadly.

Now, in following the outline of the chapter, I propose that the dramaturgical cycle as it is established by Kenneth Burke (1962), is the most appropriate framework through which we can explore explanatory and causal relationships between rhetoric and psychopathology on the whole. The overarching causality and motivational impetus that Burke attributes to the dramaturgical cycle is guilt. More specifically, the theory posits the idea that if an individual feels that they somehow identify with the subject of their rhetoric, there is a subsequent guilt in so doing, particularly if the subject is not societally recognized to be acceptable. In the case of psychopathology, then, if a person feels that



they in some way exemplify any of the symptomology or otherwise aberrant behavior, they may feel a guilt of association, wherein they will want to distance themselves from this identity in order to demonstrate to society and themselves that they fall in the range of what is acceptable. Certainly, this is only applicable insofar as the active speaker in the conversation believes psychopathology to be a negative phenomenon.

The guilt motivation theory, then, is predicated on the notion that there exists a societally defined scale of acceptable and unacceptable deviations from normality. Without this, there would be no grounds from which to feel this guilt; hence, if psychopathology were better accepted, people would not feel a guilt of association. There is a reason that individuals feel uncomfortable divulging such information to certain parties, which tend to be parents or older family members who may either reject the individual completely, or simply deny that they need anything additional in terms of therapeutic care, and this discomfort creates a need to disidentify with that part of yourself, and often treat the concepts vindictively with the expressed rhetoric. Cognitive dissonance theory factors heavily into this manifestation of rhetoric. This theory of cognitive dissonance explains that, when one person holds two inconsistent cognitions such as experiencing symptoms of psychopathology whilst also being told that psychopathology is not real or is not a valid experience, that person will engage in some behavior or action in order to quell the feeling of dissonance created by these conflicted thoughts. There are many things that one can do in order to mitigate the feeling of dissonance, but certainly one of the prominent ones is the one advocated by the dramaturgical cycle, which is they will likely express outwardly a rhetorical appeal that

attempts to distance themselves from this identity such as in saying “look at that crazy person! That’s so weird!”

To explain the dramaturgical cycle fully, there is a cyclic pattern that this type of speech, that is, outwardly expressing disapproval for a guilt-laden subject, follows on the conversational level as determined by Kenneth Burke in *A Grammar of Motives* (1962). The dramaturgical cycle follows the pattern of order, pollution, victimage, vilification, heroization, and transcendence before looping back to order. The order stage refers to the degree of equilibrium that exists when someone is at peace with their known identity both internally and externally. Pollution is what occurs when there is a newly defined dissatisfaction with one’s identity, which is usually incurred by societal norms and the discovery that some aspect of the self is undesirable or unacceptable amongst the society on the whole. Victimage is the stage wherein the source of the guilt that began developing in the pollution stage is discovered, and it pushes the individual to take action towards disidentification. Thusly, there is a need for vilification of the guilt-laden phenomenon, which is outwardly expressed with rhetoric, which often contributes to a narrative of self-hatred where an aspect of the self is no longer compatible with an individual’s new definition of acceptability. What follows then, in order to reduce some of the cognitive dissonance incurred by these incompatible perceptions of the self, is the heroization of the societally accepted opposite of the abnormal occurrence. The process of heroization allows the person to purge their own guilt for identifying with the negatively perceived phenomenon, and it helps to reduce dissonance of identity, since it pushes cognitions in the “correct” direction. The stages of vilification and heroization are also what dichotomize any one phenomenon on a distinct good versus bad scale, which is

arbitrarily determined by the surrounding rhetoric and culture therein. Finally, the dramaturgical cycle culminates in transcendence, which represents the establishment of a new order with corresponding rules and regulations that are instituted to represent the new bounds of socially acceptable identity features. In this system, the nonconforming members of society are generally mocked, and they become outcasts that are worthy of their guilt that many of the conformists, too, experience and scapegoat to these othered individuals.

The dramaturgical cycle, then, is based entirely in rhetoric, and it explains that it is primarily language that moves society through these stages as time goes on. Language, in spoken, written, signed, and verbal forms, is a uniquely human capability, and it is the only way we can outwardly communicate these bounds of normalcy and equated acceptability. Thusly, it is the causal root indicating the maltreatment and dichotomously defined label of “bad” or “unacceptable” to psychopathology on the whole, which we saw manifest throughout history in chapter one with the different institutions of labeling and othering that have repeated cyclically. Although history plays out as a result of specific events, as in the case of Goddard introducing his schools in the United States, the real drive behind mistreatment of psychopathology comes in these language use patterns, since they function as a tool that everybody can utilize to communicate and understand who should be identified as the other. This is precisely what we saw in the accounts by Foucault and Gould in chapter one wherein mistreatment and othering increased dramatically in response to the introduction of specific diagnostic labels. Even when an individual is willing to accept this part of themselves, seeking assistance or therapy is often a shameful concept, and it is largely something that people feel compelled to hide

that they do or have done. Largely, the rhetorical situation surrounding psychopathology has bolstered this narrative, and there is an ongoing vilification moving towards establishing a social order that condemns unacceptable deviations from the norm. What is interesting about this created social order is that there is still a Western push for uniqueness, but there is an acceptable spectrum of this unique preference. That is, people in Western cultures, although they do not want to be too different from others, so too do they not want to be overly similar. For example, a study by Bellezza, Gino, and Keinan (2014) found that people in nonconformist clothing are perceived to be higher status by those around them. Similarly, when parents from a Western background go to name their babies, they try to choose names that are relatively unique, and once those names become popular, the next group of parents will choose a different unique name (Berger & Le Mens, 2009). It is clear, then, that there is an amount of deviance from the norm that is accepted and even encouraged, but not so much as to stand out significantly from the crowd. Cultural norms are not always negative; this is what compels people to stop at red lights or stop signs, and to generally adhere to regulations that protect the safety of others. That being said, there are clearly instances of norms that enforce negative self-perceptions based on appropriate and inappropriate limits of uniqueness and often this falls in the realm of psychopathology.

One example where we see this phenomenon occur outside of psychopathology, and in a well-established body of research relative to the case of psychopathology, is in the case of homophobia, wherein societal vitriol towards the LGBTQ+ community can go so far as to create internalized homophobia within individuals that identify on the spectrum of sexuality (Centers for Disease Control and Prevention, 2019). What this

means is that individuals that identify as homosexual are much more likely to express anti-LGBTQ+ sentiments in order to disidentify themselves with that sexual identity. In fact, this particular phenomenon has become the subject of many jokes towards individuals that express anti-LGBTQ+ opinions on social media; they are likely to be subsequently met with comments expressing that they are gay. I would argue that this same scenario applies in the context of psychopathology, as well, although the body of research is not as substantial as with internalized homophobia. That being said, however, this example provides support for the notion that we can utilize hateful rhetoric in order to better distance ourselves from the disapproved of object, either in terms of personal or societal standards.

In thinking about this need to conform based on societal pressure, as I mentioned in the explanation of the dramaturgical cycle, there is quite a bit of research that looks at the basis of this desire being to avoid negative evaluation from others, but especially from peers. Thusly, one of the biggest factors that is shunned and thusly avoided by individuals is psychopathology due to the fact that symptoms typically manifest in ways that are not societally accepted such as strange behavior, inability to get out of bed, differing perceptions of reality, etc. In disidentifying with psychopathology, an individual is succumbing to the temptation to conform, and may utilize negative rhetoric in order to further distance themselves from this association in the eyes of those around them to better fit in with the audience's narrative of normalcy. In fact, this desire is so strong, that it can be seen in repeated empirical observations as a common occurrence. One of the most salient examples is the case of the Asch (1955) conformity study wherein the study coordinator, the eponymous Solomon Asch, wanted to examine the social pressure that

would compel individuals to conform. Participants were told that the study was looking at perceptual judgements, and they were shown a group of lines where one would match an independent line, and they were told to choose the line that was the same length as the one in question (Figure 3). Alone, participants answered correctly 99% of the time, but when put into a group where the other group members who would answer first answered incorrectly intentionally, the individuals that were the true subjects of the study conformed for 37% of the total responses that they had a conscious awareness were wrong (Asch, 1955). The more compelling figure demonstrates that, over the course of the study, 76% of the participants conformed at least once to a group pressure when they knew, in their own heads, that what they were saying was not the correct answer (Asch, 1955). Granted, although there were still individuals that did not conform, it is clear that this social pressure certainly does push people to alter answers and opinions in order not to create division within the group. They were so afraid of getting the wrong answer amongst a group that appeared confident in the actual wrong answer, that 76% of the study participants conformed at least once despite their awareness that it was wrong.



Figure 3: Line demonstration from Asch's conformity study, 1955

*Note.* The lines that individuals were shown and told to match with the one on the left in the Asch conformity study. Adapted from *Opinions and Social Pressure*, by S. Asch, 1965. (<https://doi.org/10.1038/scientificamerican1155-31>). In the public domain.

The phenomenon observed in Asch's studies is predicated on the idea of normative influence, or being motivated by a desire to be accepted by those around us or to avoid social rejection. One of the social psychologists that helped establish the concept of normative influence is named Harold Gerard, and he conducted some subsequent studies to look at conformity and the effects that are seen in not following normative influence. Social rejection, even conceptually, can be so painful that it may create negative/detrimental physical or physiological reactions. One of the best examples of this manifestation of negative reaction happened in Gerard's study (1999) wherein he reported that an initially friendly participant became extremely upset as the course of the experiment went on and the individual refused to conform to the presented group ideology. Gerard explained that the individual asked to leave the room, and upon their return looked visibly sick, but refused to stop the study and continued through all 36 trials without yielding to the group once. The reason the participant left the room was to vomit, which demonstrated an intense physical manifestation of the stress that was incurred by his absolute refusal to conform, and he felt this illness because of an immense anxiety for potential social rejection from the group he refused to yield to. Thusly, this normative influence deals heavily in the field of psychopathology as well wherein individuals feel extremely obligated to comply with group norms in order to avoid the pain and stress of genuine or potential social rejection.

This need to conform, as demonstrated by Asch (1955) and Gerard (1999), is only exacerbated when the individual making the rules is in a position of authority, as is the case when it's an individual's parents, pastors/priests, mentors, or teachers that are enforcing social norms. This obedience to authority, and the need to conform to their

rules was demonstrated in a famous experiment by Stanley Milgram (1974). In these experiments, one person would be under the impression that they were playing the role of a teacher to a student (which would be “randomly” determined, but was rigged so the real subject would always play the teacher), and every time the student got a question wrong, they would receive an electric shock. The teacher was actually given a small electric shock to bolster the narrative that the machine was real and functioning, and then the student was placed in a room where the teacher could not see them, but they could hear their answers and reactions. Every time the student got a response wrong, the teacher would increase the shock level for the punishment, and as the experiment went along and more questions were answered incorrectly, if the teacher began to waver in their resolve to continue, the authority figure in the room, a scientist, would tell the teacher to continue. Certainly, the teachers showed signs of discomfort as the experiment went along, but in spite of these feelings, approximately 68% of the participants continued delivering shocks until the student would have died had they actually been receiving the shocks (Milgram, 1974). This experiment produced the same results across cultures, gender, SES, differences in the credentials of the authority figure etc. Thusly, this study demonstrates why, when someone of high authority in an individual’s life says something negative about psychopathology and its relevant symptom presentation, that person would want to conform to the authority’s subjective view of what is appropriate, and would thusly be inclined to do so even to their own detriment and internal discomfort. Hence, they will also be more likely to use vitriolic rhetoric in association with psychopathology to outwardly reflect this obedience to their personal authorities.



The reason why I have spent so much time exploring conformity and obedience to authority is that humanity is constantly subject to these influences. In most of the aforementioned studies, individuals had a cognitive awareness that the beliefs they were espousing were incorrect; they did not think they were saying the truth and perhaps this reduced the cognitive burden of conforming. In the case of psychopathology, however, there is an abundance of negative imagery and perception such that it may even be difficult for individuals experiencing symptoms of psychopathology to recognize that hatred, both internalized and externalized, is wrong. As such, it will be far easier for them to conform, and to follow the steps of the dramaturgical cycle in attempting to distance themselves from the clearly, unequivocally wrong experience of psychopathology. As we have seen in the demonstration of Burke's dramaturgical cycle, the cycle itself is motivated in large part by guilt of association and would therefore implicate the need to conform and externally represent oneself as different from the subject of othering. The wealth of research on conformity theory helps to unequivocally represent how powerful the motivation is that Burke's theory is built on, and certainly lends credence to the implementation of this rhetorical theory in the context of psychopathology in this thesis.

Now that we have established the backdrop regarding why it is that people feel compelled to change aspects of themselves in order to fit in, we must then address the context that surrounds the societal manifestation of this phenomenon. Burke (1962) explains that there is an established hierarchy of power in a society, and it is the conformists that adhere to the either spoken or unspoken rules of expression that have the most power. Thusly, in order for people to move up this arbitrary social ladder, they must abide by the rules and bend to the pressure to conform. Everybody to some degree or

another feels a guilt about certain aspects of their identity, particularly nowadays when there are new branches and different spectrums of identity that have emerged onto the social scene at varying degrees of acceptability. This guilt can manifest in a person's desire to reject their hierarchical place in society, and they will likely do this with a rhetorical shift in order to portray themselves as an accepted member of a group such that they can move up in their power dynamic. This shift, however, is nominal only, and based solely in the rhetorical choices that person makes, since they are not able to genuinely change these aspects of themselves that relegate them to lower levels of the hierarchy such as in the case of psychopathology. Because this change is nominal, and hence, inherently rhetorical with the goal to change the perception of themselves that others may hold, there is no inherent change occurring because it is simply not possible to just decide and inwardly manifest that psychopathology is no longer a part of one's reality.

The fact that these outward rhetorical expressions manifest a false change demonstrates the other aspect of Burke's rhetorical theory. Burke (1962) asserts that a rhetorical situation of any sort, be it a conversation, a speech, or whatever other manner within which communication happens functions under the overarching metaphor of actors on a stage, and hence he calls this dramatism. Certainly, this notion maps on well to conversations regarding psychopathology wherein individuals are frequently attempting to act as though they do not fall into this categorization, and are thereby playing a part in the larger, rhetorical scene. Burke (1962) calls the entirety of the scene by the title of the "dramatistic pentad" which, per the name, contains five different aspects including the act, the scene, the agent, the agency, and the purpose. The act is what was done, the scene is when and where it was done, the agent is who did it, agency is how they did it, and the

purpose is why they did it, which addresses all of the important analytic-based questions that are employed when analyzing literature or cinematic works. Within this framework, there is a unique ability through which we can disassociate the speaker from the words spoken so as to allow a more wholistic interpretation of what the underlying motivational pursuit in utilizing the specific rhetoric is.

Ultimately, the motivation, which as aforementioned is primarily rooted in guilt, is what changes the connotative value of any word or phrase. For example, as I mentioned in an earlier chapter, the word “moron” was a diagnostic term; there was an associated symptomology and diagnostic criteria that was applied to the word. There came a point in the historical narrative, however, when this word became an invective, and was used in order to communicate to another person that they were wrong or stupid. Thusly, it is clear that the word itself is not a problem, but rather the context within which it is utilized, and what it has been equated to mean in this scenario. As we have noted in the cyclic history of psychopathology and its associated rhetoric, the inherent association with wrongness or inferiority that is communicated with invective application of labels related to psychopathology furthers the narrative that these individuals are somehow other, and therefore do not deserve to be active participants in our society.

Now that there has been an established support for the dramaturgical pentad in relation to psychopathology, I will now present an example of how the dramaturgical cycle helps to frame a discussion of the history of psychopathology and the direct, negative impact that invective or dehumanizing rhetoric has had, and can continue to have in the future. Returning to the example that I discussed extensively in the introduction, I will be examining the two part episodes of *Criminal Minds* entitled “The

Big Game” and “Revelations” to look at the juxtaposition of the presented psychopathology. In the show, we establish the first stage of order in terms of an overarching comfort with psychopathology as it presents in the case of Dr. Spencer Reid, who is never given a genuine diagnosis beyond being portrayed in a general category of neurodivergence. There is a peace with this identity, both internally and externally, since he is such an empathetic character, and integral member of his team in the Behavioral Analysis Unit of the FBI that exists in positive association. Certainly, this may in part be the portrayal for the precise reason that he is *not* assigned a specific label of any sort to more concretely and affirmatively assure the audience of the existence of a possible neurodivergence. The pollution stage occurs when we have the introduction of different, specific manifestations of psychopathology, as in the case of Tobias Hankel. Tobias is confirmed to have Dissociative Identity Disorder, and this presents an opposite, less empathetic portrayal of psychopathology that the show must then contend with in order to eventually return to the order stage of comfort with Spencer’s neurodivergent existence. One of the ways that this episode begins to bridge this controversial association is that they put Tobias and Spencer in direct opposition with one another, and they engage in the victimization of Spencer as a result of Tobias’ dissociative episodes and subsequent kidnapping. Thusly, we are now presented with a contrast between the two characters, and the show has effectively presented the stage of victimage wherein now we have an explicit explanation as to why we feel a guilt in identifying with one and not the other. Now, one is a victim and the other is committing a heinous crime of kidnapping, torturing, and attempting to murder the empathetic Spencer. Thusly, Tobias becomes the villainized character, and the other characters refer to him repeatedly as

“evil,” “cruel,” and “inhuman” for kidnapping the, now heroized, Spencer who is their dear friend and colleague. The two characters, although they experience similar difficulties in their lives regarding peer evaluation and difficult familial situations, are now portrayed as being staunchly different from one another: the villain championing how psychopathology is dangerous, and the hero demonstrating how mild, unspecified neurodivergence is something to be revered. Again, we see the dichotomization of good versus bad, and it communicates to the audience what is an acceptable degree of psychopathology, which leads to the final stage of transcendence wherein the new social order is established. Thus, the eccentric genius character who functions almost the same way that his colleagues do is good, and he eventually kills the pathologized, unsavable, almost inhuman character that Tobias represents. His eccentricities are seen as quirky and cute, whereas Tobias, although they attribute an abusive background to him within the story arc of these two episodes, is given almost no redeeming attributes or assessments by those around him. The episodes end with a return to order, and now the audience can relax since, obviously, serious and genuine manifestations of psychopathology are a problem that can be resolved by individuals that veer more towards neurotypical behaviors, which the audience should strive to typify in their own lives. There is certainly more that can be said about how the stages of the dramaturgical cycle function in the context of this episode of *Criminal Minds*, but I offer a relatively simplistic explanation here in order to simply identify the manner in which this thesis will be applying Burke’s theory. Forthcoming examples of the dramaturgical cycle in other works of popular culture will follow in a similar explanatory style.

That being said, this example progresses through the stages of the dramaturgical cycle with alarming precision. The language that they utilize to describe the different characters is especially prudent in terms of communicating to the audience the range of acceptable manifestations of psychopathology. Moreover, it truly cannot be emphasized enough that one of the major differentiations between these characters is that the villainized one is given an explicit diagnosis of psychopathology, and the other is just generally alluded to having some form of psychopathology, but can function in relatively the same ways as his colleagues at the BAU. This rhetorical marker and distinction certainly moves the discussion of psychopathology towards a negative societal norm, and establishes that the order should be a comfort with psychopathology only insofar as it resembles the character of Spencer. That being said, however, once again this does not reflect well what psychopathology looks like on average, since crime rates for individuals experiencing psychopathology are no higher than they are in the general community (Draine et al., 2002). Thusly, the reality that they are establishing via these rhetorical exchanges and overarching situation and message does not map onto genuine reality, but rather is once again representative of a false rhetoric. We have seen this cyclically throughout history, and the manner in which labels and subsequent villainization and heroization specifically relate to direct, detrimental consequences for individuals experiencing symptoms of psychopathology. Thusly, we see that the dramaturgical cycle, and rhetoric on the whole, are imperative in a discussion of treating psychopathology and reducing the stigma that perpetuates it in the general discourse of misunderstanding and the negative portrayals that have been exacerbated in relevant media throughout history. Granted, there are positive portrayals of psychopathology, but the problem is the way

they are presented as exceptions to the rules that are applied to the umbrella of psychopathology. The dichotomization of good versus bad is able to be perpetuated in the common dialogue, and to continue establishing an order outside of most manifestations of psychopathology unless the individual is rich, a relative genius, or otherwise mild enough to pass as relatively neurotypical.

Now that we have established with a concrete example how psychopathology plays into a rhetorical framework, I would like to establish more firmly what we should qualify these rhetorical moves as in terms of the impact that they have. I talked in the introduction about microaggressions, which are a form of hate speech since they move to disqualify or devalue another individual's existence or reality. I do not think necessarily that microaggressions are the most appropriate word to cover the entirety of the spectrum of PRETENDS, but rather I will turn to Judith Butler and her work in *Excitable Speech* (1997) to look at her notion of the eponymous theory, and how PRETENDS can be qualified under her definition. Burke's theory, as we have discussed, is predicated on the notion that our language choices are aimed at disidentifying with something, which communicates that, in the context of psychopathology, there is something bad about this population that the general populace would like to avoid being identified with. Butler (1997) extrapolates on the dramaturgical cycle, and emphasizes how language has agency, and that it is inherently a performance that all of us are engaging with in order to portray certain things about ourselves to those around us. Because language is an action, Butler argues that it can also have physical, painful consequences, which are not incurred solely by physical contact and aggression. Certainly, this notion is supported by the fact that the brain demonstrates activation in its pain network both in the cases of social pain,

which is always incurred via communication with one another of some sort, and physical pain (Lieberman & Eisenberger, 2009). Even though this argument has been demonstrated scientifically to be accurate, Butler is still operating against the societal notion that speech cannot really behave in this way, but rather individuals that experience pain as a result of the rhetoric another person employed are simply too soft, weak, or politically correct. The common phrase “sticks and stones will break my bones, but words will never hurt me” is at the center of this oppositional view to the invective power of language, and Butler is demonstrating the way this has come to be utilized as a justification for saying hurtful phrases in order to avoid taking any accountability for inflicted pain that is anything but imaginary.

Butler explains that the power of injurious speech lies in the fact that it is wielded on an interpersonal level in order to deprive another person of their wellbeing. This affords the audience a good rationale for why hate speech can be considered an action; it is used with an intention to inflict a new reality onto another person and is indeed capable of doing so. To this degree, it cannot simply be said that the effects of hate speech are imagined or exaggerated in the audience since it is frequently utilized as a mechanism by which to belittle others and it is often difficult or impossible to actively choose not to feel the effects of this forced reality. Given that there is scientific evidence that this last point, the argument can then be made that there are grounds for legal redress. Already, there are legal ramifications that exist for physical injury, but so too does Butler argue that the state has the power to create, encourage, or dissuade the use of hate speech which is capable of inflicting equivalent psychological damage as physical violence is to the body (1987). This will be explored further in forthcoming chapters, but it is essential to point



out preemptively that the state's permissive attitude with regard to certain language provides justification for ongoing hateful transgressions.

I argue that Butler's working model of hate speech applies in the context of psychopathology on the basis that PRETENDS functions in the same manner as the injurious speech Butler describes in *Excitable Speech*. Specifically, in thinking about some of the words Foucault and Gould pointed out in chapter one like "idiot" or "moron," it is possible that the utilization of these words will result in psychological experiences of pain and loss of worth. Interpersonal actions that invoke these words are not only damaging the perception of psychopathology in others, but they are also actively othering another person who may then experience the effects of ostracization or equally serious actions of bullying or abuse. Indeed, it is these rhetorical markers that help to signal out new targets of othering, and although this is an unfounded perception of psychopathology as being worthy of discrimination, it is perpetuated by this hate speech. Subsequent actions like physical violence against individuals experiencing symptoms of psychopathology may then be the subject of legislative intervention, but this discounts the first hateful action being rooted in speech as it so often is. To this degree, Butler's theory of invective speech functions well to demonstrate why intervention of some sort may be appropriate as a response to this form of hate speech since it may prevent the situation from escalating to extreme levels of abuse and potentially self-injurious behavior.

One of the major pushbacks against the notion of legislating against hate speech is that instituting a legal limitation will negatively affect our Constitutional right to free speech. Certainly, there is validity to this feeling, but already we do not have an

unfettered right to say whatever we please without consequence, and while I could make the argument that we simply should not say whatever we want with a knowing that it constitutes a hateful, pain-inflicting action, that does not genuinely dissuade individuals from engaging in this rhetoric. Some sort of societal, preventative intervention is necessary, particularly given that the historical narrative has been cyclical and speaks to a relatively high future risk of further abuse for individuals experiencing symptoms of psychopathology.

In order to best address the argument that any legal intervention would hurt the intrinsic value of our Constitutional right to free speech, I wanted to examine court cases that help demonstrate an application of the social contract theory. The social contract theory explains that, in order to live in a society of any sort, individuals must then give up some of the total and complete freedom that humans experience in a state of nature. The origins of this theory lie with Thomas Hobbes, who argued that this contractual exchange of freedoms beneficial in a society because of how difficult it is to live in an unfettered state of nature (Zalta, 2020). Thusly, we already do not have complete freedom of existence because we have agreed to live within the bounds of a society with certain rules and regulations in place, which are often for the better; obeying traffic laws rather than driving however one pleases, for example, protects human life even though we do give up some freedoms to do so. Based on the social contract theory, then, there is an established exchange of certain liberties for the purpose of public safety and betterment.

In the case of language specifically, the Supreme Court has also addressed the legality of certain speech. In the famous case of *Schenk v. United States*, this landmark case addressed, for one of the first times, what falls into the category of protected speech,

and what speech constitutes, in the words of Justice Holmes writing for the majority opinion, “clear and present danger” (Schenck v. United States, 1919). This case dealt with an opposer to World War I, Charles Schenck, who was distributing leaflets to encourage people to disobey the draft order. He was arrested and charged with violating the Espionage Act of 1917, and he appealed on the grounds that his arrest violated his First Amendment right to free speech and the Supreme Court disagreed saying that the First Amendment does not protect speech that causes danger. Legally speaking, there is now an established degree of legality regarding what speech can constitute a danger. There are not any Supreme Court rulings on the concept of hate speech specifically, particularly given that Justice Holmes famously compared Schenck’s distributing of propaganda to shouting fire in a crowded theater, which clearly endangers the physical wellbeing of others since it incites others to behave in dangerous manners. However, as we have established, equal damage can be inflicted psychologically with rhetoric that constitutes the same degree of pain that physical damage can cause in the brain’s pain circuit. Therefore, we can infer that Butler’s definition of injurious speech that perpetuates direct, negative effects via the dramaturgical cycle can therefore be considered a clear and present danger to individuals experiencing psychopathology, and it would certainly be in the court’s ability to regulate.

That being said, however, I am not necessarily arguing that legal censorship is the best or most appropriate action to take against this issue. Butler says as much in her work, and explains that censorship can often amplify the conversation it is seeking to prevent, and to center attention more solidly on the issue may increase the desire to otherwise belittle or diminish the experience of those experiencing psychopathology (1997). Rather,

I simply mention the possibility of legal redress to demonstrate that there are significant, detrimental effects that exist with regard to hate speech perpetuated against psychopathology to the point where it may represent a clear and present danger. Moreover, it is important to address the source of frequent pushback regarding an individual's ability to perpetuate hateful narratives, given that that is a likely and frequent reaction regarding politically correct speech.

To quantify the negative reaction to politically correct speech, the pushback that often comes in response is based in a psychological concept entitled reactance. Jack Brehm (1966) is the first psychologist to posit this theory, and he explained that if an individual feels as though their behavioral freedoms are in any way reduced or threatened with reduction, then the individual will be motivated to regain those freedoms and fight harder towards that end. This is precisely the phenomenon that we see in attempting to limit free speech in any way, and has in large part been part of the controversy with politically correct speech. As a result, reactance certainly would factor into this particular conversation where I have demonstrated that common phrases like "moron" have a deep history of hatred and institutionalization and therefore could be dangerous in modern utilization (Conway et al., 2017). That being said, being aware that reactance opens the door for further, now intentional abuse, demonstrates that now people will have a new justification to perpetuate this negative cycle of rhetoric, which would certainly move us backward in terms of the historical progression we have seen in treatment and understanding in the psychological community.

One other consideration to make against the solution of legislation, however, is simply because hate speech, and the particular vernacular that comprises its base of slurs,

is dynamic. That is, the words that are utilized invectively change over time, and even the ones that are created with good intention can be corrupted, as we have repeatedly seen over the course of our history. There may be room to institute legal redress in some cases where the effects of language use can clearly be identified as actively and profoundly detrimental in someone's life, but there is simply no way to ban certain words legally. Regarding what can be done in order to change the rhetorical situation surrounding psychopathology, this will be examined further in the following chapters which will advocate for perceptual shifts in popular culture, as well as better mental health education.

This chapter has endeavored to demonstrate the theoretical framework under which our rhetoric operates, and then specifically how it affects the field of psychopathology via the general public's interpretation. The general public does not typically have a familiarity with psychology and the subdiscipline of psychopathology, and therefore the exposure they have to it is in the everyday rhetoric that our society employs. Having an awareness of the impact that PRETENDS has for individuals experiencing psychopathology is one of the first steps towards improving the conditions that it begets. Again, we will return to future directions of improvement in forthcoming chapters, but this is the base upon which those remediation suggestions will be built. The theories posited by Burke and Butler, when combined, demonstrate the exigency that the societal issue of interpreting psychopathology has, since it is creating a false interpretation of an already marginalized and largely misunderstood group that needs our empathy. Now that I have established the connection between rhetoric and psychopathology, and we have seen how it has perpetuated the occurrence of the

historical cycle of abuse related to psychopathology, we will move into a discussion of how this rhetoric manifests in the modern day through the horror genre. Ultimately, we will see that the horror genre and popular culture inform the degree of understanding that the general populace holds, and how the rhetoric that this media employs also informs treatment of psychopathology.

## CHAPTER FOUR

### Psychopathology as a Horror Trope

Previously, I demonstrated the manner in which the rhetorical theory this thesis focuses on has the capability for tremendous power in terms of swaying public perception of mental health, which has also been shown in the context of the history of how psychopathology is treated. I have also discussed the effects that popular culture has on the public perception of what the reality of psychopathology is. Ultimately, a belief in the scripted, carefully constructed Hollywood narrative and rhetoric of psychopathology encompasses the ideology of PRETENDS in that they are catering to a specific, often villainized idea of mental health. As a result, the public responds with outrage, disbelief, fear, or pity at differing accounts of mental health challenges. In this chapter, I will engage in a discussion of the rhetorical connection that has been drawn between psychopathology and the horror genre in the context of movies and video games. I will explore the manner in which these examples of psychopathology as a trope to induce fear has created a new plane upon which people engage with different diagnoses of mental illness utilizing the tool of the dramaturgical cycle.

The first question that arises when considering the horror genre is who the audience is that engages with these materials and what exactly is so compelling about seeking to be scared. In part, there is a fulfillment of the human desire to categorize; as a species, humans appreciate ease of dichotomization in order to be able to judge situations quickly and accurately (Monroe, 2019). Indeed, the brain may be hardwired for dichotomized thinking (Albrecht, 2010), and while this research is still emerging, this

propensity towards categorization into one or the other is certainly reflected in many facets of entertainment. In fact, the most popular archetype that falls into this frame of thinking is the classic hero versus villain. This is often the crux upon which the climax of entertainment rests. When stories utilize this archetype to carry the audience through their plot, it is very easy to follow along and audiences can rest easy knowing that, in all likelihood, the story will conclude neatly with the hero triumphing over the villain. The audience can put down the book, walk out of the theater, or turn the TV off with a sense of satisfaction that there is righteousness in the world and the simple good will win against the simple evil.

The problem arises when we realize that reality, humankind, cannot map into these simple dichotomies. Although our rhetoric, as we have seen in the stages of the dramaturgical cycle, attempts to categorize individuals in this way to map onto the Hollywood realities we are confronted with every day, we are dynamic beings. Quite often, we find humanity in the midst of the metaphorical “morally grey” space. There is not an easy answer for why somebody did something bad, and to assign them the label of “villain” or “evil” is to drastically reduce or erase their lived experience which likely factored highly into what occurred. Granted, not all entertainment falls into this trope; there are plenty of examples of anti-heroes and characters that the audience simply cannot ascertain whether they are classically good or bad (Lamont, 1976; Palfy, 2016). Still, the corpus of entertainment has enough examples of this dichotomization that it is easy to identify as a common and even comforting trope. From animated Disney movies to the influx of content around super-hero universes like Marvel and DC to high fantasies like Lord of the Rings, there is a clear good side and bad side that the characters fall into.



With a clear picture of how dichotomized thinking is encouraged and exemplified by popular culture, I will now turn to the specific context of psychopathology. Often, as will be demonstrated with an abundance of examples, the crafted Hollywood reality will easily dichotomize their characters into the good and bad roles with a person depicted as experiencing symptoms of psychopathology given the role of the villain. Although this happens in media of any genre, it is especially apparent in the horror/thriller genre where, since the beginning age of cinema, it has reflected and changed the way the audience constructs mental illness (Mancine, 2020). To give a sense of the prevalence of construing psychopathology as dangerous or scary in movies, I will offer some brief examples here, and I will explore more current examples with significant death throughout the remainder of the chapter. An early horror movie entitled *The Cabinet of Dr. Caligari*, released in 1920, depicts a psychiatric patient struggling against a megalomaniac psychiatrist, and this is the very first instance of the connection being made in media between psychopathology and horror (Mancine, 2020). From this movie, we get a burst of activity in the horror genre with popular films like *One Flew Over the Cuckoo's Nest* with graphic depictions of electroshock therapy in psychiatric wards, *Halloween* where Michael Myers murders his sister at age 6 and is committed to a psychiatric ward only to escape, and *The Shining* with a recovering alcoholic experiencing delusions which lead him to be a murderer (Mancine, 2020). There are plenty other examples in this genre, but these provide a good base to understand the subject of this chapter, since they spark a tremendous amount of fear from the audience regarding how psychiatric patients or other experiences of psychopathology may lead to a personal danger. These movies, along with other classic horror movies, have established

a preceding association that psychopathology is inherently scary and thus a worthy subject of the horror genre. It is also important to note that, although these movies will not be the focus of the following discussion, they are still revered in the context of popular culture and are well known to the point that even individuals who do not like horror probably know of these movies.

For clarity's sake, not all horror movies rely on the DSM for obscure diagnoses and symptomology to attribute to their villains. For example, *The Babadook* is based on a fictional monster and a woman experiencing grief over her husband's death. Still though, there is enough new horror content being produced that negatively portrays psychopathology that it requires a significant look into the functioning of rhetoric in horror as it exists and informs public discourse in the present day.

In thinking of movies that make a strong statement about psychopathology, the 2018 movie *Hereditary* is a great example, since it very explicitly and openly attributes the causes of the family's misfortunes to the existence of psychopathology in its members. The movie is based on a small family of four; two parents with one daughter and one son. The movie begins with a funeral where we come to find out that the grandmother has just passed away, and they all must come together at her funeral. Interestingly, the mother's hobby is building doll houses and dioramas of things that she has seen or experienced, which is reflected in the audience having a physical distance from the happenings of each scene. Most of the movie, especially the grounding shots, help to establish the sense that the viewers are outside parties observing the happenings of what could easily be considered to be a dollhouse. The choice to film the movie in this way certainly communicates a notion that the reality of the happy family is simply an

illusion, a thing of playtime dreams. In fact, the more serious the topic, the more “real” the cinematography becomes.

A scene of incredible importance in the movie happens when the mother, Annie Graham, finally decides to attend a support group for individuals who have lost a loved one. Although this scene begins as the others have with wide shots where the audience feels as though they are looking into a three-sided room of a dollhouse, as Annie gets the courage to speak, the camera zooms in more and more thereby invoking the same level of Hollywood reality as most other movies traditionally use. In this scene, Annie reveals where the source of her strained relationship with her mother originated, and here we find a rhetoric of psychopathology in abundance. Annie confesses that her mother experienced Dissociative Identity Disorder and dementia, which became more severe in her old age. The way that Annie describes her mom, even in death, reflects an extreme reluctance to admit to any degree of love for her mother, and she directly attributes this fact to her mother’s depreciating mental health claiming she “wasn’t all there” (Aster, 2018). Annie also confesses that her father had psychotic depression and died by starving himself, and her older brother had schizophrenia and committed suicide on the grounds that his mother “put people inside him” (Aster, 2018). As Annie walks through these confessions, the camera moves in closer to her to the point where she is the only person in the frame after beginning with an aboveground view of the circle of participants and the gym that they were meeting in. What is fascinating about this cinematographic choice is that the audience is being told that this moment, at the very least, is a real part of the film. The symptoms and instances of diagnosed psychopathology that Annie describes in her family are not performative like perhaps the happy, mundane image of their family in

other scenes framed like picture perfect dollhouses are. Here is a piece of reality onto which the audience can hold.

Even the title of the movie, “Hereditary,” communicates the importance of this scene. There is an ongoing fear in Annie based on the notion that she may or may not end up suffering a similar fate as her family due to the potential hereditary nature of their diagnosed instances of psychopathology (Skyler, 2018). Empirically speaking, there is something to be said for this perspective; that is, different manifestations of psychopathology have varying degrees of heritability with researchers putting the general heritability of psychopathology somewhere between 30% and 60% (Carey & DiLalla, 1994). What is important to note, however, is that this heritability rating is never found to be at 100%, meaning that it is not a foregone conclusion that someone will develop instances of psychopathology if their relatives have (Uher, 2014). There are, of course, environmental influences that are highly important regardless of an individual’s propensity to develop symptoms of psychopathology even if said propensity may be higher in some instances than others.

Ultimately, all of the characters described by Annie are portrayed intensely negatively. Annie’s brother committed suicide because of the escalation of his purported mental illness, which implicates a hopelessness in subsistence. Annie’s mother is shown to be tremendously manipulative to the point of delusion and is surrounded by Annie’s fear that she would “corrupt Annie’s children.” The father is the only character identified as experiencing psychopathology to be left mostly absent from the movie’s dialogue, but still this does not provide any sort of redemptive or understanding nature. Silence, in this case, does not serve as a positive or even non-negative portrayal of this character, since

his sole attribute is to exaggerate the psychopathology in Annie's family and his only purpose is to be fodder for Annie's fear. The movie is governed on the sense of impending doom, and this begins as early as the opening scene wherein she describes the entirety of her family, both alive and dead, as being ruined (Aster, 2018). This doom, however, is sharply intensified in the aftermath of Annie's confession to her family's history of difficult mental health issues; a previously nameless fear has just been identified as psychopathology. Here then, we see the dramaturgical cycle play out precisely in the PRETENDS umbrella wherein psychopathology becomes an easy scapegoat. In fact, the movie accomplishes this goal so well that audiences have described experiencing an innate, unspoken fear while watching this, wherein they felt their own concerns about developing symptoms of psychopathology being reflected in Annie (Dibdin, 2018). Thus, the movie adds credence to the notion that this fear of psychopathology, both of seeing it in others and developing symptoms personally, is a valid, needed expression.

Again, we see a twofold problem in the inherent associations made with psychopathology; not only is it considered to be an inevitable ruination of the character Annie and her family, but there is an intrinsic wrongness associated with psychopathology and its symptoms based in the tremendously negative portrayal of all the characters that appear to suffer with it throughout the film. As I've explained, family history can speak to a higher propensity to develop psychopathology, but it is not the death sentence or utter destruction of a person's being that it is depicted to be in this film based on the rhetorical markers like "ruined." In fact, as the movie progresses, it is revealed that rather than being symptoms of psychopathology, Annie's mother was

involved in Satanic worship, and was therefore inflicting abuse on her family members in order to see the restoration of the king of Hell into the world. That being said, however, it is never explicitly addresses that there were no cases of psychopathology in Annie's family; the audience is still left with the same degree of fear related to psychopathology, as is demonstrated in testimony from viewers. Not only does the introduction of demonic possession not change the original narrative's interaction with PRETENDS in the audience's new reality, but indeed it creates another significant fear association. Now, there is an additional intrinsic association of wrongness based on the rhetorical choices to associate these cases of psychopathology with a higher propensity to engage in wrong or disturbing behavior like demonic worship and possession. I mentioned this in chapter one of this thesis, but this sense of demonic possession as an explanation for psychopathology is a perspective that has existed at least since biblical times, and we see the impact of this association has carried into the modern day horror genre.

Again, the fact that testimony from viewers reflects an ongoing and empathic fear associated with the development of psychopathology demonstrates that *Hereditary* was successful in establishing a new reality for psychopathology even if the instances of psychopathology depicted in the movie were not genuine. If the audience identified strongly with Annie, there becomes a guilt in doing so as time goes on in the movie, particularly as Annie makes bad decisions that eventually result in the destruction of each individual in the family. Thus, the order stage moves quickly into the pollution phase of the dramaturgical cycle. When the audience realizes that the source of said guilt is Annie's identification with psychopathology in her family lineage in the victimage stage, there is a move to disidentify with the villainous subjects. Perhaps the villain is not

Annie, although she is certainly portrayed as making a myriad of bad decisions, but there is a villanization of other characters such as Annie's mom who is specifically assigned as the cause of the brother's suicide. Heroizing the concept of neurotypicality seems the natural consequence of this movie in order to allow for effective disidentification with the subject of evil in this movie. Thus, in the end, there is a transcendence to the new reality that psychopathology is bad, scary, and related to intrinsic evil in the world whereas neurotypicality is a safe space and therefore warrants a disproportionate fear of the newly established other.

That being said, however, *Hereditary* is by no means alone in this depiction, or in its association of psychopathology with supernatural, horrifying deviations in behavior. Another movie that depicts psychopathology in the specific lens of aging is entitled *The Taking of Deborah Logan*, which also speaks to the fear of eventual development of symptoms of psychopathology. *The Taking of Deborah Logan* is a 2014 horror movie that is based on the experience of the titular character in her development of Alzheimer's disease. The focus of the plot in this case is a camera crew interested in making a documentary of the development of Alzheimer's disease in order to bring more awareness to the disease. Once again, however, we get an intrinsic, assigned fear to the development of this disorder and specifically in likening some of its developmental signs to be demon-related. Some disagreement may arise from my attribution of Alzheimer's disease to the umbrella of psychopathology, even, and this notion is often based in that it is a common development and the result of living to an age we were not intended to reach. That being said, however, it is classified as a diagnosis of psychopathology in the DSM-V, and therefore warrants inclusion in this discussion. Granted, the diagnosis

cannot be reached with complete certainty until postmortem assessments are completed, but there is a relative diagnostic clarity in life to the point where people are said to have Alzheimer's. In fact, the reason this movie has incredible exigency is because Alzheimer's disease is the most common form of dementia that affects the elderly population (Craig et al., 2011), and therefore it is highly likely that viewers of the movie will either know someone or know of someone impacted by Alzheimer's disease. Moreover, studies have determined that dementia is highly likely to be a cause of institutionalization with approximately 50.9% of dementia patients being institutionalized at some point in the course of the deterioration of function (Hébert et al., 2001). Certainly, in thinking about the implications of confinement, as Foucault pointed out, there is a high potential for corruptive organizations, and therefore groups that are more likely to be institutionalized are more likely to be the recipients of maltreatment. Contemporary society does have certain laws and safeguards against these instances, but there is always the potential that they will suffer some sort of mistreatment that may manifest as neglect. Therefore, a movie about a woman with Alzheimer's potentially being institutionalized, and therefore normalizing this occurrence, has a part to play in the narrative of psychopathology.

That being said, then, the movie itself features a progression of demonic activity throughout the movie in the same way that *Hereditary* did, which is at first excused as a normal manifestation of the Alzheimer's disease that Deborah is reported to have. In the specific case of *The Taking of Deborah Logan*, the doctors that are assessing Deborah throughout the movie say, even in the aftermath of Deborah removing her skin from her neck, that her Alzheimer's is spreading, and her specific case "is aggressive" (Robitel,



2014). In order to best understand the conflation of demon possession with common manifestations of Alzheimer's disease, it is important to note what the common manifestations of Alzheimer's disease are. Some of the common behavioral/physiological symptomologies associated with Alzheimer's disease are memory loss, lack of spatial awareness, confusion with time or place, issues with speaking and writing, changes in mood and personality, and losing things (Alzheimer's Association, 2020). Deborah does display these different symptoms throughout the movie, even though as the movie progresses her behavior fits less and less neatly into the box of Alzheimer's symptoms. Still, Deborah does have trouble with her memory; at the outset of the film, she cannot remember ever having been to Germany even though her daughter points out not only that she's been, but that the trip meant quite a bit to her. She also fails to remember instances of strange behavior, such as in confronting the crew while brandishing a knife and accusing them of stealing her gardening spade. Certainly, she seems suspicious and aggressive, which increases in emotional potency as the plot of the movie progresses, and can be construed as a change in mood/personality. Granted, not all of the symptomologies that the doctors label as a result of Alzheimer's can be clearly construed as such, such as Deborah's language insufficiencies, which are captioned throughout the movie as "demonic mumbling" and clearly not instances of simple issues remembering words (Robitel, 2014). Given that the doctors and medical experts are unable to distinguish between Alzheimer's symptoms and demonic possession, however, it is not unfounded for the audience to connect the two in their own lives.

As a result, then, there is significant enough overlap in the way the directors rhetorically portrayed Deborah so as to conflate symptoms of psychopathology with

demonic possession. Again, because Deborah is a dangerous and violent character throughout the movie, depicted as brandishing knives against the film crew, tearing her own skin off, and staring ominously at them in pitch black rooms, but all of her behaviors are considered to simply be manifestations of her Alzheimer's disorder, we are shown that this group of individuals experiencing this symptomology are uniformly dangerous. Again, this lends credence to the notion that one of the best courses of action is simply to confine them, likely under the guise of it being for their wellbeing, but often motivated simply by the notion that they, the would-be patients, are scary. Moreover, the line between the two being so thin as to confuse demonic possession with Alzheimer's disease demonstrates not just dangerousness, but an inherent wrong and evil nature to the disorder on the whole. That is, the experience of Alzheimer's being connected irrevocably with demonic possession demonstrates that there is an uncontrollable evil which is likely to affect those around it, as is the case in the movie where people are killed, kidnapped, or simply forced to leave the situation in order to preserve their own wellbeing. This portrayal of Alzheimer's bolsters fear not just in association with current Alzheimer's patients, but also regarding the potential to develop it at some point in their lives. It is a similar story to *Hereditary*, and each of these movies is part of the broad spectrum of horror that implicates psychopathology with the association of demonic possession/worship, thereby alienating large audiences that previously may not have carried these prejudices against psychopathology.

The two movies I have described thus far are relatively recent instances of these portrayals, and it speaks to the contemporary relevance that horror popular culture still has, and the manner in which these depictions inform real life reactions to those around

us, specifically in the context of psychopathology and its symptoms. Another interesting manifestation of this fear of psychopathology comes in the changing association of the word “asylum.” As I’ve mentioned previously, the word itself means refuge, but it has become intrinsically associated with fear and horror because of the immense and prolonged dehumanization of individuals experiencing symptoms of psychopathology that were treated in those institutions. As a result, asylums have become a common trope in the horror genre, thereby adding to the ever-increasing negative imagery and rhetoric surrounding psychopathology. Indeed, asylum imagery has spawned a subgenre in the horror category across multiple platforms such as YouTube, video games, and TV shows.

The most salient example of this is, as I mentioned, found in numerous video games. Popular games like *Outlast*, *Silent Hill*, and *The Evil Within* all take place either predominantly or solely in the context of asylums. The game *Outlast* was released in 2013, and its premise is that the player is playing as an investigative journalist who is seeking to uncover the secrets of the asylum and the horrible things the doctors have done to the patients. The game was released on multiple gaming platforms, and was so popular that it has been adapted to newer gaming platforms since, as well as received a green light for two sequels, one of which is forthcoming at the time of writing, and is set for release eight years after the original (McWhertor, 2019). The first detail that the player notices upon beginning the game is how dilapidated and horrifying the asylum looks at its outset. The game takes place at night in order to play on the audience’s natural inclination to fear dark, unknown spaces. In fact, throughout the game, the player must continue to find batteries in the asylum to power their flashlight, otherwise they risk playing the game in almost complete darkness where anything might jump out of the shadows to

attack them. The other visual detail that is important to mention is that each room is dirty, decrepit, and often covered with bloodstains thereby lending the players the impression that these buildings are dangerous and unkempt.

Although the premise of the game is that a journalist is attempting to reveal what doctors have done to the patients of the asylum, the patients themselves are the subject of the player's horror. Patients seem to be the only living beings within the asylum, and they are depicted as grabbing onto the player's character, attacking, or simply moving unpredictably alongside scary, shocking sound effects. One important note specifically related to the sound effects is the manner in which this primes the audience to have a learned fear reaction to patients throughout the remainder of the game even without noises and shocking the player. This works via classical conditioning, as established by Ivan Pavlov, which basically states that the game is pairing a natural fear reaction to the loud noise with the patients themselves (McLeod, 2018). Thus, even in the absence of the scary sound effects, the player is likely to have a fear reaction just to seeing a silent patient. Adding further credence to the player feeling scared by the patients experiencing symptoms of psychopathology, beyond the obvious villain role that they play in attempting to prevent the player from accomplishing their mission, is that they are referred to as "variants." Even the linguistic portrayal of the game's villains demonstrates that they are other. With the utilization of this label, they are now removed from an association with humanity, and instead are "variants," something wrong that varies so significantly from "regular" humanity that they must be categorized as such in no uncertain terms. So too are they portrayed as being covered in blood and gore, speaking

with deep, raspy voices, and appearing proportionally unrealistic so as to match the linguistic dehumanization to create an overwhelming, unequivocal artificial reality.

Clearly, per the dramaturgical cycle, this game is part of a large body of horror video games that are creating a new and false reality in the scope of PRETENDS. There is a clear language of othering, and an invective nature to the rhetorical situation, both linguistic and visual, that the individuals experiencing psychopathology are presented in. The player, the person sitting behind the controls, is heroized for their non-association with the asylum patients, and are put into a conflict of having to be against the patients. This us versus them mentality, even in the context of a video game, is likely to present in the same polarization in their real life. Indeed, although the argument about video games creating prejudice and aggression in players is hotly contested, studies have shown that exposure to physiologically arousing content, meaning content that raises blood pressure and heightens respiration, do indeed create a higher likelihood of both prejudice and aggression (Anderson et al., 2010; Saleem et al., 2012; Shafer, 2012). It is not a foregone conclusion, of course, that violent content itself is what creates instances of higher aggression in the audience, but rather it is the ability to physiologically arouse the audience that creates the potential for increased aggression and prejudice. Of course, scaring the audience is the easiest manner by which to instantiate physiological arousal (Steimer, 2002), which game developers have been praised for doing effectively in the specific case of *Outlast*. As a result, it is clear then that the pollution of the perception of psychiatric patients and heroization of the player for fighting the villainized patients create an artificial reality that may result in ongoing prejudice and continued misperception of psychopathology and asylums in real life.

Another effect that the portrayal of psychopathology in *Outlast* and other horror video games with asylum imagery is that it may create a rhetoric of fear with regard to psychological treatment. Presently, there is a large stigma that surrounds therapeutic services, and I posit that some of this stigma comes as a result of an ongoing negative association with asylums perpetuated in part by horror video games. Because institutionalization in asylums was treated almost as death sentences, and rightly so based on the treatment that was incurred before a humanizing intervention was instituted per the discussion in chapter one, asylums not only are points of tremendous fear today, but this fear has generalized to encompass other therapeutic realms. When faced with images of torture, dilapidation, terror, and pain, i.e. a modern manifestation of what Foucault described in the asylums of the Enlightenment period, it is easy to draw the conclusion that one might be faced with this reality were they to seek therapeutic assistance in their own lives. Although this occurs on a greater scale than just a single individual, it is still wrong to dissuade anybody from participating in their own wellbeing via prolonged and continued villainization of asylums and their patients.

Of consideration in the narrative of horror video games is the manner by which they attain their immense popularity. An important factor in this reality is that content creators will show themselves playing the game in its entirety such that these promotional playthroughs help to reach a wider audience than even people who have the required gaming systems. Throughout the 2010's, the popularity of video streaming services like YouTube skyrocketed, and many creators on the platform made their living by doing video game playthroughs. In fact, the single most subscribed to creator on the platform, as of the time of writing, goes by the internet handle PewDiePie. PewDiePie, or Felix

Kjellberg, is the first person to reach 100 million subscribers on the platform, and his rise to stardom was largely instigated by playing horror games for his videos. He is an incredibly popular internet personality, and has said that his playing games is tremendously influential in terms of getting people to buy and play the games like he does, which increases the value that game developers place in asking him to play their games. Again, Kjellberg helps these developers reach audiences that otherwise may not engage in this subject matter, and as a result more people are exposed to these rhetorical images and depictions of psychopathology than would otherwise have played the game. Since he specialized in horror video games, and indeed played *Outlast* and other related examples on his channel, he helped to broaden the audience that the game had and indeed helped to drive sales of the game itself. Not only that, but he also demonstrated his arousal with a corresponding heartbeat monitor to show on the screen the physiological effect that playing the game had on him. PewDiePie is not the only channel that does this, and plenty of other such creators like Markiplier with almost 30 million subscribers and JackSepticEye with 25 million subscribers have also played these games and shown them to their own audiences which may not overlap with Kjellberg's. As a result, it's likely that millions more players and people have experienced the narratives put forth by these games, and this helps to continue to bolster the negative perception of psychopathology in the present day, particularly since these videos are all still available and likely always to be recorded somewhere in the archives of the internet. The potential for misinformation to spread in this manner is highly likely, and as a result requires more consideration of what the message precisely is that the highlighted video games are asking the audiences to believe.

Having demonstrated examples of psychopathology that fall in the realm of a clearer fictional account, this chapter will now turn to addressing horror in the context of realistic fiction. Returning to the conversation I began having in the introduction, shows like *Criminal Minds* have been tremendously influential in terms of changing perceptions of psychopathology, and these shows are not so farfetched that people would not draw the conclusion that they could be based on real occurrences of criminal behavior. In fact, to this degree, many episodes are at least loosely based on real crimes committed, per the admission of the writing staff of the show (Jeunesse, 2019). Therefore, these shows have the ability to draw direct parallels to reality, and while some viewers of the previous examples may be able to excuse the negative portrayals as the result of pure fiction, in this case, there is no way for the audience to simply say that the cases depicted here are a false reality even when they still remain so. In fact, this is the opposite of what the show wants since if the audience cannot believe its narrative, then they will not have the same riveted excitement as they do with the present belief in the show's ability to reflect real life. For some, this may even provide an outlet through which they can find signs to look out for in their personal lives; tips and tricks on how to spot potential offenders and then how to appropriately deal with the situation if ever it came to pass (Vicary & Fraley, 2010).

The problem in conflating reality with a show that is loosely based on it is the fact that it makes it appear as though crimes of this caliber as they are related to psychopathology are far more frequent than they are. The truth is, almost every episode hinges on a depiction of an individual experiencing symptoms of psychopathology, and there is always an inhumane, unbelievable crime that is directly caused by these people.



To name a few specific and explicitly stated diagnoses that are portrayed on *Criminal Minds*, there are multiple episodes demonstrating murderers/rapists/criminals that are diagnosed with Dissociative Identity Disorder, Antisocial Personality Disorder, and Obsessive Compulsive Disorder.

One credit to offer the show is that they do not criminalize Schizophrenia, which is a common victim of negative stereotyping in popular media. The lack of this negative stereotyping, however, may be due to the aforementioned character in the introduction, Spencer Reid, having a character arc where it is revealed that there possibility of developing symptoms of Schizophrenia due to a higher heritability estimate based on his mother's diagnosis. In terms of Schizophrenia, there is more of a humanized, noncriminal impression in that show since it was utilized for character development for Spencer in demonstrating the difficulties his mother encountered while raising him as a result of her symptoms of psychopathology. Because Spencer is such an empathetic character and hero of the show, they could not turn around and change the portrayal of Schizophrenia to be murderous. That being said, however, certainly the other manifestations of psychopathology are poor examples in terms of improving the understanding of the general populace, as with the case I mentioned in the introduction of Tobias and his DID symptomology.

What *Criminal Minds* and similar shows like *Law and Order* or *NCIS* or *Bones* have done, in essence, is create an intrinsic association for the public that psychopathology relates to a higher rate of criminal acts and that they are dangerous, and therefore should not be integrated so closely with the rest of society. The scenarios depicted in these episodes are often greatly exaggerated, and depict some truly depraved

and heinous crimes, since these offer a sufficient shock value to incite a broader audience to consume that media even if they are rarely committed in reality. In particular, *Criminal Minds* makes significant use of violent crimes, which creates the notion that psychopathology is dangerous and liable to incite an individual to commit such crimes in the general public. Even looking at the title of show, *Criminal Minds*, points to the fact that it is the brain itself that is the root of the evil perpetrated in the depicted crimes. To say that intentionally committed crime is the result of a criminal mind is to say that psychopathology is to blame. Even if there are crimes committed in association with symptoms of psychopathology, *Criminal Minds* makes it appear that it is an assured result of psychopathology (Schug & Fradella, 2014).

The question that is posed in response to these points is that even if the likelihood is low that a person with psychopathology will commit crimes, isn't a single case grounds enough upon which to take preventative measures to protect society? Undeniably, society has a right to protect itself, but so too do individuals experiencing psychopathology who will never exhibit any dangerousness. We cannot deny a person the right to live their life unimpeded unless they personally have provided evidence that they are not able to manage their own freedom. Moreover, the notion of dangerousness as it has come to be associated with psychopathology is genuinely unfounded, and supported only in fictional cases for public entertainment. In reality, however, "our science tells us that the vast majority of those who we now diagnose as mentally ill will never 'hurl a spear' in a delusional rage. Most of those who do commit violent acts have no such mental illness to blame, though many would seem to act on the basis of excessive threat perception – an ill-founded fear of harm from others – even in the absence of underlying psychosis"

(Swanson, 2016). Here, we see a physical manifestation of the perceptions put forth and propagated by *Criminal Minds*, which is that people do act on the basis of this ill-founded fear of harm from individuals with symptoms of psychopathology. According to Professor Swanson (2016) at Duke University, even if we were able to completely cure all instances of bipolar disorder, schizophrenia, and depression overnight, this would only reduce instances of violent crime by about 4%. If it was not clear before, Swanson provides a higher degree of evidence that psychopathology simply is not the main reason that people are committing crimes and to lash out against them is to fundamentally misunderstand a large group of predominantly peaceful people.

The problem is clear in the case of the shows about criminal activity, but still the fact remains that psychopathology is an easy scapegoat to assign culpability to for a person's wrongdoing. The wrongness of this scapegoating is only exacerbated when the shows define, in no uncertain terms, that the criminal in question is diagnosed with an instance of psychopathology. That being said, however, this is not the sole negative interpretation of psychopathology, it is simply one that has associated it highly with fear. Moving further in the direction of reality in the horror genre, the true crime genre also has flourished in terms of popularity and viewership. To give a sense of just how fascinated people are with true crime in recent history, in 2018, true crime print book sales shot up to 1.6 million from 976,000 in 2016, the *Serial* podcast holds the record for the fastest a podcast reached 5 million downloads/streams, and there are reported tens of millions of viewers within the first week of the release of true crime docuseries like *Tiger King* on Netflix (Chan, 2020; Locker, 2014). Indeed, while this genre still consists of sensationalized accounts of committed crimes, it is a portrayal of something that really

happened rather than a fictionalized account based on something that really happened. Again, in this case, we see that it is difficult or impossible for the audience of the show to differentiate between the reality of the crime that was committed, the motivations behind it, and what the producers of the documentary want the reality to be. Indeed, even the genre's name "true crime" engenders a belief in the audience that they are being given a genuine reality to believe, even when this can never truly be devoid of bias on the part of the filmmakers.

In fact, when any murders or extreme crimes are committed, we see news reporters and law enforcement officials remark that "the person that did this must be a psychopath." (Shug & Fradella, 2014). It is clear, then, that the rhetorical marker that we assigned to encompass people that are capable and willing to commit some really serious crimes have become generalized as psychopathology on the whole which has an inherent propensity to commit crimes of all nature, even though, as we've shown in previous statistics, this is simply not the reality of who commits crimes. A diagnosis of psychopathology is not a precursor required to commit crimes, but again, this is the narrative that is pushed in the world of pop culture, and especially within the subsection that is interested in true crime. The villainization of psychopathology in the field of true crime documentaries speaks to broader public influence, particularly given that this language is heavily entrenched in news outlets, social media platforms, and may both reflect and influence ongoing negative portrayals of psychopathology in the horror genre. The reason this subject must be addressed in this chapter is because it is part of the reason that horror and psychopathology are so entrenched with one another, given that inspiration for movies comes from these true crime stories. To provide an example, John

Carpenter, the director of the previously described, immensely popular horror movie *Halloween* based the killer in his movie on a boy that he met in a psychiatric institution who he described as having “devil eyes” (Carpenter, 2003). *Halloween* is one of many instances of horror movies that were at least inspired by real people and events, and therefore it warrants space in this chapter to dispel some misconceptions that are perpetuated by true crime stories. I will not be analyzing specific examples within the true crime genre if simply because it reflects much of the same narratives that the previously described crime-focused shows like *Criminal Minds* do. The only difference in this case is that they move even closer to the truth since, although they are sensationalized stories, they are not just based on a real occasion but rather they are about a real occasion. As a result, it becomes even more difficult for the audience to distinguish between what they should and should not believe when there is still a specific point and narrative that the producers of the true crime documentary want to reflect to the audience.

The final point that needs to be made with regard to the genre of horror relates to instances of shootings in society. Granted, of course, these once again move further in the direction of reality, since these stories do not appear in carefully constructed fictionalized or true crime narratives, but rather they are reported and reflected on with a relative immediacy. The notion of shootings must be addressed in this chapter is because of the way they reflect, in a real scenario, the manifestations of choices made in the previous examples I have mentioned. In the aftermath of a mass shooting, there are four common assumptions that arise reactionarily, and these include “that mental illness causes gun violence, that psychiatric diagnosis can predict gun violence, that shootings represent the damaged acts of mentally ill loners, and that gun control “won’t prevent” another

[shooting]” (Metzl & MacLeish, 2015). This paper is not going to be prescribing a specific solution to the problem of shootings, since that topic could only be addressed adequately in a separate paper, but as aforementioned, I will spend time addressing these claims if simply because of the public perception that shootings are inextricably connected to psychopathology. In fact, one news commentator in favor of gun rights proclaimed that “guns don’t kill people- the mentally ill do” (Metzl & MacLeish, 2015), which, when popular political news commentators take such a strong stance against psychopathology, it communicates the notion that we may, once again, be veering towards confinement of the mentally ill in order to defend society from a carefully concocted imaginary threat. To be clear, certainly, some mass shooters experience symptoms of psychopathology, but the problem is that these arguments provide fodder to classify the diverse spectrum of people and experiences that identify with some aspect of psychopathology under a homogenous label of “dangerous.” Indeed, this is precisely the concern I have identified that exists within the horror genre, and it is exactly what we see play out in the aftermath of shootings in real time.

In fact, the common feature that we see, specifically as it relates to shooters who are white, is the list of facts stating that they are “good people, but troubled,” which effectively employs psychopathology as a scapegoat for the behavior. This has been reflected in legislative decisions, such as in the Supreme Court when in 2008, although they were backing the right to bear arms, strongly endorsed the prohibition of gun sales to the mentally ill because they felt they had a higher propensity for gun violence (Metzl & MacLeish, 2015). Granted, of course, the statistical reality does not reflect a higher proportion of people experiencing symptoms of psychopathology and subsequently

committing gun violence. In fact, availability of guns is a much better predictor of gun violence than a psychiatric diagnosis of psychopathology in any form (Miller et al., 2010). Although the conversations around cases of shootings would have their participants and audience under the impression that these particular crimes relate to psychopathology as a causal root, this is simply not the social reality we live in. The number one problem, of course, is that we are supposed to empathize when there are mitigating factors, and assign culpability away from the specific shooter when they have the resources to otherwise appear not guilty (such as in past behavior, wealth, race, etc.) by assigning the problematic behavior to psychopathology. Although this is helpful for the specific person in question to avoid facing severe consequences for their actions, this scapegoating creates an artificial reality through which psychopathology has experienced repeated and sustained problematization. Because the horror genre has created a reality where psychopathology is scary and dangerous, it is extremely easy for the media and viewers to believe, when an instance of violence happens in real life, that the cause is psychopathology. Not only is this the narrative fed to society, often by the perpetrator of the crime and news outlets reporting the issue, but indeed it confirms the already underlying bias that exists for psychopathology on the whole. In this example, then, we see the manifestation of the portrayal in the horror genre, which create a cycle of the horror genre being believable enough to be scary, making new movies, shows, and video games, and being bolstered by real life examples. In order to break from this cycle, the horror genre must begin distancing itself from utilizing psychopathology as a villain.

Ultimately, popular culture has a tremendous amount of sway, and this has only been exacerbated by the immense connectivity of the world that has come with

technological innovation. All of the media that has been described thus far is accessible globally and with relative ease via smartphones, laptops, public computers, and simply requires internet connection. Moreover, even if the person being exposed to the media doesn't access it directly, they are likely to come across references to it in other shows, influencers, and even retail outlets. Because of the mass exposure the public has to popular culture, the portrayals of psychopathology that reside in any aspect of it are very likely to be communicated to and adopted by the audience. In the case of the horror genre specifically, this often contributes to false impressions, understandings, and negative interactions with individuals experiencing symptoms of psychopathology in the real, everyday world. Thus, the language patterns and phraseologies that are employed in the context of these facets of pop culture are of the utmost importance. In order to avoid repeating mistakes of the past such as in the case of confinement that is described both by Foucault in Europe but also Gould in the United States, there must be more portrayals of psychopathology that are accurate in terms of complexities and positive such that they reflect the appropriate low propensity for dangerousness and reducing stigma of behavior that does not typify arbitrary societal expectations. In order to counteract some of the problems that have ensued from the utilizing crime as scintillating true crime drama, basing famous horror movie characters off real people, and even exaggerating symptoms of psychopathology in order to tell a fictional, horrific account, more work should be done to change the focus of the horror genre to more productive lines of dialogue.



## CHAPTER FIVE

### Mental Health and Social Media

Previously, I demonstrated the manner in which the rhetorical theory this thesis focuses on has the capability for tremendous power in terms of swaying public perception of mental health, which has also been shown in the context of the history of how psychopathology is treated. I have also discussed the effects that psychopathology in the horror genre has on the public perception of what the reality of psychopathology is. Ultimately, a belief in the scripted, carefully constructed Hollywood narrative and rhetoric of psychopathology encompasses the ideology of PRETENDS in that they are catering to a specific, often villainized idea of mental health. As a result, the public responds with outrage, disbelief, or pity at differing accounts of mental health challenges. In this chapter, I will demonstrate how treating mental health in a partially opposite capacity, namely romanticizing certain diagnoses while villainizing others, is perpetuating the same false narrative specifically among Generation Z, but also broadly across social media platforms and the dominant figures on them.

Because social media is so heavily entrenched in the language of Generation Z, colloquially referred to as “Gen Z,” and this generation is experiencing higher reported instances of mental health challenges than previous generations (Bethune, 2019), there has been a significant amount of research regarding how these concepts correlate. People that fall into Gen Z are “27% more likely than other generations... to report their mental health as fair or poor” (Bethune, 2019), based on a nationwide stress survey conducted with the support of the American Psychological Association. To further demonstrate the

crisis of mental health that Gen Z is experiencing, the 2020 Stress in America survey conducted by the American Psychological Association has reported alarming statistics with 1 in 5 adults reporting poorer mental health this year relative to last year and 7 in 10 Gen Z participants reporting experiencing common symptoms of depression within the previous two weeks as of filling out the survey (American Psychological Association, 2020). On top of reported mental health challenges, 8 in 10 Gen Z participants also confirmed that they were not receiving needed support in order to cope with their long-term or newly acquired symptoms of psychopathology (American Psychological Association, 2020). Clearly, there are conditions affecting this generation that are either leading to increased instances and symptom expression of psychopathology, or that are simply affording a more acceptable platform through which to express said challenges. Regardless of what specifically has led to these higher instances of mental health challenges, however, it is clear that these statistics are indicative of an ongoing, well-documented generational struggle.

The following section is not a comment on the causality of the rise in psychopathology, but it is important to take into consideration other factors that have played a part in the generational experience of Gen Z. Even if these factors are entirely unrelated to the development of high instances of psychopathology in Gen Z, which although we will address seems unlikely given studies conducted in pursuit of this answer, the rise of technology has certainly changed the cultural landscape of a generation. In a study by Twenge et al. (2019), they find specifically that there is certainly a cohort effect with regard to Gen Z and their access to digital media. This article suggests that this may have created the consequence of higher instances of mental

health challenges, such as has been shown with spending a disproportionate amount of time online as opposed to face-to-face interactions resulting in higher instances of depressive symptoms (Lin et al., 2016; Shakya & Christakis, 2019). Not only is Gen Z contending with higher instances of psychopathology and related symptoms being expressed amongst the group, but so too are they experiencing a relatively unprecedented growth in technological availability and output such that it has dramatically changed the cultural landscape.

Twenty years ago, less than 7% of the world's population had access to the internet (Ortiz-Ospina, 2019), but as of 2019, 51% of the world's population is online with 88% of US users saying the internet is a positive presence in their life (Kokalitcheva, 2019). Given that the past twenty years coincides with Gen Z growing up, it is clear that this internet boom has differentially impacted this generation with regard to the way that they interact, particularly given the rise of social media (Figure 4). To give a better perspective regarding the increased utilization of social media, 5% of adults identified as using some kind of social media in 2005 to 79% by 2019 (Ortiz-Ospina, 2019). There can be no question then that if adults are making the switch to utilize social media so rapidly relative to the expected speed of change, then it is clear that a generation that grew up surrounded with social media as a norm would utilize those platforms with even higher degrees of frequency. As a result, the way that this generation communicates and the way these platforms impact mental health are a field of growing research, and therefore we still do not know long-term what the effects of such changes will be. Regardless of the question of long-term impact, however, the conversation of psychopathology is occurring, for Gen Z, predominantly on these platforms, which

therefore informs an exigency to examine what is being said, for what motivational pursuit, and what the impact of this language is in terms of the broad understanding of psychopathology.

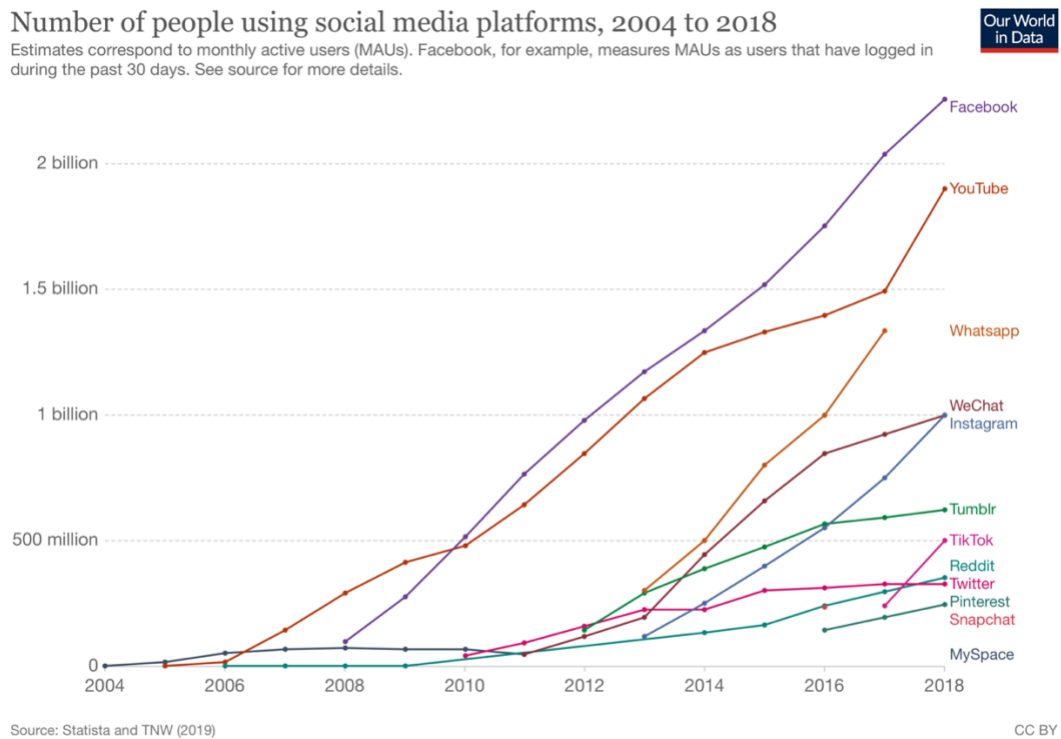


Figure 4: Data charting growth in social media usage over time

*Note.* The graph depicts the global increase in social media use over 14 years, which demonstrates that, as the internet accessibility has grown, so too . Adapted from “The Rise of Social Media” by E. Ortiz-Espinosa. <https://ourworldindata.org/rise-of-social-media>

As we have seen in previous chapters, the everyday rhetoric of psychopathology has factored in throughout history, and has repeatedly created conditions for abuse, in both psychological and physical terms, therein. It would be a mistake to overlook the present day influences that modern rhetoric has on psychopathology, which, although it

looks different than it did in Europe during the Enlightenment, still is very much part of the present rhetorical situation. One of the biggest influences on our language and general cultural understanding of the world rests firmly in popular culture, or pop culture as it is frequently abbreviated to. In this chapter, I will demonstrate how the previously described rhetorical theory applies in the emerging concept of popular culture, and why the cycle of villainization is being perpetuated by the synthetic realities that exist in media. This chapter will specifically focus on aspects of pop culture that occur on a relatively micro scale, which I am defining as platforms that lend themselves to immediate feedback from the audience, and provide faculties for discourse amongst viewership. For the purposes of this chapter, this will be demonstrated in two salient platforms: Tumblr and YouTube.

The reason for the inclusion of Tumblr in this chapter is simply that, as we will see, the language of psychopathology is heavily entrenched on the platform, and is part of generation Z's cultural education in the subject. Moreover, Tumblr is a good example of a platform that allows for discourse in the context of social media, and indeed this was reflected in the site's popularity throughout the 2010's. The website gained significant appeal as a platform with the decline of MySpace, and by 2014 there were over 100 million users (Chang et al., 2014). As Figure 4 demonstrates, as of 2019, there are over half a million users of Tumblr, which demonstrates the broad utilization of the platform globally, but especially in the West. What is especially interesting is the unique discursive atmosphere on the website; not only does it afford users an opportunity to engage in traditional blogging, but users can like and "reblog" the posts of others (that is, put what others have posted onto their own personal page) to express approval or to

engage in the conversation the original poster began (Ross et al., 2011). At the surface, this appears similar to Twitter, but it does not limit the users to a certain number of characters per post, and therefore affords more opportunity for long, freeform discussion between users (Attu & Terras, 2017). One source of backlash for the platform is the manner in which it inspires discourse that is often found to be unacceptable elsewhere; that is, the platform became hyper-focused on social justice in the 2010's and was a means by which users began to explore their identities and the meaning of intersectionality. It was a place for individuals that identified on the LGBTQ+ spectrum to express themselves and be understood, a place for questions of gender identity and even identifying as nonbinary might be considered acceptable, and mental health concerns were expressed without fear of repercussions and hate from less understanding communities. There is a more abundant anonymity on Tumblr, which has lent credence to individuals feeling as though they can be themselves fully without need for self-censorship (Hillman et al., 2014). To this degree, the platform has done a tremendous good in terms of opening its arms to communities that have been disadvantaged and discriminated against, and has provided meaningful conversation in terms of identity formation and exploration for all people, but especially the youth, across the globe.

In the article by Hillman et al. (2014), they identify via a study with three qualitative aspects the way that some of the good in Tumblr manifests. The methodology of the study is based in observing Tumblr users interacting, having some users fill out an open-ended survey for the purpose of contextualizing the observed phenomena, and conducting semi-structured interviews. As a result, they found a few different domains of Tumblr that cater to users better than other platforms; users expressed an absolute love

for the Tumblr community based on a strong connection over shared interests, the heavy utilization of images and gifs relative to other platforms, and a shared language of slang that does not extend to other platforms. As a result of this feeling of community as well as a relative anonymity on the platform, people simply felt an acceptance they did not feel that they could or would receive in their real life. Moreover, there is an assurance that the individuals they are interacting with certainly have a shared interest based on what another user posts and interacts with on the site, which lends further credence to the notion that it is a safe space that fellow users will not judge them for thinking or enjoying. Particularly for youth that do not have a creative outlet to express these interests among their peers outside of the internet, Tumblr was a place of creative expression and sharing new ideas that otherwise are rarely addressed.

Having established the good of Tumblr, we also see a discursive phenomenon where individuals experiencing mental health struggles, which will be limited to diagnoses of depression and anxiety with the inclusion of self-harm behaviors that may manifest from other diagnoses, create a sort of echo chamber wherein their individual experiences worsen (Hillman et al., 2014). The question remains, then, of what exactly could cause this reaction in a community that is so open and welcoming of others. Indeed, the dramaturgical cycle can be found at play here, but what is especially fascinating in this case is that the established artificial reality that is created by the psychopathology discourse on Tumblr is that it works in equally negative ways, but with a different dichotomization of the hero versus villain. In the following discussion of the Tumblr social media platform, I will examine the phenomenon of romanticization of mental illness, and the manner by which it no longer normalizes and celebrates different

levels of neurodivergence, but rather encourages people to engage in behavior that becomes detrimental for their wellbeing.

In order to fully engage in this discussion, I want to preface by saying that celebrating neurodivergence in and of itself is not bad. There is a tremendous amount of good that can come from understanding one another deeply, and in fact, as we will see later in this chapter, engaging in this discourse can be incredibly productive in terms of allowing individuals to empathize with realities that they do not experience. That being said, there are also experiences of psychopathology that relate to hurt and difficulties for the person experiencing associated symptoms. Unfortunately, one aspect of the community that orbited around mental health on Tumblr was a sort of glorification of mental illness where people not only were able to feed into one another's unhealthy and sometimes dangerous coping mechanisms, but so too were others inspired to mimic their experiences (Franzén & Gottzén, 2011). A good example of an emerging subculture that existed on Tumblr as well are pro-anorexia groups, or "pro-ana" as they are colloquially known. In these groups, people will share their body goals, inspiration, and methods of restricting food intake or purging, and they are a common cause of relapse or worsening symptomology for individuals experiencing symptoms of Anorexia (Teufel et al., 2013). I will say more about how these groups play out on Tumblr, but I mention it here briefly to demonstrate the ability that this discursive platform has to influence behavior and thought about psychopathology both generally and in specific cases.

One of the things Tumblr is well known for is its unique ability to cultivate aesthetics to inspire others. This is often done in the form of decoration inspiration, mood boards, and, perhaps most concerningly, for self-harm (Figure 5). In Figure 5, we see a



photo set posted by a popular blog that goes by the name “depression-and-disorders,” which, simply in reference to the blog’s URL, already begins the process of immersing the viewers in a discussion of psychopathology. Upon entering the blog, viewers will find sets of black and white photos that are meant to represent different manifestations of psychopathology. Regarding Figure 5, the first photo depicts a set of razors with the words “Welcome back did you miss” invoking a cyclic pattern of self-harm. The photo itself is black and white and meant to invoke a sense of nostalgia reminiscent of black and white video/photography from previous eras. This is meant to draw the audience into a state of remembrance, and even to feel like meeting an old friend in their own collection of razors that they presumably have or may acquire in the future. Granted, of course, Gen Z and the majority of Tumblr’s userbase would not ever have lived in a time where black and white photos were the norm, but this lends to the almost edgy and unique nature of this photo set. They invite the user to be part of something bigger, a long gone era that most of their peers would not be able to connect to the way they can. The second photo, invoking the same sense of nostalgia and exclusivity in black and white, depicts a behavior typically associated with eating disorders, and is reminiscent of content often found in pro-ana groups. There is a person wrapped in measuring tape in order to monitor their body sizes while also standing on a scale in order to determine their current weight. The third photo is a bit more general in the sense that it refers to a behavior that can be undertaken in the context of many different instances of psychopathology. The photo depicts a pair of cupped hands that are filled with pills of differing varieties, and it may be in reference to the desire to overdose in a suicidal

glorification, or it may simply refer to feeling overmedicated in order to treat the symptomology of some form of psychopathology.



Figure 5: Self-harm photo set from Tumblr

*Note.* Photos romanticizing self-harm posted by a popular blog in the community of mental illness entitled “depression-and-disorders.” Adapted from Tumblr. (<https://haenfler.sites.grinnell.edu/subcultures-and-scenes/mental-illness-on-tumblr/>). In the public domain.

Ultimately, this collection of photos is very artsy, and were created with a very clear, deliberate manner. They are pretty to look at, and it may be easy, at first, to overlook the subject matter of the photos completely. If the audience were scrolling through Tumblr rather quickly, it may not hit them immediately what is in these photos. They look like many other posts with a similar aesthetic nature on Tumblr, and the likelihood that users would find photosets of this style with different subject matters is extremely high. That being said, however, although the photos are visually appealing, it is highly likely that they will draw new users in who want to be included in the edgy style of the website. There is almost an excitement in something like this having the potential to fly under the radar; they invite users into an exclusive club that others may not

understand without having a personal experience or connection to self-harm behaviors. To know that a user could potentially be part of an in-group that feels misunderstood by the entire world outside of their Tumblr community represents a degree of comfort, acceptance, and even a sense that these individuals are special and unique relative to the “normies” of the world.

These photos in and of themselves are not all-encompassing with regard to what the experience of psychopathology is. There are many diagnoses and differing levels of difficulty that are encountered as a result of experiencing symptoms of psychopathology. That being said, however, accounts like this on Tumblr have created a subculture of psychopathology that affords praise for certain behaviors and diagnoses. Specifically, as I’ve mentioned previously, eating disorders, depression, and anxiety are the most commonly depicted and heroized/accepted diagnoses. The heroization is only negative in the previously mentioned context wherein blogs are romanticizing behaviors that induce harm in one way or another. The expression of approval of self-harm behaviors needed to be addressed in the context of this paper, since it does exist on Tumblr, and is an ongoing criticism of the platform. Moreover, the previous manifestations of discursive content dealing with psychopathology continue to perpetuate the notion of PRETENDS wherein these Tumblr users have afforded credibility to the same sorts of myths of dangerous behavior and applied them to a broad understanding of psychopathology. Failing to mention the manner in which the platform’s users fall prey to the same false narratives of psychopathology would indicate a lack of awareness regarding public perception of Tumblr.

There is a strange balance between acceptance and false reality in this case. What these photo sets and the broader subculture of psychopathology that Tumblr's users present is that what is pretty is acceptable. In creating an aesthetic to represent self-injurious behavior, as the previously mentioned specific user, "depression and disorders," has done, they are explicating that these particular diagnoses and behaviors are beautiful and should make the audience feel special. That is, if the audience has experienced the manifestations of psychopathology that the photo sets represent, then they are welcome into the vast community that is also praising said behavior. the individuals that frequent these blogs tend to feel alone in what they are experiencing, so seeking out communities like this helps to feel a part of something greater (Adler & Adler, 2011). What this has translated to, in the context of Tumblr, is that experiencing symptoms of depression, anxiety, and eating disorders is acceptable whereas anything else (i.e. Borderline Personality Disorder, Dissociative Identity Disorder, Schizophrenia, etc.) is subject to scorn and continued villainization. What is important to recognize is that the spectrum of psychopathology and neurodivergence is broad not just in terms of severity, but in terms of symptomology and diagnoses as well. To extend empathy to any is good, but to neglect large groups and diagnoses to the point where we empathize against them is highly detrimental to those individuals.

Having said this, I want to state more firmly that Tumblr's users have not only participated negatively in the conversation of PRETENDS. So too has it become a place where freeform discussions can take place in order that individuals can understand one another and have productive, explorative dialogue (McCracken, 2017). One aspect of Tumblr's mental health community is that it offers tremendous amounts of support from

user to user, and indeed even normalizes reaching out to strangers in order to check on their wellbeing (Adler & Adler, 2011). This support does not need to take the form of encouraging self-injurious behavior, but indeed can simply serve to educate individuals on how best to help one another. I include this note on Tumblr because I will return to this particular point in the conclusion regarding future steps in order to improve the negative rhetorical situation I have described up until this point in the paper. Not only does Tumblr show us where these conversations and portrayals can lead to negative consequence, but it also offers a lesson in what can be done to change the carefully constructed false reality of psychopathology.

Having explicated in this chapter how Tumblr has created a delineation of acceptable and unacceptable neurodivergence, as well as continued the trend of spreading false reality, I will now turn to the impact these perceptions have had on viewership for other platforms. In order to do so, a brief discussion is warranted regarding the power that these forums have beyond Tumblr, and especially when popular figures enter the conversation. The influence that celebrities have, specifically, is enormous; this is precisely why companies utilize them in order to sell products (Olenski, 2016). Not only is this not frowned upon, but it is treated as a badge of honor with celebrities of all different calibers of fame being grouped into one definitional, linguistic category of “influencers.” As of 2019, Merriam Webster has included this word in their dictionary, thereby lending credence to this identity for influencers themselves, but also establishing the power these individuals held which was previously implicit. While I could spend the remainder of this thesis addressing the various pitfalls and dangers that could be associated with acknowledging and abusing such power, instead I simply want to address

that pop culture and the individuals associated with it are publicly acknowledged and accepted to have an ability to, as Merriam-Webster (2019) says, “inspire or guide the actions of others.” The established hierarchy of power, in this case, is all the individuals who make up pop culture: directors, writers, actors, YouTube personalities, producers, etc. Anybody who has the ability and platform to relay a message that the public will now be more likely to accept finds themselves with an enormous degree of power and ability to guide others to believe and act a certain way. The dramaturgical cycle has all the components that it needs to begin and efficiently function within this framework, and the remainder of this chapter will seek to demonstrate the consequences of the language, invective and otherwise, that is utilized specifically as it relates to the portrayal of psychopathology in pop culture.

Broadening the conversation a bit from the people that make up the contents of popular culture, a consideration must be made for the power of the media and stories themselves to influence the public. This is especially the case given that, up until this point, the conversation of this thesis has focused on the horror trope and one of the platforms that has brought mental health to the forefront of attention in the general public. Now, thinking about the consequences that the cyclically negative portrayals of psychopathology has had, I will examine popular culture’s power more explicitly. In an analysis on how popular culture can be utilized in discussions of global politics, researchers have found that “the effects of consuming fiction (at least to some degree) influence everyone who is exposed to fictional works” (Daniel & Musgrave, 2017). Because of the technological growth and interconnectedness of the modern world, there is a subsequent dominance that pop culture has in terms of its influential abilities since it

has the power to affect everybody that accesses it directly or even indirectly through friends and other forms of media (Danesi, 2020). As a result, pop culture's rhetorical power has become almost insurmountable to the point where the language that it uses becomes championed and quoted so frequently that people may not even realize where common phrases originate from. A good, relatively innocuous example is the popular quote from the original Star Wars trilogy, "these are not the droids you are looking for" which has been parodied and spread so far that I grew up saying it without ever seeing the Star Wars movies. Certainly, as researchers point out, pop culture is a phenomena created by and for the people (Danesi, 2020), which means its design is meant to create this degree of blind followership that grows of its own accord through fan bases. This fact helps to increase the sway and accessibility to the media we are consuming, especially because present day pop culture content is being produced by our fellow contemporaries and peers in any age group, which is true especially with new platforms like TikTok and YouTube where anybody can achieve stardom.

One specific example that meshes social media, a specifically discursive platform, and with celebrity influence is a podcast that premieres weekly on YouTube called "Frenemies." This podcast is created by H3H3 Productions, and its hosts, Ethan Klein and Trisha Paytas, pride themselves on being controversial personalities with a history of disagreement between them. Because the show is relatively uncensored in terms of the topics they want to address (anything from politics to influencer drama to complicated issues like the repercussions of children garnering huge internet audiences), it has gathered a wide and varied audience that cannot seem to stop watching their content. What is especially fascinating about this podcast is that Paytas is diagnosed with

Borderline Personality Disorder (BPD), which has created complications on the show regarding how her co-host and the audience perceive her. BPD is identified in the DSMV, and it is a form of psychopathology that manifests in mood swings, difficulty establishing identity, and extreme perceptions of the world (National Institute of Mental Health, 2017). The YouTube podcast, in its quest to be as real and unfiltered as possible, shows the moments where Paytas experiences some extremes emotions, which, as per her history on the internet, tend to be rather explosive and difficult to watch.

In order to provide a bit of context for Paytas, she has been on YouTube for over a decade, and has been criticized for her openness in discussing trauma she has experienced in all facets of her life since childhood. Mostly, the backlash she receives comes from a history of racism in her videos in the late 2000's, saying controversial statements for the purpose of being controversial, and making up absurd lies in her desire to self-sabotage and ruin her own credibility. To this degree, she has done a good job because now, in expressing a desire to change and be taken seriously on the platform, she has had a difficult time convincing audiences of her genuineness. She and present co-host Klein have also had a history of drama, which originated in Klein making a video comparing candid photos of Paytas to ones she posts on Instagram in order to demonstrate the unrealistic ideals that are often perpetuated by the internet and can be harmful to young women in particular. Unfortunately, because Klein was rather aggressive in communicating this message going so far as to refer to Paytas as a beached whale, their relationship did not begin on the best footing. Over time, this relationship improved to the point where they wanted to make a podcast together to showcase what is now, incredibly, a real friendship.



Returning to some of the more explosive moments from the podcast, there are two episodes that depict some of the harsh realities associated with BPD: episode 5 entitled “Trisha & Ethan Have a Huge Fight & She Storms Out” and episode 13 entitled “Trisha Quits the Podcast & Storms Out” (H3 Podcast, 2020). What is fascinating to notice about these two episodes is the way the titles are remarkably similar, but place a lot of the blame on Paytas in referring to her behavior of leaving as “storming out.” I will not spend time discussing the details of episode 13, since this was not based in dialogue surrounding psychopathology, but I mention it simply to demonstrate that the escalation of the two big fights on “Frenemies” were due in large part to Paytas struggling with symptoms of psychopathology and therefore demonstrative of the fact that her symptomology is public and visible throughout the show. A general note to mention is that, in both cases, Paytas’ BPD symptoms are not romanticized, but rather fall into the spectrum of villainization of psychopathology which is reflected both by the titles of the episodes deflecting blame onto Paytas by name and the audience of the show.

Prior to proceeding to the details of these fights, I would like to emphasize that Paytas, admittedly, does say things that I am not going to support or dismiss the emotional toll they take on others. All I am suggesting is that what is fair is to give her a degree of grace, and afford her the opportunity to take accountability, apologize, and learn from her behavior, which are all things she has done with sincerity. The progression that we see, especially from Klein, in acting out these steps is truly inspiring and speaks to how we can understand mental health better beyond the more common, yet still valid, expressions of depression and anxiety. That being said, the conversation can now turn to

a more serious examination regarding what exactly occurred in the first of these instances, and what the response was both by the audience and the cohosts themselves.

The first of the two, in episode 5, was slightly less severe in the sense that Paytas left without having any sort of exclamation of anger. The beginning of this argument was a conversation regarding how “crazy” each of the hosts is, and the beginning comment to upset Paytas is that Klein says “you’re way crazier than me” [sic], which Paytas responds to by saying she is simply more open about her mental health whereas Klein, who she asserts has a similar state of mental health, hides things (H3 Podcast, 2020). When Klein responds saying this is untrue, Paytas reveals a story that Klein told her privately about Klein taking pills years prior when he lived in Israel. Klein is visibly taken aback by this, which quickly turns to anger, and he further escalates the situation by saying Paytas is “weaponizing” private information told in confidence, and that her tendency to do so is why she can’t maintain long term relationships, romantic or otherwise (H3 Podcast, 2020). Ultimately, while it is understandable that Klein would feel hurt by this perceived betrayal of confidence, he had just proclaimed that all of his situation was on the table and in the public awareness. The final result of this episode is that Klein does indeed try to calm the situation and continue the show, but Paytas decides to leave, which she later explained was to avoid escalating the situation further since her tendency is to say hurtful things when her anger spikes. Although this episode ended on a relatively sour note, the two are able to reconcile in the next episode where, in an attempt to better educate himself on BPD, Klein invites a therapist to film an episode with them as a teaching/learning moment for audience and hosts alike.

There is some praise to be leveled for this decision and the intent behind it, but before we can discuss salve for the wounds, let us examine how the rhetoric of this episode manifests in discussions of psychopathology, and specifically the reactions of the audience to the steps of the dramaturgical cycle that play out here in the context of PRETENDS. Already, there is a preconceived establishment of guilt for identifying with Paytas because of her tendencies to lash out and be inconsiderate of others in a very public forum, which is the root condition for the dramaturgical cycle. That is, as a subject of rhetoric, Paytas and her diagnosis of BPD already create a narrative of guilt for other individuals experiencing symptoms of BPD, and this has been generalized to include large communities of mental illness. In fact, a quick Google search of “Trisha Paytas Mental Illness” returns many articles pinpointing the sensationalist nature of her existence with titles like “Is Trisha Paytas Exploiting Mental Illness for Viewership?” and “What Trisha Paytas Got Wrong About Dissociative Identity Disorder in a Video Where She Claimed to Have Multiple Personalities” (Illahi, 2020; Dodgson, 2020). Indeed, she is met with disbelief, incredulity, and outrage in all cases where she mentioned or explored mental illness, and therefore she is considered to be unreliable and anybody who identifies with any aspect of her existence is wrong for doing so. Certainly, she has a history of not well-researching the subjects of her video, but at the core of these explorations we find a person who is struggling to find answers regarding why they are prone to behave in certain ways and how to get better. Thus, she has become associated with psychopathology, and has experienced such intense and repeated backlash that identifying or empathizing with her seems totally out of the question and even irresponsible.

As a result of this guilt, the first stage of the dramaturgical cycle, order, is disrupted; if someone felt relatively at peace with who they were prior to watching the Frenemies content, it may be disrupted by the candid portrayals of each of the hosts and finding aspects of common identity in either or both of them. This creates the effects of the pollution stage, as now one cannot continue as though nothing has changed when there is now a fundamental difference in acceptance of the self; something to the degree of “I can’t be like *her*, she’s crazy.” Thus, the individual needs to assuage this guilt of identification because now there is a sense of victimage. There is an understanding that there exists an association, and it needs to be disidentified with. The next stage, villainization, is where we find the YouTube comments section on most of these videos. That is, this is the first part of the cycle where there is an outward vocalization of disapproval. Thus, we see comments like “she’s too sensitive” or “I can’t believe how horribly Trish treats Ethan in these episodes” or “I can’t believe she’s allowed to be on the internet.” Clear examples where Paytas becomes the bad guy, and there is a clear siding of the collective audience with Klein although the conversation occurred between two people who were both hurtful to the other. This is one criticism of YouTube specifically, which is that audiences are very much subject to a bandwagon effect wherein previous comments will influence and sway the opinions of other commentors, and because it lacks the relative acceptability of Tumblr for opposing voices, often the conversations are malicious, unproductive, and often extremely closeminded. Certainly, we see this manifest in the case of episode 5 wherein the audience, in expressing this outward, unified, and negative opinion, effectively tells the world that they are not like this person in any way, and in fact stand in strong opposition to how she exists. Hence,

we see the process of heroization working in tandem; by assigning Klein the role of “the right,” there is a clear dichotomy and an expectation that people side with one or the other. He is the good guy who comes out on top because of the caliber of his character, and Paytas is simply a coldhearted villain with no regard for the effects of her actions. In the end, we find a transcendence where the newly constructed reality is that Paytas and her expressions of BPD are entirely unacceptable, and anybody that expresses a rhetorical opposition to her is worthy of praise.

This rhetorical situation and artificial reality of psychopathology in the PRETENDS framework is able to be engaged with because the YouTube platform permits and encourages immediate feedback. Not only does this allow people to express the villanization/heroization associated with the dramaturgical cycle, but it also helps others identify what the general consensus believes to be true in order that they may also adopt that frame of thinking. In this way, one comment becomes thousands, and almost all are directing vitriol and vehement opposition towards Paytas in the context of episode 5, which I described previously. Not to mention the fact that because this podcast combines two different audience groups, given that Paytas and Klein are both long-term internet personalities with separate fan bases, and receives millions of views on each episode, which means that the number of people and the spread of the outrage is incredibly far-reaching with serious and lasting consequences. In fact, cohost Klein himself precipitated this conversation via his utilization of invective language as it relates to psychopathology. Klein called Paytas crazy at the beginning of this conversation, and although this would not excuse Paytas for hurting him in return, certainly it is demonstrative of the fact that the artificial reality that he is the hero and she is the villain

simply does not take into account that there was hurt leveled on both sides of the conversation. To dichotomize these two people so quickly is to drastically simplify and misconstrue what occurred. Thus, because Paytas suffers from BPD, which manifests in more outward, jarring behaviors, she is cast into a negative light without any degree of grace or attempt to understand what she experiences.

An important note to make is the difference in response from Klein and the audience, since his follow up behavior actually goes a long way towards altering the reality that he had a hand in creating. In the next episode, he brings a therapist onto the show in order to mediate a discussion between himself and Paytas in order to establish peace and to gain a better understanding of BPD. Not only does this conversation go extremely well and result in Klein expressing, genuinely, that he did not understand before what Paytas was experiencing, and he took full accountability for the part that he played in the deterioration of the previous situation. Klein also, in having the therapist on, not only was able to receive a better education on the functioning of BPD and its symptoms, but also it allowed for more self-disclosure about how each person feels and what boundaries to establish as talking points between one another. The show is built to function on a bit of animosity and arguing, as the title “Frenemies” would indicate, but there is a genuine respect in this conversation, and it turned the sea of angry commenters into praise for how the show depicts ways for people at differing levels of neurodivergent to interact healthfully and maintain genuine friendship. In fact, following this episode, the audience expressed a sort of admiration for Paytas, and it changed the villainization from previous episodes to floods of reaction videos from other people diagnosed with BPD to express gratitude for this episode. Finally, a group of people who has long felt

discriminated against, had someone that was relatively well-liked and the new recipient of empathy from the audience, and there was no longer an abounding guilt in identifying with Paytas, nor was she being type-casted as the villain of the show.

This example fits perfectly into the narrative of the damaging and immediate effects that PRETENDS creates in the audience, while also demonstrating how this artificial reality can be subverted with care and effort to do better. As a result, Klein has proven a change in his ability to not only respect Paytas' boundaries, but also not to provoke and worsen situations for the entertainment value that he perceives to be occurring. Paytas has also not crossed any lines that Klein specifically said were issues, and indeed she is showing an unwavering support and loyalty for the friendship she has found with Klein. Regarding the other episode where Paytas decided to leave, although the situation got bad enough to the point where Paytas said some horrible things, and again the audience turned to villanization and outrage, Klein accepted responsibility for the part he played in failing to introduce better boundaries and to have more open, trusting communication with Paytas in order to understand. Paytas apologized for the things she said, and Klein expressed that he had not been hurt or offended by the insults she leveled at him. In this case, the conversation was also not focused on the mental health of either of the hosts, but rather was instantiated by a miscommunication between the two in their private lives, and therefore I will not analyze the conversation to the degree that I did the first instance. That being said, however, it demonstrates well the lessons that were learned in the first case, and shows how growth of understanding happens and turns to fruitful friendship across the neurodivergent spectrum.

In this example, we find a reversal and implementation of what the Tumblr platform was unable to do in order to counteract false realities perpetuated by users due to the relative nature of echo chambers on Tumblr and ability to filter out content one does not agree with. “Frenemies” utilizes the power that each of these influencers have in constructing, deconstructing, and reconstructing a narrative of psychopathology. The difference with the YouTube platform is that, although users can choose content they are interested in, when they follow a podcast of this nature because of the personal affinity for the creators (something that does not exist to this degree in the mostly-anonymous Tumblr), they are subject to the narrative that the creator wishes to put out there. In this case, as fans of the show, they were invited into the reconstruction of Paytas’ initial narrative of villainization. It is clear that it works effectively since, whereas previously Paytas received tremendous hate and discouragement, she now has a supportive audience that, while holding her accountable, also extends her love, grace, and understanding.

The reality of psychopathology that Paytas experiences is not beautiful in the way that Tumblr has tried to portray, and indeed we find that she falls outside of the realm of acceptability that these users have established without grounds. That being said, however, she is no less part of the narrative of psychopathology, and although her reality cannot be put into an aesthetic picture set, she deserves the same degree of acceptance that others have received. Klein took note of this fact, and indeed in the time since these episodes have aired, has changed his behavior in order to better respect Paytas’ experiences and feelings. The conversation that was mitigated by a therapist did not fall on deaf ears, and now they are equal participants working to understand one another and produce content that people like and that they are personally proud of. Of all places, the “Frenemies”



podcast and its popularity show us what we can do better for individuals experiencing psychopathology, and how extending empathy and increasing knowledge leads to a reversal of the previously set false realities and narratives of fear and dangerousness. It is her humanization and Klein's willingness to learn through this podcast that helps to prevent the cycle of heroization/villainization from continuing to be perpetuated in this case.

In the following and final section of my thesis, I will explore manners by which we can apply this lesson broadly in order to change the everyday utilization of rhetoric around psychopathology such that the PRETENDS framework no longer remains an ongoing reality. In order to prevent the historical and profound abuses as described by chapter one, and to counteract the psychological association of psychopathology with fear and dangerousness per the discussion in chapter three, there are some concrete changes to be made. Nothing that has been said thus far is an inevitable occurrence with psychopathology, as is made undeniably evident in the example of "Frenemies" and this speaks to a future exigency to reframe the discussion and understanding of psychopathology on the whole.

## CHAPTER SIX

### Counteracting PRETENDS

Examining the directions this thesis has taken, it is clear that the story, on the whole, is one of immense tragedy and negativity. In chapter one, I detailed all the manners by which European and American systems of confinement were influenced by the respective regions' language use patterns and subsequent perceptions of psychopathology. Through this conversation, it became clear that language, particularly of the invective nature, has a profound and lasting historical impact on individuals experiencing symptoms of psychopathology, which is examined more thoroughly through chapter two's discussion of rhetorical theory. The lasting perceptions that have continued since the relative end of confinement as it was known in the asylums still remain to this day, and, as we have pointed out, this is partly the consequence of the conjoining of psychopathology with the now common horror trope. Not to mention that the horror trope's inspiration for the induced fear around psychopathology in part comes from the neglect and abuse experienced as a result of confinement, but also from the original reasons of confining these individuals in the first place. Finally, even in the modern era outside of the horror genre, we have seen that the narrative of psychopathology, especially when it presents in influencers, is often met with disgust and a lack of acceptance. In thinking about Paytas specifically, she has been on YouTube for over a decade and has experienced hate and calls to leave the internet for the entirety of that time with little regard for empathy.

Throughout this thesis, there has been a repeated pattern of othering as it applies to psychopathology. This othering applies cyclically throughout history and into the present, and is primarily rooted in the discursive ability that negative rhetoric has to change the reality of psychopathology for individuals at all points in the spectrum of neurodivergence. Not only can this othering occur in the negative, but also in the romanticization of certain instances of psychopathology, and particularly of varying behaviors that promote different typologies of self-harm. Language may then be warped to be inclusive and understanding of certain manifestations of psychopathology, but falling outside the realm of acceptability will remove a person's right for empathy and grace from those around them. That being said, however, in the previous chapter, there is a solid example of the manner by which we are able to counteract these impressions in order to shed light on the existing humanity and route to empathy that can be employed across differing levels of neurodivergence. That is, as Klein shows us quite clearly, educating oneself about the reality of psychopathology, even without personally experiencing the particular instance that is the subject of one's research, is a significant step in reducing personal and external prejudice. Moreover, because he and the audience now knows someone relatively personally who has experienced this particular instance of psychopathology, it becomes a less fearful and less abstract phenomenon. No longer is it a faceless, lurking villainy, but rather we see a person who is attempting to make herself understood and to find genuine connection and friendship with her co-host to which the audience responds accordingly.

It is clear, having looked at multiple platforms by which the message of psychopathology is spread, that it is not the platforms themselves that are the problem.

Thinking of popular culture as it exists in film, television shows, video games, YouTube, and Tumblr, it is clear that each of these has the capacity for perpetuating both good and bad narratives. Indeed, they all share a similar power in doing so, but emphasizing the positive aspects of each of these platforms can demonstrate a manner by which the narrative of psychopathology can effectively be changed. For example, producing more movies that disassociate psychopathology with fear helps to emphasize the diversity of experience that can be had with regard to psychopathology, and as we've seen, the large audience and impact of film has a tremendous influence particularly when celebrities and film stars support the new narrative. YouTube and Tumblr both have the ability to regress conversations, categorize people into groups without consideration of the opposing viewpoint, and even communicate new degrees of acceptability for destructive or harmful thoughts/behavior, but so too can both increase acceptability for discriminated groups and humanize villainized people. Unsurprisingly, it is the users themselves in all of these platforms that fundamentally change the message that each of these platforms have. Although we have a history of poor treatment and misunderstanding psychopathology, it is clear that this is not unchangeable. It will take effort on the part of individuals on social media and certainly Hollywood as a whole, but even small steps are significant given the ongoing and thorough history of abuse that psychopathology has suffered.

The question remains then of how to apply this lesson on the macro scale. Certainly, it is not insignificant that the solution I have posited previously has played out on the broadly viewed podcast "Frenemies," but it is not feasible to say that when experiencing instances of prejudice in one's life that they should invite a therapist to educate and mediate an ongoing conversation about the differences in neurodivergence

that are causing the problem. That being said, however, one important undertaking that may be done in order to improve neurodivergent relations is to provide comprehensive mental health education. This could be done in middle school, high school, or college, but given the increase in reported instances of psychopathology, it would be tremendously beneficial for humanity to understand their own experiences better, as well as those of their friends. In order to counteract the historical patterns of abuse and misunderstanding that have been perpetuated against psychopathology and to prevent the reoccurrence of equally damaging treatment, something must be done. Mental health education is one of the routes by which this could be accomplished, and although there are others, this specific one allows for a broad accessibility and large audience.

There is a high exigency to implement widespread education of this nature, particularly given that estimates of development of psychopathology state that approximately 50% of mental illnesses begin by the age of 14, and 75% begin by age 24 (American Psychiatric Association, 2018). Given that the majority of diagnosable instances of psychopathology have begun by the time a person turns 24, it is highly likely that a person will have experienced this personally or directly by the time they have graduated from college. Knowing this, it is absolutely imperative that educative steps are taken in order to circumvent some of the more serious occurrences and effects of prejudice that are especially likely to occur in high school (Benner et al., 2014). As a result of the ongoing false reality perpetuated by PRETENDS, this environment provides fodder for the cyclical nature of discrimination, particularly given that attending school of some sort is a universal requirement in the West and therefore places individuals experiencing symptoms of psychopathology in a position to receive some sort of abuse.

Perhaps the public school systems represents a new degree of confinement through which people are not being physically or mentally tortured, but rather confined within a narrative framework of dangerousness, fear, and/or inadequacy as a result of experiencing psychopathology. This is not a hopeless occasion, however, and there are manners by which prejudice can be reduced.

One aspect of social psychological research is related to prejudice more broadly, and indeed social psychologists have found that one of the best tools by which prejudice can be counteracted is through education (Sidanius et al., 2006). Certainly, this provides more evidence for the need to better understand mental health through one's educative experiences, and may prove to be useful in reducing lifelong prejudicial attitudes that are likely acquired in this locale. The lifelong acquisition of prejudicial attitudes in school is precisely the phenomenon we saw in chapter two with Goddard's attitude inoculation amongst children both with and without psychopathology in his schools (Gould, 1981).

As of the time of writing, there are two states, New York and Virginia, that have implemented a specific requirement for mental health education in public schools (Vestal, 2018). Little has been published regarding the efficacy of this decision, but in New York specifically, psychologists have determined that, while the legislation was a good step, there is still no uniform educatory standards regarding teaching mental health in any grade level, which has created inequity within the school district regarding quality of mental health education (Mackie, 2019). That being said, however, they point to the Niagara Falls School District as a prime example of what may be done across the state with regard to appropriate mental health education in order to facilitate wellbeing at a younger age (Mackie, 2019). Indeed, one of the first resources that appears on the

district's website is a notice that they provide mental health first aid, basic emotional skills training, trauma informed care, and even resources for students who have been mentally impacted by COVID-19 (Niagara Falls School District, 2021). Granted, while there is not supportive data to demonstrate the efficacy of this programs given that they were implemented on a five year grant basis and therefore have yet to be assessed, psychologists and related professionals have extended their support for the programs designed by the Niagara Falls School District (McMahon, 2019).

Again, while this is a tremendous first step for improving interpersonal relations with individuals experiencing symptoms of psychopathology, there is more that can and should be done regarding educating on mental health. For one, there is no designed and uniform curriculum that has been implemented statewide, which therefore implicates differing degrees of efficacy in classroom instruction. Another issue may be that poor quality educative attempts may result in further prejudice based in misunderstanding perpetuated by the teacher or other students mocking the lesson. While it is true that there are risks related to educating students on mental health, what is important to recognize is that, on a macro-scale, the risks are relatively low especially in contrast with the potential for good that can be acquired and the fact that prejudice will certainly continue without any attempt at improvement. Indeed, as it stands, students are already receiving an influx of negative imagery and false interpretations of psychopathology in horror content and popular culture to which they are largely exposed. Thus, even if there may be potential risks in educating on mental health, there is already an existent harm based in fear of neurodivergence which requires undoing.

While rhetorical theory explicates how these prejudices develop, so too does it give us a conversational tool by which the dramaturgical cycle can effectively be interrupted so we can attempt to stop future, unexpected manifestations of prejudice such as it has with pop culture. With understanding and positively portrayed instances of psychopathology, there is no longer the same subject for villainization as has existed in the past. It is important to remember that often the origin of prolonged and horrific abuse does not come from a direct intention, but often begins with invective language use. For example, as we saw in previous chapters, institutionalization did not begin with the intention to confine individuals with psychopathology, but rather with an expressed disgust and disapproval over individuals experiencing certain symptomology which they then classified with rhetorical markers like “idiot.” Thusly, understanding that it is invective language and othering that creates a system of abuse, we can move forward with better attempts at understanding and not perverting linguistic markers such that we collectively utilize them to discriminate against others. Of course, there will always be people that subvert what are intrinsically good labels to be negative and insulting, but decreasing the frequency of such comments and the responsive bandwagon, hivemind effect can substantially lower the risk of continuing the cycle of abuse with regard to psychopathology.

Ultimately, it is highly likely that every person will experience psychopathology either personally or through someone they know. Given the high frequency of psychopathology or development of related symptoms, and especially noticing the uptick in prevalence amongst Gen Z, we should acknowledge the great potential for repeated history in the present moment. While there now exists legislation about torture in



wellness facilities, it is still possible to see higher instances of hate crimes, incarceration, and generalized discrimination amongst individuals experiencing psychopathology.

Arguments can be made that this is already happening in the present moment, but even if it is not currently taking place, there is potential for the conversation of psychopathology to turn sinister on a broad scale. Herein lies the exigency of this thesis: we are not so far removed from the era of institutionalization that we are incapable of committing similar acts of abuse against individuals experiencing symptoms of psychopathology. If we are able to break the artificial reality of fear and othering as psychopathology has come to be defined by, then so too can society finally move beyond the previously insurmountable perspective of psychopathology's inferiority and disgrace.

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