

Chapter 5

Mood Disorders

The first time I ever saw a box jellyfish, I was twelve. Our father took us to the Monterey Bay Aquarium. I never forgot what he said... That it was the most deadly creature on earth. To me it was just the most beautiful thing I'd ever seen.
Ben Thomas in *Seven Pounds* (2008)

Questions to Consider While Watching *Seven Pounds*

- Does *Seven Pounds* glamorize suicide?
- Does Ben Thomas meet the criteria for a diagnosis of mood disorder?
- Is there evidence for a "contagion effect" when films (and other media) portray suicide in a positive way? Does this film do that?
- What other films suggest suicide is a rational way to solve life's difficult problems?
- Would the symptoms of PTSD be more likely than depression in someone who survived a terrible car crash?
- Ben Thomas chooses a very unusual way of committing suicide. What ways are the most common? The most lethal?
- Is it ethical for Ben's friend Dan Morris to collude in Ben's suicide? What would you do in a similar situation?
- Would a character like Ben be likely to admit to a mental health professional that he was planning to kill himself?
- Ben gives away his beach home to a woman who has been repeatedly abused by her boyfriend, and giving away prized possessions is a classic warning sign for suicide. What are some other warning signs?
- Does the movie *Seven Pounds* accurately portray the way in which organ donation works?
- What is the significance of Ezra Turner's name? What about Ben's repair of the printing press?
- Is there a relationship between cell phone use (texting, e-mailing, or calling) and automobile accidents?
- What is the significance of the number seven in the title and throughout the film?
- Is it possible to use psychological tests and methods to identify suicidal risk in an individual who is determined to keep you from knowing his or her suicidal plans?
- Why have critics and the general public responded so strongly to this film? Why does it elicit such visceral reactions in the viewer?

Patient Evaluation

Patient's stated reason for coming: "I'm only here because of my brother... however, I did do something really bad once and I'm never gonna be the same."

History of the present illness: Mr. Ben Thomas came in at this brother's insistence. Although Mr. Thomas denies being depressed, he has lost approximately ten pounds and acknowledges difficulty sleeping. He has diminished libido and is not currently sexually active. He acknowledges some difficulty with concentration and moderate irritability. He described a recent incident in which he ridiculed and derided a blind telemarketer without reason. Mr. Thomas denies suicidal ideation.

Past psychiatric illness, treatment, and outcome: There is no significant psychiatric history. Mr. Thomas has a brother with whom he communicates on a regular basis, and he has a wide range of friends, some of whom he has known since high school. Both of his parents are deceased. This patient was involved in a serious automobile accident approximately one year ago in which his fiancé and six other people were killed; despite the magnitude of this traumatic event, Mr. Thomas neither sought out nor received mental health services.

Medical history: Unremarkable.

Psychosocial history: Mr. Thomas is a well educated (MIT), successful, and affluent engineer. He reports a normal childhood. He has made a great deal of money from successful inventions, and he is no longer required to work. He now devotes most of his time to philanthropy. He acknowledges being involved in a romantic relationship with a woman he recently met; however, he maintains that the relationship is currently platonic and "likely to remain that way."

Drug and alcohol history: Mr. Thomas denies any past or recent history of alcohol or drug use.

Behavioral observations: This patient arrived on time for the evaluation. He was well dressed, poised, and articulate. He maintains that he only scheduled the appointment to placate his brother and sister-in-law, both of whom are convinced he is depressed and still grieving over the loss of his fiancé in the automobile accident mentioned above.

Mental status examination: Mr. Thomas was oriented to person, place, time, and situation. The Mini Mental State Examination was administered and he scored 30 out of 30. This patient is exceptionally intelligent, and appeared to be amused by the simple questions he was asked as part of the mental status examination.

Functional assessment: Mr. Thomas shows some signs of moderate depression; however, he currently does not meet the DSM-IV-TR criteria for depression or posttraumatic stress disorder.

Strengths: This is a gifted patient with multiple strengths. He is handsome, educated, articulate, and socially skilled. He possesses a wry sense of humor and appeared to be at ease throughout the evaluation.

Diagnosis: None.

Treatment plan: Mr. Thomas apparently is only interested in placating the concern of his relatives. He is not interested in receiving additional services at this time. He was offered supportive psychotherapy but declined.

Prognosis: Fair.

Seven Pounds

Will Smith initially worked with Italian director Gabriele Muccino to produce the movie *The Pursuit of Happyness* (2006), a moving portrayal of a man and his son who triumph over economic difficulties and homelessness. The actor and the director teamed up again to produce *Seven Pounds* (2008), a provocative and controversial movie in which the protagonist, Ben Thomas, attempts to atone for a single tragic mistake in an otherwise charmed life by committing suicide and giving away his home, his wealth, and various body parts (including his eyes and his heart) to seven decent and deserving individuals. In some obscure way, this allows Thomas to "undo" his responsibility for the death of his fiancé and the six other individuals killed in an accident that he clearly caused after attempting to read a Blackberry message while driving a vintage Corvette far too fast. Thomas becomes romantically (but not sexually) involved with Emily Posa (Rosario Dawson), a woman who will die unless a suitable donor can be found and she receives a heart transplant. Thomas works with a childhood friend to ensure that his heart goes to Emily, his eyes go to Ezra Turner (a blind, vegan telemarketer played by Woody Harrelson), and other needy individuals receive other body parts. The movie is overtly sentimental and there is not clear evidence of psychopathology in Will Smith's

character; however, we do believe the film raises interesting questions about the movie industry's tendency to glamorize suicide, and it suggests that suicide can sometimes be an altruistic act. The patient evaluation (above) is designed to make the point that mental health professionals are hard pressed to identify suicidal thinking in any patient who denies it, and we hope the film will provide a springboard for lively class discussions about depression, suicide, and the societal responsibilities of directors and producers.

Mood Disorders

Periods of depression are normal in most persons' lives. For example, failing an examination or the ending of a relationship often precipitates a predictable period of sadness. In addition, the feelings of high energy that accompany major events such as a graduation or marriage are also common in everyday life. However, some illnesses involve affective states that resemble these normal periods of depression or elation, but in fact they are very different. The individual experiencing a mood disorder is consumed by negative emotions and is unable to alleviate them through normal coping mechanisms. These illnesses are character-

ized by emotions that are so intense they begin to dominate a person's life. Mood disorders include many different cognitive, emotional, and behavioral manifestations, but the overriding symptoms of all mood disorders are *emotional* in nature. The *DSM-IV-TR* categorizes types of mood disorders as **depressive** and **bipolar**.

Depressive Disorders

Depressive disorders, one of the most common types of mental disorders, occur in an estimated 16 million people in the United States. Most surveys show that depression is twice as common in women. There is a relationship between depressive disorders and social class, and depressive symptoms are more prevalent in individuals with fewer economic advantages.

A **major depressive episode** is associated with depressed mood and a loss of interest or pleasure in daily activities. Sleep, eating habits, appetite, concentration, motivation, self-esteem, and energy level are areas most often affected. An episode can range from mild (few symptoms) to severe, and in some instances major depressive episodes can be accompanied by delusions and hallucinations. Some people experience a **masked depression** in which they unconsciously mask their depression and experience physical aches and pains rather than traditional depressive symptoms. These physical manifestations of depression are often misdiagnosed as physical illnesses. Others experience an **agitated depression** where frustration and anger seem to dominate and cover up depressive symptoms. If chronically depressed moods, low self-esteem, and feelings of pessimism, despair, or hopelessness are present for two years without suicidal thoughts or limitations in functioning, the diagnosis of **dysthymic disorder** is made (APA, 2000).

Two quality portrayals of depression can be found in *Mind the Gap* (2004) and *Shopgirl* (2005). The first film interweaves several vignettes of characters honestly and earnestly struggling to change their lives. In one vignette, an African American man is clearly depressed with considerable evidence of suppressed anger. He sits around watching television all day in his lonely apartment. He is riddled with guilt for having cheated on his wife and abandoned his son. He purchases a shotgun at the store and writes a suicide note telling his son that the son is not to blame. However, before pulling the trigger, he consults a priest who gives him some wise advice on the distinction between

saying "I'm sorry" and asking someone for their forgiveness; the man then travels to speak face-to-face with both his ex-wife and his son to ask for their forgiveness in two powerful scenes. *Shopgirl*, based on screenwriter/actor Steve Martin's novel, is another film that offers a realistic, non-stereotyped portrayal of depression. In this film, a young, isolated, depressed woman, Mirabelle, falls in love with an older man; the film uses muted colors and positions Mirabelle's work station in a way that highlights her isolation from the other workers.

In *American Splendor* (2003), comic strip writer, Harvey Pekar displays the symptoms and behaviors associated with dysthymia. His depression is expressed through agitation and negativity, and he kicks and breaks objects and sees life through a very pessimistic filter, frequently describing himself as "a nobody." He has a chronically furrowed brow that emphasizes his agitated affect and frustrated view of the world.

Harvey has few social skills; he is socially distant, unfriendly, awkward, inappropriate, and has poor eye contact. Despite success with his comic books, he remains cynical and pessimistic; this theme is emphasized when he repeatedly appears on the David Letterman show and comes across as a defensive misanthrope, Harvey denies having any sense of spirituality. He is lonely and makes a quick decision to marry after one meeting with a woman who travels from out of state to visit him; to the viewer, it seems obvious that these are two lonely people covering up their pain. Nevertheless, Harvey seems to have found a good match in his wife (Hope Davis) who also has a dysthymic quality; she is easily agitated, highly somatic, pessimistic, and suffers from hypersomnia.

Various coping strategies are exhibited in the film. When diagnosed with cancer, Harvey explores creative expression of the disease through comics. On a less healthy note, Harvey has some characteristics of hoarding: His home is dirty and cluttered; there are stacks of comic books everywhere; and he regularly goes to thrift stores and garage sales to acquire more "stuff."

In the emotionally intense *Monster's Ball* (2001), Hank (Billy Bob Thornton) and Leticia (Academy Award winner Halle Berry) are two lost, self-hating people who become even more lonely and raw after each loses an only child – Hank's son commits suicide in front of him, and Leticia's son is hit by a car. Both parents had been physically and verbally abusive to their sons as they attempted to work through their inner turmoil and struggles. The film emphasizes how both characters are trying to escape from their internal hell;

in some ways, the prison in which Hank works is a metaphor for their inner pain, loneliness, isolation, and futility. Hank quits his job at the prison, where he works with death row inmates, realizing the emotional toll his job has taken on his personal life. The relationship of the racist Hank and the beautiful Black woman Leticia begins following an act of kindness by Hank when he aids a screaming Leticia he finds on the side of the road; he explains that he just felt like "doing the right thing" and that he is trying to get outside of his "insides." After becoming drunk, they engage in raw, uninhibited sex "just to feel." Both are emotionally numb and overwhelmed by their personal pain; scenes of the two lovers interacting are juxtaposed with flashes of human hands reaching into a "cage" to release a bird desperately flapping its wings. Through their connection, which becomes more intimate and genuine over time, both characters find meaningful, expressive outlets for their depression for the first time.

The Cooler (2003) is about Bernie (William H. Macy), an "unlucky" man, who works for a traditional, antisocial casino boss (Alec Baldwin). Bernie's job is walking around successful casino patrons to bring them bad luck. Bernie is "the cooler" because he turns winners into losers; his appearance at a table is enough to make a winning patron quickly go bankrupt. He claims he can do this easily; "I just be myself." He is stuck in the past and trapped by it, unable to move on since he is forced to use his "bad luck" to pay off his extensive gambling debt or be killed by the casino boss. When we look deeper beyond the plot, the viewers see that Bernie's personality is very self-critical, self-defeating, and negativistic. His "unlucky" quality is a self-fulfilling prophecy. He is isolated, lives alone, and is too passive to take action to change his life.

This film presents a classic depressive triad: The protagonist is hapless (unlucky), hopeless, and helpless. A cognitive therapy approach emphasizing the impact of one's thoughts, beliefs, and attitudes as affecting mood states is highlighted. Upon falling in love, Bernie's luck changes, he becomes assertive, and his presence at casino tables enhances the success of others. The power of attitude is an overriding theme in the film and we see Bernie's negative attitudes keeping him from love and luck, while positive attitudes bring him good luck and success.

In many ways, the story is clichéd – the fight for love to the death, escape from a tyrannical boss, and tremendous luck in the end saves the heroes from their seemingly inevitable demise.

In *Scent of a Woman* (1992), Lieutenant Colonel Frank Slade exhibits many of the classic symptoms of a major depressive episode and would probably qualify for the diagnosis. He has both a depressed mood and a loss of interest and pleasure in everyday activities (**anhedonia**). Slade's angry comment "I have no life, I'm in the dark" clearly suggests his depression is related to his blindness, and the sentence captures the lack of meaning and purpose in his life. His daily activities, sitting alone and drinking himself into oblivion when he is not tormenting his four-year-old niece, are clear indications of his loss of interest in life.

People who are depressed are typically not pleasant, and they can be quite difficult to be around. They are often agitated and easily angered. This serves to hide their underlying need for help. Colonel Slade is irritable, intimidating, and verbally abusive to anyone who approaches him. Expression of this type of anger and abuse has a distancing effect on others, who naturally withdraw from unpleasant situations. Charles Simms, a college student hired to accompany the Colonel on a trip, does not want to stay with Slade after meeting him, and Simms dreads the weekend he is forced to spend with the Colonel.

Another interesting film depicting depression is the 1971 Academy Award winner *The Hospital* starring George C. Scott as Herbert Bock, a middle-aged, depressed, suicidal physician who is trying to cope with the mayhem of a crowded and disorganized institution, where negligence and confusion result in a series of deaths. Bock's personal life is as chaotic as the hospital he runs.



Additional Questions for Discussion (*Scent of a Woman*)

- Will the use of alcohol alleviate depression?
- The Colonel decides to shoot himself while in uniform. Would his previous military experience increase the likelihood that Slade would actually kill himself?
- Does the true likelihood of suicide increase because Slade is blind?
- Who should determine if a decision about suicide reflects an accurate appraisal of life and its likely rewards?
- Who is qualified to determine if a decision to commit suicide is the consequence of a disease such as depression?
- Should people who are believed to be at risk for suicide be involuntarily hospitalized?

He is recently divorced, alienated from his children, and suffering from both personal and sexual impotence. He had been believed to be a medical genius in his early career; however, at the point we are introduced to him in the film, he is washed up and discouraged. At one point in the film, Bock is seen sitting in his office, preparing to inject a fatal dose of potassium.

Bock demonstrates the classical symptoms of a depressive episode. His depressed mood is expressed through his explosive angry episodes and chronic irritability. He is anhedonic and expresses no interest in his patients, his profession, or any of the activities of daily living through which most of us find meaning and purpose. Bock cannot sleep, he feels worthless, and he is plagued by recurrent thoughts of suicide. Dr. Bock's behavior is remarkably similar to that of Lt. Colonel Slade – it is similar because both men are clinically depressed.

Marlon Brando plays a depressed man trying to come to grips with the meaning of his wife's suicide in Bernardo Bertolucci's powerful film *Last Tango in Paris* (1972). The character of the coach's wife in Peter Bogdanovich's *The Last Picture Show* (1971) is clearly depressed, and her affect and behavior offer good teaching examples of depressed affect for students learning how to give a mental status examination. The despair that overcomes a man when he is abandoned by his wife is presented in the Australian film *My First Wife* (1984). Finally, Joanne Woodward gives a memorable performance as a depressed housewife in *Summer Wishes, Winter Dreams* (1973).

We highly recommend *Prozac Nation* (2001) as a film that illustrates the devastation caused by depression in a gifted but deeply troubled Harvard freshman (Lizzi) played by Christina Ricci. The film presents a compelling portrayal of Lizzi's slow descent into depression, and Lizzi provides an insightful description of her illness: "Hemingway has this classic moment in *The Sun Also Rises* when someone asks Mike Campbell how he went bankrupt. All he can say is, 'gradually, then suddenly.' That's how depression hits. You wake up one morning afraid that you're going to live." Lizzi knows she needs medication, but she also knows that it is not sufficient to solve her myriad personal problems. At one point she states "I call this the crack-house where I come to score. Dr. Sterling is my dealer. Seems like everyone's doctor is dealing this stuff now. Sometimes it feels like we're all living in a Prozac nation."

The Visitor (2007), directed by Tom McCarthy, is a sensitive portrayal of the human suffering associated with social isolation and with the restrictive

immigration policies in the United States. The film stars Richard Jenkins as a depressed and ineffectual college professor who has never recovered from the death of his wife. Jenkins' character, Professor Walter Vale, makes a half-hearted attempt to learn to play the piano, but lacks the energy, passion, and talent necessary to succeed at this task. Watching Vale interact with his colleagues and students reminds the viewer of Hamlet's lament, "O God, O God, how weary, stale, flat, and unprofitable seem to me all the uses of this world!" Vale's life has become weary, stale, flat, and unprofitable, and he finds meaning, purpose and some degree of contentment only when he stops contemplating his own unhappiness and becomes invested in helping a pair of undocumented workers he finds living in his infrequently used New York City apartment. Walter's transition from a staid, discouraged, and unhappy college professor to someone genuinely interested in life and others is symbolized by the transition from his desultory attempt to learn to play classical music on the piano to his enthusiasm for the *djembe* (an African drum that he passionately plays in the subway in the film's final moments). The film illustrates both depression and burnout, and it is a convincing demonstration of the therapeutic truism that one helps oneself most by learning to reach out and help others.

Hyer (1988) has pointed out that many of the characters who appear depressed in films would meet the *DSM-IV-TR* criteria for **adjustment disorder with depressed mood** rather than major depression. The examples Hyer cites include Jimmy Stewart's character in Frank Capra's *It's a Wonderful Life* (1946) and Henry Fonda's character in *The Wrong Man* (1956). In the latter film, Fonda develops a reactive depression after he is unjustly accused of murder.

Bipolar Disorders

Bipolar disorder occurs less frequently than depressive disorders but affects approximately 0.5–1% of the population. Unlike depression, bipolar disorders occur equally often among males and females. Like most mental disorders, the prevalence is greater in lower socioeconomic groups, in part because these illnesses interfere with a person's ability to work and in part because the cost of the illnesses quickly depletes the economic resources of all but the very wealthy. Even wealthy clients can quickly become impoverished, however, because of the poor judgment associated with manic episodes.

A **manic episode** is a distinct period of an abnormally and persistently elevated, expansive, or irritable mood, lasting at least one week, during which the mood disturbance causes marked impairment of work or functioning. The manic episode may range from mild to severe and may be accompanied by psychotic features. A **hypomanic episode** results in a period of sustained elevated mood, lasting at least four days. This change is obvious to others and alters a person's level of functioning. However, by definition, a hypomanic episode is *not* severe enough to impair work or social functioning.

People with bipolar illnesses are often very likable. Their basic personality is usually outgoing, and they often work in people-intensive occupations such as sales. During a manic episode, they feel good about themselves and their moods are contagious. They are often very generous and may buy strangers expensive gifts. During a manic episode, judgment is typically very poor. Individuals may gamble away their life savings or spend money they can't afford to lose on an expensive vacation. They often have multiple sexual partners within a short period. They also seem to have endless physical energy, appear to function perfectly well without sleep, usually eat very little, and may lose 30 or 40 pounds within a few weeks. The potential for physical exhaustion during a manic episode is very real, and the long-term consequences of a manic episode can be devastating for families. For example, it may take years to pay back a debt or forgive infidelities.

Bipolar I illnesses are diagnosed when a person has both manic and depressive episodes and cycles from one to another. The depressive episode may last 3–6 months before the person swings to a manic phase. The diagnosis of **bipolar II** disorder is reserved for those who have primarily depressive episodes, with occasional hypomania. These patients do not have full-blown manic episodes. **Cyclothymic** disorders are found in individuals who never experience a major depressive or manic episode but who have hypomanic and depressive symptoms.

Mr. Jones

Alan Greisman and Debra Greenfield's 1993 film *Mr. Jones* is about a musician, Mr. Jones, played by Richard Gere, and his psychiatrist, Dr. Libbie Bowen, played by Lena Olin. *Mr. Jones* is a clear-cut illustration of bipolar I disorder. The film portrays Jones as elated, seductive, and euphoric. He is a charismatic man with tremendous personal charm. He persuades a contractor to hire him,

proceeds to the roof, and prepares to fly after rhythmically pounding a few nails into the roof. Before climbing to the front of the roof, he insists that Howard, his newfound friend, accept a \$100 bill. After realizing that Jones really believes that he can fly, Howard persuades him to move away from the beam where he was teetering. The ambulance arrives and takes Jones to a local psychiatric emergency unit, where he is released after a few hours. At the hospital, he is misdiagnosed and given inappropriate medications.

Next, Jones goes to a bank and withdraws \$12,000; he seduces the teller in the process, and then goes on a spending spree. He purchases a baby grand piano, checks into an expensive hotel, and then attends a concert. He is arrested and returned to the hospital after he disrupts the symphony by attempting to take over for the conductor as the orchestra is playing Beethoven's "Ode to Joy" – Jones is convinced that Beethoven would have wanted the piece played at a much faster tempo. Jones is once again hospitalized in a state of manic exhaustion, and this time he is accurately diagnosed and treated by psychiatrist Elizabeth (Libbie) Bowen.

Jones knows he has manic-depressive illness. He was first diagnosed in late adolescence and had several hospitalizations. However, he refuses to take his medication, which makes his hands shake. It is during the "highs" or the manic phases that he feels best about himself. The rest of the time Jones is lonely and depressed. His lows are life threatening and result in suicide attempts. The viewers are able to gain some insight into the impact of a mental illness on the promising career of a classical musician. In addition, the film illustrates the ways in which interpersonal relationships are affected by a condition such as bipolar disorder. Jones' one important prior relationship ended when a woman he loved could no longer deal with his mood swings.

Unfortunately, the rest of the movie involves the romantic relationship that develops between Dr. Bowen and Jones. Even though Dr. Bowen resigns from the hospital, underscoring the unethical nature of this doctor-patient relationship, the true impact of the psychiatrist's behavior is never addressed in the movie.

Other Films Depicting Bipolar Disorder

Some films describe characters with bipolar disorder and do not show them as symptomatic. In *The Last Days of Disco* (1998), for example, one character is stereotyped as "looney" and "crazy"; however, he is also depicted as compliant with lith-



Additional Questions for Discussion (Mr. Jones)

- Why does Dr. Elizabeth Bowen question the resident's admitting diagnosis of paranoid schizophrenia?
- At what point is the doctor/patient relationship first compromised? Are there early warning signs that should have alerted the psychiatrist to her countertransference to this patient?
- Does Jones' history of a previous suicide attempt increase the likelihood of another attempt?
- Is an affair between a doctor and a patient more serious than one between an orderly and a patient?
- Would it have mattered if the patient had been discharged? Why?
- Is it ethical for a psychiatrist to visit a university to get historical information that may be relevant to a patient she is treating?
- Should patients with illnesses such as bipolar disorder be required by the courts to take medication, even if they dislike the effects of the medication and find it dampens their creativity?

ium, and shown to be stable, kind, and balanced. *Garden State* (2004) also depicts a patient diagnosed with bipolar disorder. However, this patient becomes noncompliant with his medication and finds that his life improves dramatically without exacerbation of his bipolar symptoms. While **drug holidays** might be recommended by physicians on occasion, films of this sort mislead the public and suggest that these important decisions can be made without medical consultation.

One of the best films depicting a bipolar illness is *Call Me Anna*, a 1990 made-for-TV movie starring Patty Duke, who plays herself in this adaptation of her best-selling autobiography. The film traces her career and her battle with a bipolar disorder and vividly portrays her mood swings and the accompanying personality changes she experienced. In real life, Patty Duke has become a vocal advocate for persons with mental illness.

Gena Rowlands plays a woman who appears to have a bipolar disorder in the John Cassavetes film *A Woman Under the Influence* (1974). She is quite convincing during a manic episode, and there is a memorable scene in which a neighbor stops by to drop off his children and then decides that it is not safe to leave them with Rowlands. He does not know exactly what's wrong, but it is clear to him that *something* is not right. Unlike *Mr. Jones*, the actual diagnosis is never specified in *A Woman*

Under the Influence, despite the fact that Rowlands spends six months in a psychiatric hospital.

Another example of an apparent bipolar disorder is found in the Harrison Ford character in *Mosquito Coast* (1986), although Ford's eccentric habits and obsessional style are probably adequate to support multiple diagnoses. The biographical film *Mommie Dearest* (1981) suggests that Joan Crawford had a bipolar disorder.

Examples of the type of rapid speech, quick thinking, and impulsive behavior associated with a hypomanic episode can be seen in the college president character played by Groucho Marx in *Horse Feathers* (1932) and in *Good Morning, Vietnam* (1987), in which Robin Williams plays an Air Force disc jockey with a rapid and clever repartee that endears him to his military audience.

One of our favorite films portraying bipolar disorder is *Blue Sky* (1994) starring Jessica Lange and Tommy Lee Jones. Lange, who won an Academy Award for her role in this film, plays the role of Carly Marshall, a woman whose bipolar disorder (diagnosed with the then appropriate term manic-depressive disorder) gets her family in considerable trouble. She sunbathes topless and acts out sexually, and the film illustrates the effects of a disease like bipolar disorder on families.

"You take water, for example. Sometimes it's water, sometimes it's ice. Sometimes it's steam, vapor. It's always the same old H₂O. It only changes its properties. Your mother's like that. She's like water."

Henry Marshall (Tommy Lee Jones) tries to explain their mother's erratic behavior to his children in *Blue Sky* (1994)

Two recent films have presented fairly accurate portrayals of bipolar disorder. These are *Running with Scissors* (2006) and *Michael Clayton* (2007). In the first film, Annette Bening plays the role of a bipolar mother who turns over her son's life to her psychiatrist; in the second film, Tom Wilkinson portrays a senior attorney in a large law firm who becomes manic. Wilkinson's character displays inappropriate behavior (e.g., stripping in court), pressured speech, and grandiose thinking. His illness is controlled by medication, but he becomes quite ill when he stops taking his lithium, and the film illustrates the critical importance of adher-

ence to medication regimens for anyone with this disorder.

Theories of Mood Disorders

There are three main theoretical explanations associated with mood disorders: The **genetic**, which is useful in understanding familial tendencies; the **biological**, which explains the physiological changes and the rationale for pharmacotherapy and electroconvulsive therapy; and the **psychological**, which gives direction for understanding behavior and psychotherapy treatment for the impact of the illness. The environment and external events are an extremely important factor in the manifestation of mood disorders, i.e., loss of a job or a recent divorce.

Genetic Theories

Twin and adoption studies have documented that there is a genetic vulnerability to mood disorders. Bipolar disorder, in particular, has been shown to have a very high heritability estimate of 93% in identical twins (Kieseppa, Partonen, Haukka, Kaprio, & Lonnqvist, 2004).

When researchers compared the incidence of mood disorders in identical twins (who share the same genetic code) with that of fraternal twins (who have different genetic material), the concordance rate was 67% for the identical twins and 15% for fraternal twins. The high concordance for identical twins has also been found in twins who were raised in different environments. Clearly, there is a significant genetic component in mood disorders.

Biological Theories

The biological approach to mood disorders focuses on the activity of the neurotransmitters in the limbic system. The neurotransmitters involved include **dopamine**, **serotonin**, **acetylcholine**, and **norepinephrine**. In depression, it is believed that there are fewer available neurotransmitters in the synaptic junction; in mania, there is an excess.

The limbic system also regulates the pituitary hormone, a key element in the highly complex endocrine system. Changes in the endocrine system also influence mood. There have been many studies documenting the changes in the function-

ing of the pituitary gland and thyroid that occur with mood disorders. Some depressed persons have been found to secrete an excessive amount of cortisol, a hormone produced by the pituitary gland. Additionally, persistently low thyroid hormone levels have been noted in some cases of depression, and an elevated thyroid hormone level is present in some rapid cycling bipolar disorders.

Psychological Theories

Psychological theories have always played an important role in the understanding and treatment of mood disorders. While the depressive and bipolar disorders clearly have a biological basis, the psychodynamic conceptualization of these disorders provides a different way of understanding the behavioral and emotional problems associated with these conditions. Many of the psychological features of depression are readily apparent in films.

The early psychoanalysts (e.g., Freud, Abraham) noticed that people with depression experienced **ambivalence** toward significant persons in their lives. That is, they often acted as if they loved and hated the same person. In *Scent of a Woman* (1992), Lt. Col. Slade is both affectionate and antagonistic toward his niece, brother, and other family members. He also becomes antagonistic and aggressive when Charlie Simms tries to help him.

Introjection, the unconscious "taking in" of qualities and values of another person or a group with whom emotional ties exist, was also identified as a characteristic feature of depression. In *Scent of a Woman*, Slade introjected the values of the military and continued to treat everyone as if he or she reported to him. Interestingly, Slade had been discharged from the military because of his overbearing behavior. Colonel Slade's difficulties in the Army were likely related to a long-standing history of untreated depression.

Regression, another characteristic of depression, refers to a return to an earlier pattern of behavior. During a depression, childhood behavioral patterns may appear, and a person may act less mature. In *Scent of a Woman*, Slade's ongoing battle with a four-year-old is not acceptable adult behavior for a retired Colonel.

Denial, ignoring the existence of reality, is characteristic of persons experiencing a manic episode. These patients often stop taking their medication because they believe that there is nothing wrong with them. They reject any advice from family members and may become belligerent at any suggestion that they are ill. Jones had been

hospitalized multiple times after he discontinued his medication in *Mr. Jones*, and he is smart enough to know it will happen again. However, each time he convinces himself that this time will be different. This is a classic example of denial.

Cognitive-behavioral theorists have contributed significantly to the understanding of the experience of depression. Aaron Beck has described a **cognitive triad** that is common in these patients. The triad consists of (1) perceiving oneself as defective and inadequate, (2) perceiving the world as demanding and punishing, and (3) expecting failure, defeat, and hardship. These “automatic thoughts” are readily apparent in *American Splendor* (2003), *The Cooler* (2003), *Scent of a Woman* (1992), *The Hospital* (1971), and Julianne Moore’s character in *The Hours* (2002).

Mood Disorders and Creativity

There is compelling evidence that mood disorders may be related to the creative process, and numerous artists, poets, and composers have been diagnosed as depressed or bipolar, or have biographies that suggest that these disorders were present. Dean Simonton, a researcher on creativity and creative genius for over 35 years, notes that artists and those in professions involving skills that are subjective, intuitive, and emotive are more likely to have mental illness than those who are scientists or in professions using skills that are rational, logical, and formal (Ludwig, 1998; Simonton, 2009). Simonton adds that some creators are able to control their bizarre thoughts and use them productively. Similarly, Kay Redfield Jamison, a psychologist with bipolar disorder, notes that the periods of creativity in many individuals with this disorder typically happen during healthy periods in which the person draws upon the experiences that occurred in their manic, hypomanic or depressed phase (Jamison, 1993). Two recent short documentaries discuss this link between psychopathology and artists – *Between Madness and Art* (2007), which tells the story of Dr. Hans Prinzhorn, a man who collected hundreds of artistic creations by patients with mental illness from various institutions, and *Hidden Gifts: The Story of Angus MacPhee* (2005), the story of a mute man with schizophrenia who made incredibly creative objects and clothes out of twigs and sticks.

Several actors and actresses have reported or been rumored to have struggled with bipolar disorder, including Richard Dreyfuss, Patty Duke, Carrie

Fisher, Linda Hamilton, Jean-Claude Van Damme, and Vivien Leigh. Examples of poets believed to have experienced mood disorders include William Blake, Ralph Waldo Emerson, Edgar Allan Poe, Lord Byron, Alfred Lord Tennyson, John Berryman, Sylvia Plath, Theodore Roethke, and Anne Sexton; examples of painters and composers with mood disorders include Vincent van Gogh, Georgia O’Keeffe, and Robert Shuman (Jamison, 1993). Sylvia Plath’s difficulties with depression are detailed in the film adaptation of her semi-autobiographical novel *The Bell Jar* (1979), in which Gwyneth Paltrow plays the title role as *Sylvia* (2003). Novelist Virginia Woolf’s mood disorder is portrayed in the highly recommended movie *The Hours* (2002). The troubled life of Beethoven is portrayed in the 1995 film *Immortal Beloved*. Vincent van Gogh’s life, work, and mental illness (which may have been bipolar disorder) have been documented in the films *Vincent* (1987), *Vincent & Theo* (1990), and *Van Gogh* (1991). However, none of these match the artistic achievement established by the 1956 film *Lust for Life*, in which Kirk Douglas plays van Gogh and Anthony Quinn plays the supporting role of Paul Gauguin. The final days of influential Nirvana lead singer/guitarist, Kurt Cobain, are portrayed in Gus van Sant’s *Last Days* (2005) and *Kurt Cobain: About a Son* (2006); Cobain had been diagnosed with bipolar disorder and committed suicide in 1994. Wedding (2000) provides examples of the cognitive distortions found in the poems of Anne Sexton; these particular distortions are common in depressed and suicidal people.



Additional Questions About Creativity

- Are people with certain mental illnesses more creative than people without such disorders?
- How do you make sense of such a significant split between dramatic creativity and complete chaos and disorder that often mark such individuals’ lives?
- What are your own views on van Gogh? What behaviors support a diagnosis of mood disorder? What evidence suggests a seizure disorder may have been present? Are there any other competing hypotheses?
- If you had the power to cure someone like van Gogh, but you knew that the treatment would destroy his creativity, would you proceed?
- What other artists and writers have experienced mood disorders?
- Can you name other artists, writers, and poets who have committed suicide?

Shakespeare was fascinated by people who took their own lives, and his plays and their film adaptations provide a useful and fascinating way to approach the study of suicide. Major Shakespearean plays in which suicide is a prominent theme include *Romeo and Juliet*, *Julius Caesar*, *Hamlet*, *Anthony and Cleopatra*, *Macbeth*, *Othello*, and *King Lear*. There have been multiple film adaptations of each of these plays.

Suicide

Suicide and Depression

Suicide is the eighth most frequent cause of death throughout the world, but suicide rates vary widely among different countries. Generally, the suicide rate is low in the less prosperous countries and highest in the more affluent ones, such as Germany, Switzerland, and Sweden. However, the suicide rate is also high in all Eastern European nations. The suicide rates in the United States and Canada are in the middle range. Among adolescents, suicide is the third most frequent cause of death. While men are more likely to commit suicide, women attempt suicide more frequently than men. Men are more successful in their attempts because they are more likely to choose a more lethal means (e.g., guns).

Mortality rates for suicide are generally higher in urban areas, and prevalence rates for suicide have been shown to be positively correlated with the size of cities. Although suicide has a low incidence in closely-knit rural communities, the problem is more common among the elderly, in areas where agriculture is in decline, and among workers who are immigrating to the cities. The incidence of suicide increases with age, with the elderly at greatest risk for killing themselves (NIMH, 2003).

One of the best predictors of who will attempt suicide is a history of a psychiatric disorder. Those who are at the highest risk for suicide are those who have no hope. People who express hopelessness are more likely to commit suicide than those who have some hope for the future. The association between suicidality and hopelessness is stronger and more stable than the association of suicidality with the presence of depression and substance use disorders (Kuo, Gallo, & Eaton, 2004). The lead characters in two films discussed earlier, *Scent of a Woman* (1992) and *The Hospital* (1971), each have a strong sense of hopelessness.

House of Sand and Fog

House of Sand and Fog (2003) offers a compelling illustration of the ways in which depression can present. The movie stars Jennifer Connelly as Kathy, a depressed, recovering alcoholic, Ben Kingsley as Behrani, a former high-ranking Iranian colonel working hard at two menial jobs to create success for his family, and Ron Eldard as Lester, a married police officer who protects Kathy and wants to start a new life with her. Director Vadim Perelman succinctly describes the dynamics of each character’s psyche as follows: “Behrani wants up, Kathy wants in, and Lester wants out. Those are their motivations.” Kathy’s house is seized due to tax payment delinquency and Behrani wins the house in an auction, thus beginning a complex web of morality, conflict, individual needs, and pursuit of one’s dreams.

“The woman has come here and tried to take her own life. We must help her. She’s a bird, a broken one. Your grandfather used to say the bird which flies into your house is an angel. You must look upon its presence like a blessing.”

Behrani giving advice regarding Kathy’s first suicide attempt in *House of Sand and Fog* (2003)

Kathy lives alone in a house she and her brother inherited from their father. In one of the opening scenes, Kathy is sleeping when she is awakened by her advice-giving mother on the phone; after discussing the need for her to attend support group meetings, Kathy ends the conversation with a single tear streaming down her cheek and hangs up the phone. She then rises from her shaking waterbed (an early symbol of her instability) and begins to walk around her dirty house that includes a dripping faucet and a large stack of unopened mail blocking her front door. The opening scenes set up a depiction of an unsteady woman with a history of alcoholism who lives a sedentary, isolated, and unmotivated life. These scenes set the stage for Kathy’s battles with alcoholism and depression.

Kathy seems to have an underlying depression quality marked by agitation, numbed and blunted affect, and social isolation. Early on, she alludes to her struggle with depression and remarks “I’m trying not to harp on the negative.” Kathy also

has financial problems, and because she is unable to afford a motel for two days, she begins to live and sleep in her car, turning the engine on for heat. She finds some comfort and escape from her loneliness through an affair with a married man. As stress increases, she begins to smoke cigarettes again. There is a clear link between alcohol and depression, yet this begins with denial. Kathy says, "See, when I think of my sobriety I don't think about wine, alcohol was never a problem." She then begins to drink wine with a subtle smile. This is a break in her two years of sobriety and it rapidly results in physical and emotional deterioration. This is a serious and severe relapse for Kathy, clearly triggered by the stress and chaos in her life.

Kathy's overt "cry for help" comes when she calls her brother, pleading with him to visit and support her: "I just feel lost, Frankie, I just feel lost." Her brother, a typical busy American, claims there are new things needing attention at his job and quickly gets off the phone. Kathy's despair continues to escalate. With tearfulness and blood-shot eyes from crying, Kathy purchases several miniature bottles of whiskey and some gasoline. She drinks the whiskey while driving and crying. Her depression and helplessness then lead to two suicide attempts. While despairing over the house she lost, she tries to kill herself with a gun, pulling the trigger several times; however, the gun is not loaded. She is found, taken in and cared for by her rival Behrani and his family, and she attempts suicide a second time, swallowing several bottles of unnamed prescription medicine. She is saved again, this time because she is found early and forced to throw up most of the medicine.

Metaphors for depression abound in this film. The emergence of the moon and the setting or rising of the sun represent character transitions and shifts into different mood and mental states. As the title suggests, sand and fog are important elements in the film; one possible interpretation is that both represent the symptoms of depression. Sand is a naturally unsteady element representing the sinking nature of suicide. As Kathy sinks deeper into depression, fog is seen in many scenes, becomes thicker and more concealing until in one scene it completely surrounds the house. There are several camera shots of "moving fog" in which the fog quickly covers trees, mountains, water, and homes. This is similar to the rapid clouding associated with the negative thoughts, helplessness, and self-destructive behaviors one finds in depression. The film opens with life being cut down (trees) and concludes



Additional Questions for Discussion (*House of Sand and Fog*)

- Based solely on the film, does Kathy meet the criteria for a diagnosis of mood disorder?
- At what point would hospitalization be recommended for Kathy?
- What are the negative automatic thoughts likely to occur in Kathy?
- What is the relationship between alcohol and depression in this film? How commonly does alcohol and drug abuse co-occur with mood disorders?
- How much more likely is a depressed drinker to commit suicide than a depressed non-drinker?
- Describe the ways characters react to Kathy's suicide attempts. Are these reactions typical?
- What suicide signs are evident for Kathy? Compare and contrast the suicide risk factors for Kathy and Behrani?
- What is the purpose of the film's title? Does it relate to depression or addiction?
- Some reviewers have described Kathy as a weak person. Do you agree?
- What are Kathy's healthy and unhealthy coping strategies?

with a shot of a tree surrounded and protected by a fence.

The viewer is particularly challenged with this film, as he or she can empathize with both characters and can see the needs of both sides. As tension rises and conflict continues, this challenge becomes more complex, even to the point where a state of helplessness is induced in the viewer which mirrors the helplessness portrayed on screen.

The Hours

The Hours (2002) is a film of enormous psychological, emotional, and cinematic proportions. The film was nominated for Academy Awards as Best Picture, Best Director, and Best Adapted Screenplay. The all-star cast includes Nicole Kidman, Meryl Streep, Julianne Moore, Ed Harris, Claire Danes, Jeff Daniels, Toni Collette, John C. Reilly, and Miranda Richardson. Music was brilliantly composed by the renowned Philip Glass, and the script was adapted by David Hare. Ironically, one of the least known figures in this film is perhaps the most important – the director. This was director Stephen Daldry's second feature film, though his extensive work and awards in the London theater show he was more than equal to the challenge of directing a movie.

"If I were thinking clearly, Leonard, I would tell you that I wrestle alone in the dark, in the deep dark and that only I can know, only I can understand my own condition."

Virginia Woolf (Nicole Kidman) talking to her husband in *The Hours* (2002)

The film depicts three stories about three women who are closely connected although they live in different periods. Each struggles with both serious depressive symptoms and suicide issues.

Kidman plays the now celebrated novelist Virginia Woolf, struggling to write her soon-to-be-famous novel *Mrs. Dalloway* in the early 1900s while suffering with what would be identified today as bipolar disorder. The film dramatically begins and ends with the suicide of Virginia Woolf, who drowns herself in a quickly flowing river with heavy rocks in her pockets to weigh her down. Woolf's depression is emphasized in the film, though some mania symptoms are depicted, including her agitation, decreased need for sleep, poor judgment, and indecisiveness, such as when she decides to leave her house against doctor's orders with the intention to move to and live in London. She has a history of "fits," problems with mood, she hears voices, and she has made two suicide attempts. Though her life has been set up to protect her, the inner turmoil she experiences is simply too painful for her to continue to live. She smokes marijuana to calm herself, focus her thoughts, and numb the pain.

The character of Laura (Julianne Moore) is living in a quaint neighborhood home in the 1950s. She reads *Mrs. Dalloway* with interest and passion, finding comfort and inspiration in the lead character. Laura's character is an enigma, but she is clearly depressed and overwhelmed by life and its demands. She is socially awkward and skittish, at times unsure of how to respond socially and at other times standing near the door (after the doorbell rings) but not answering it. She is overwhelmed by easy tasks (e.g., baking a cake) and is self-critical of her mistakes. Laura, like Woolf, feels alone and craves connections though does not seem to know how to make them. She kisses her visiting neighbor, Kitty (Toni Collette), on the lips, clearly trying to connect with another life. She spends a lot of time alone and experiences frequent crying spells. At one point, she decides to

commit suicide, leaves her son with a baby-sitter and checks into a hotel – a suicidal dream seems to be the catalyst that changes her mind. Ultimately, life is too much for her to cope with and rather than committing suicide, she travels to Canada to restart her life, abandoning her husband and children.

"There are times when you don't belong and you think you're going to kill yourself. Once I went to a hotel. Later that night I made a plan. The plan was I would leave my family when my second child was born. That's what I did. I got up one morning, made breakfast, went to the bus stop, got on a bus, left a note... What does it mean to regret when you have no choice? It's what you can bear. There it is. No one's going to forgive me. It was death. I chose life."

Laura (Julianne Moore) explaining herself in *The Hours* (2002)

The third interweaved story is set in New York City in 2001 and involves Clarissa (Meryl Streep), a woman trying to impress others and cover up her pain by throwing a party (just as in *Mrs. Dalloway*) for Richard (Ed Harris), her former lover, a prize-winning poet dying of AIDS. Clarissa is a strong woman who is socially confident and appears sure of herself. Her vulnerability is slowly disclosed through her struggles to help Richard, through her distant relationship with her partner of several years, and in her emotions that rush to the surface when she confronts a former lover (Jeff Daniels).

"I still have to face the hours, don't I?... I mean the hours after the party and the hours after that."

Richard (Ed Harris) alluding to his suicidal thoughts when speaking to Clarissa in *The Hours* (2002)

Clarissa covers her inner pain through self-sacrifice, trying to help Richard cope with his



Additional Questions for Discussion (*The Hours*)

- Compare and contrast Virginia Woolf's decision to commit suicide and Laura's decision to live but abandon her family. Is one decision healthier? More just?
- Is suicide the right decision for a person such as Woolf who feels trapped in life and consumed by intense inner turmoil, or is suicide a selfish attempt to escape one's pain?
- How might a therapist approach a predicament and character such as Woolf's?
- What is the prognosis for Clarissa at the film's conclusion?
- What depression elements are paralleled in each woman across the generations?
- Can someone painfully dying of AIDS (e.g., Richard) still have a life worth living? What can be said to a patient who would answer "no" to this question?

hallucinations, noncompliance with medication, depression, and cynicism. Ultimately, Richard commits suicide by jumping out of the apartment window in front of Clarissa.

Other Films Dealing with Depression and Suicide

A number of recent films portray protagonists who end their life, indicating there is no trend to decrease the frequency of the portrayal of suicide in films; consider *Revolutionary Road* (2008), *The Reader* (2008), *Boy A* (2007), and the sacrificial suicide in *Gran Torino* (2008).

Hopelessness and suicidal intent are well depicted in the film *Night, Mother* (1986), starring Sissy Spacek as Jesse and Anne Bancroft as the mother, Thelma. This film is a thought-provoking and gripping film adaptation of a Pulitzer Prize-winning stage play about suicide. The entire film takes place in the mother's home, where Jesse has lived since her divorce. As the play begins it is 6:05 p.m., and Jesse has just informed her mother that she plans to kill herself that night. The two women examine their lives as Thelma tries to protect her daughter from her decision. Ultimately, Jesse explains that she has no hope and ends her life at 7:45 p.m.

Suicide makes for high drama, and it is a common theme in films. Some examples include the unforgettable Russian roulette death of the soldier who remained in Vietnam in *The Deer Hunter* (1978); the suicide by drowning of a young man who feels he cannot please his critical father in

The Field (1990); the murder/suicide by a Marine recruit in *Full Metal Jacket* (1987); the lead character in the Roman Polanski film *The Tenant* (1976), who becomes suicidal after renting the apartment of a woman who in fact had recently committed suicide; the female protagonist (played by Greta Garbo) committing suicide by stepping in front of an oncoming train in *Anna Karenina* (1935); and the suicide staged to look like a hunting accident in *Mountains of the Moon* (1990). Japanese novelist Yukio Mishima, one of the most fascinating characters in contemporary literature, committed *seppuku* (ritualistic suicide), and his life and death are portrayed in the film *Mishima: A Life in Four Chapters* (1985). Peter Finch, playing Howard Beale, the mad prophet of the evening news, announces to the world that he will commit suicide on the air in two weeks and sees his ratings soar in the film *Network* (1976). In the independent film, *Eye of God* (1997), a young boy views his mother's suicide. He is left in acute stress, confusion, and terror, unable to speak and catatonic. Shortly after, he kills himself at the age of 14.

Often a failed suicide attempt is a means by which a director can heighten tension or set the stage for future character development. After Olivia (Patricia Clarkson) attempts suicide in *The Station Agent* (2003), her relationship with two other lonely characters deepens and the three complete a close bond of support and friendship. When Pu Yi, the last emperor of China, attempts to commit suicide by slashing his wrists in a railroad station restroom in Bernardo Bertolucci's *The Last Emperor* (1987), we get some insight into his character and a better sense of the despair he is experiencing. Alex Forrest (Glenn Close) attempts suicide by slashing her wrists in *Fatal Attraction* (1987), and the attempt is necessary to establish the extent to which she is willing to go to manipulate and control her lover. After Emmett Foley (Gary Oldman) shoots himself in the chest in the opening scenes of *Chattahoochee* (1989), we learn that he is afraid to die and not genuinely psychotic.

Suicide is sometimes romanticized in film, such as in the hauntingly beautiful *Elvira Madigan* (1967), in which two lovers decide on a double suicide. In *The Hairdresser's Husband* (1992), the female protagonist jumps to her death by drowning in order not to lose the happiness she has found with her new husband.

Finally, suicide is often treated as a humorous topic. Examples include Burt Reynolds' character in *The End* (1978), the multiple suicide attempts of Harold in the black comedy *Harold and Maude* (1972), the Italian judge who tries to get his sister

to commit suicide in *Leap into the Void* (1979), the elaborate last supper for the impotent and suicidal camp dentist in *M*A*S*H* (1970), and the inadvertent death by hanging in *The Ruling Class* (1972).

The Virgin Suicides (1999) was Sofia Coppola's directorial debut. The story involves a repressed family with five daughters who commit suicide in response to their mother's overbearing control and repression. Unfortunately, this film supports the public misconception that suicide is caused by over-controlling parents when in fact it is the opposite that occurs.

Dead Poets Society

Dead Poets Society (1989) stars Robin Williams as John Keating, an unconventional English teacher at a strict boys' preparatory school. This film was nominated for several Academy Awards. Set in 1959, this drama contrasts institutional values and individual creativity. By fostering "critical thinking" in his classroom, Keating broadens students' educational experience and their ability to think independently. The students also discover that when Keating was a student at the school, he started a secret society, the Dead Poets Society, dedicated to intellectual creativity. These students reactivate the society.

One important conflict in the film is between Neil, a student who wants to be an actor, and his father, a domineering businessman who wants his son to be a doctor. Neil's father will not allow him to try out for a campus production of *A Midsummer Night's Dream*. Neil disregards his father's demands, goes to the audition, and is selected for the lead role. Keating encourages Neil to explore the relationship with his father and to enlist his father's support. Neil's father is enraged when he views his son's successful performance. Neil is immediately brought home and, in an act of desperation, believ-

ing that his father will never "allow" him to become an actor, Neil shoots himself with his father's gun. Keating becomes the scapegoat for Neil's suicide, and the school's administration uses the suicide as an excuse to fire the unconventional teacher. The film ends with the other students protesting against Keating's dismissal.

Wristcutters: A Love Story (2006) opens with Zia, the lead character, slashing his wrists. He then finds himself in a kind of purgatory, populated by other people who have committed suicide. He considers killing himself again, but suspects he'll only wind up in a still worse setting. The film will teach you very little about depression and suicide, and it insults the viewer's intelligence by making use of a cheap "it was all just a dream" plot device that explains everything away.

Harold and Maude (1971) is a cult classic that opens with Harold, a troubled teenager, pretending to hang himself. He routinely fakes suicide attempts, primarily to annoy his intrusive mother, and amuses himself by attending funerals of people he has never met. At one of these funerals he meets Maude, a 79-year-old woman who also enjoys attending funerals. These two unlikely companions become fast friends, and Harold professes his love for Maude shortly before she dies.

There is a memorable suicide by hanging in *The Shawshank Redemption* (1994), and few viewers are able to forget the Russian Roulette games that prisoners of war are forced to play in *The Deer Hunter* (1978).

Risk Factors and Antecedents

There are many risk factors associated with suicide. The demographic risk factors include being adolescent or elderly, male, white, separated, divorced or widowed, isolated, and unemployed. Other risk factors include depression, alcoholism, bipolar disorders, and neurological disorders.

Unfortunately, even though risk factors and the antecedents of suicide have been well established, accurately predicting who will commit suicide is extraordinarily difficult. Most clinicians include a suicide assessment in their initial interaction with any client who has an emotional problem or a mental illness. An assessment for suicide focuses on three areas: intent, plan, and lethality.

Intent, or thinking about suicide, is a specific indicator of an impending suicide and probably the single most important predictor. Those people most intent on suicide have worse insomnia, are more pessimistic, and are less able to concentrate than



Additional Questions for Discussion (*Dead Poets Society*)

- Would Neil qualify for a psychiatric diagnosis under *DSM-IV-TR*? If so, which one?
- How common is it for someone to commit suicide as a way of punishing someone else?
- Does the presence of a handgun in a house increase the likelihood of suicide?
- Would a daughter have been as likely to shoot herself?
- What else could John Keating have done to reduce the conflict between Neil and his father?

those with less intent. In the film *Night, Mother* (1986), the total story focuses on Jesse's plan to kill herself. Those individuals most intent on killing themselves are more often males, older, single or separated, and living alone. However, experts also know that intent is episodic, and that even if there is no intent today, there may be tomorrow. In *Dead Poets Society* (1989), there is no mention of Neil's intent and the viewer is led to believe that he does not intend to kill himself until he returns home, feels helpless, and convinces himself there is no way out of an untenable situation. If someone had recognized his intent or if he had reached out for help (e.g., by calling a suicide hotline), Neil might have been able to identify creative alternatives to suicide.

Most experts believe that even though a person is intent on suicide, there is almost always an underlying wish to be rescued. Thus, a person who is very intent upon killing himself or herself may consciously or unconsciously send out signals of distress, evidence of helplessness, or pleas for help. Some of the verbal cues may be "I am going away" or "You won't be seeing much of me from now on." There may also be unusual behaviors such as putting one's affairs in order, giving away prized possessions, engaging in atypical acts, or becoming socially isolated. These behaviors are all present in *Scent of a Woman* (1992). Lt. Colonel Slade puts his financial affairs in order, visits his family, says good-bye, and has his "last fling."

People who have a **plan** for committing suicide are more likely to actually kill themselves than those who have vague thoughts about not wanting to live. Clinicians are trained to determine whether their patients have a plan to kill themselves and how specific their plans are. An individual who does not have a plan is considered to be at lower risk than someone who knows how he or she can commit suicide, and who has access to the planned method. In *The Hospital* (1971), Dr. Herbert Bock plans to kill himself by injecting a lethal dose of potassium. He demonstrates both plan and intent, and, because of his easy access to potassium, he is clearly at high risk.

The **lethality** of the method is also an indicator of the risk of suicide. The more lethal the chosen means, the more likely it is that the person will commit suicide, especially if there is easy access to the method selected (e.g., guns in the home). The most lethal suicide methods are using guns, jumping off buildings and bridges, and hanging. Slashing one's wrists and ingesting 15 or fewer aspirin are common methods of attempting suicide, but they are seldom lethal. Other methods

that carry a moderate to high risk of lethality are drowning, carbon monoxide suffocation, and deep cuts to the throat. In both *Scent of a Woman* (1992) and *Dead Poets Society* (1989), the lethality was high because guns were the means selected for the suicidal act.

Prevention of Suicide

Since there are no clear predictors of suicide, there are no foolproof prevention strategies. Treatment of an acutely suicidal individual involves protecting him or her and connecting with that part in each person that wants to be rescued. Usually, a person who is suicidal is hospitalized and not allowed to be alone. Even in those instances, if a person wants to commit suicide, a hospital environment cannot prevent it, and many suicides have been completed in a protected environment. In the film *Crossover* (1983), a psychiatric nurse is plagued by self-doubt after one of the patients he works with commits suicide.

Ordinary People

Ordinary People (1980), an Academy Award-winning film based on Judith Guest's novel by the same name, depicts the aftermath of a suicide attempt. Conrad Jarret, played by Timothy Hutton, is a sensitive teenager who has attempted suicide following a boating accident that killed his brother, Buck. Conrad could not overcome his feelings of guilt, attempted suicide, and was hospitalized for four months. The film begins following Conrad's return home and traces his struggle for personal redemption and his futile attempts to communicate with his parents. His father, Calvin, played by Donald Sutherland, is a successful tax attorney who tries to respond to Conrad's needs. His mother, Beth, played by Mary Tyler Moore, is well intentioned but ultimately unable to meet the needs of her son. Beth is the nucleus of a family in a crisis.

Upon his return from the hospital, Conrad is inattentive in class and distant with classmates. He is also ill at ease with his parents. His father encourages Conrad to contact a psychiatrist, and eventually he begins therapy with Dr. Tyrone Berger, played by Judd Hirsch. In therapy, Conrad explores his relationship with his parents. When Dr. Berger suggests that the entire family meet together, Beth refuses. Throughout the movie, Beth's feelings toward her living son become obvious. Calvin begins to question his relationship with Beth and unsuccessfully attempts to re-engage his wife in their relationship. Beth eventually leaves

her husband and son, who come to terms with Beth's limitations and begin to rebuild their lives around their love for each other.

Other characters play an important role in the movie. Conrad's swimming coach quizzes him about his hospitalization, asks him whether he received shock treatment, and is demanding during training sessions. Conrad finally decides to quit the swimming team.

Another important character is Karen, a girl Conrad met at the hospital. While hospitalized, Conrad and Karen had a completely "open and honest" relationship. When Conrad contacts her at home, she is distant but appears to be in control. She is involved in school activities and maintains she no longer thinks about the problems that resulted in her suicide attempt. She also decides not to see a therapist. Karen's newfound confidence is startling to Conrad, who begins to question his own fragile condition. When he tries to get in touch with her later, however, Conrad learns that she has committed suicide.

Karen's death forces Conrad to relive the boating accident that took Buck's life. At last, he is able to explain his guilt—he lived and Buck did not. Conrad realizes that he was angry with Buck because he did not hang on to the boat. With the help of Dr. Berger, he experiences the intense pain of his loss and resolves his guilt.

If a suicide attempt is survived, the meaning of the attempt should be examined. Even though the viewer is not told whether Conrad has symptoms of depression, it is safe to assume that they were present prior to the suicide attempt. Conrad's suicide attempt was both an attempt to kill himself and a cry for help. His family fails to appreciate or respond to his distress over his brother's death. His mother is unable to relate to anyone, and his father is withdrawn from family interaction. Through a suicide attempt, Conrad got his family and friends to acknowledge his desperate situation.

Every suicide threat should be taken seriously. While attempting suicide is often an impulsive act,

it is also an act of communication. If Conrad had possessed the necessary communication skills, he could have discussed his feelings and explored their meaning.

International Films: Mood Disorders and Suicide

Respiro (2002) is a highly recommended Italian film about a woman who would meet *DSM-IV-TR* criteria for the diagnosis of bipolar disorder. Her behavior is erratic, unpredictable, and frequently inappropriate (e.g., she invites her sons to go swimming with her in the nude). The people in her small Mediterranean fishing village insist that she be sent to Milan for psychiatric hospitalization after she releases a pack of caged dogs that have to be shot from the rooftops. She avoids psychiatric hospitalization when her oldest son helps her find refuge in a cave, and her husband and the villagers eventually come to miss her eccentric but life-affirming behavior.

The slow-moving but powerful Iranian film *Taste of Cherry* (1997) won the Palme d'Or at the Cannes Film Festival. The movie illustrates the grim determination of a man who has decided to take his own life, but who cannot find anyone to help him. He has dug a hole in the ground and plans to lie in the hole and die after taking a handful of pills; however, it is important to him that he find someone to fill up the hole after he has died. One person he attempts to persuade to take on this task asks a poignant question that leads to the suicidal man questioning his decision: "Do you want to give up the taste of cherries?"

Turtles Can Fly (2004, Iran/France/Iraq), filmed on the Iraqi/Turkish border, depicts an adolescent with severe PTSD who is depressed, homicidal, and suicidal, clearly in reaction to the horrors and atrocities of war; the film does not hold back in its messages of what happens to children in war-torn countries.

The Japanese film *Maboroshi No Hikari* (*Maborosi*; 1995) shows how a young woman is affected after the seemingly senseless and random suicide of her husband who chooses, without any apparent reason, to deliberately walk in the path of an oncoming train.

Suicide Club (2002) is a Japanese film that explores the phenomenon of suicide and raises more questions than it answers. It assesses possible links between suicide and crime, music, violence,



Additional Questions for Discussion (Ordinary People)

- How would you describe Conrad's family in *Ordinary People*?
- If you were a therapist working with this family, how would you proceed?
- Do any of the characters in the film meet *DSM-IV-TR* criteria for depression?

group contagion, internal compulsions, consumerism, evil forces, and various external factors. After 54 young girls mysteriously and collectively commit suicide by jumping in front of an oncoming subway train, mass hysteria and confusion develop and several individuals and groups around the country take their lives. One scene depicts a group of students joking about creating a suicide club, and they gather at the edge of a building's roof and chant for each other to "jump." One by one, they watch each other plummet to their death. The film illustrates the phenomenon of suicide **contagion** (de Leo & Heller, 2008; Hacker et al., 2008), a serious problem that is compounded by new media such as the internet (Mehlum, 2000).

Rain (2001) is a New Zealand film about a young girl coming of age as she interacts with family and neighbors on a beach. The film is included in this chapter because of the girl's depressed mother, an alcoholic who acts out sexually and only seems to be happy when she is drinking. The drinking clearly helps her escape from her depression.

The Scottish film *Wilbur Wants to Kill Himself* (2002) is helpful only insofar as it allows the viewer to witness the various stereotypes and misconceptions possible in a movie. Wilbur is a depressed and angry man who curses children, rejects women, and cheats with his brother's wife even though his brother is the person who repeatedly keeps Wilbur from killing himself. The brother is depicted in the role of protector, frequently checking up on Wilbur, supporting him, and removing sharp objects from his home. Wilbur's persistence in his suicide attempts include pills, gas from the oven, hanging, drowning, cutting his wrists in the bathtub, and standing at the edge of the roof of a building. Wilbur's determination to commit suicide ends once his love for his brother's wife becomes mutual. This perpetuates the misconception that love conquers mental illness. Equally disturbing is the film's blatant stereotypes of two psychologists leading a group; one smokes cigarettes during sessions and comments that the patients would be better off without group therapy; the other violates boundaries with a patient, licking his ear, going out on a date, engaging in sexual activity in a hospital closet, and violating confidentiality.

Another film about a character repeatedly attempting suicide and failing can be found in *The Face* (1999, South Korea). The protagonist is a diagnostic quandary – she lives a completely isolated life, rarely leaves her house, has no friends, and her only social contact is her younger sister who berates her and abuses her. She is socially inept

Critical Thinking Questions

- Are dysthymic disorders, major depressive episodes, and major depressive disorders qualitatively different phenomena, or are they simply different quantitative expressions of a single disorder?
- If you genuinely believe a friend is suicidal, what are your ethical and moral obligations?
- Do your responsibilities to that person change if you are a therapist rather than a friend?
- Is there a suicide hotline in your community? Do you know how to access it?
- How do you distinguish between idle passing thoughts of suicide and a cry for help?
- The suicide rate for both men and women is much higher in Asian countries and in Sweden, Denmark, and Austria than in the United States. What cultural factors could account for these differences?
- Kathy in *House of Sand and Fog* (2003) does not receive treatment for her depression. What percentage of depressed individuals go untreated? About how long does it take a depressed individual to seek treatment following the onset of their disorder?
- At one point in *Mr. Jones* (1993), a physician compares bipolar disorder to diabetes. In what way is the comparison apt? In what way is it misleading?
- Patty Duke is a well-known personality who has "come out of the closet" and openly shared the story of her mood disorder (see *Call Me Anna*; 1990). Can you think of other celebrities who have been candid about their own struggles with mental illness? Did any of them have bipolar disorder?
- How might you distinguish between someone experiencing a manic episode, someone experiencing the elation and energy associated with amphetamine abuse, and someone with a high level of enthusiasm/vitality?
- Dr. Bowen in *Mr. Jones* (1993) states, "You're not a sick person; you're a person with a sickness!" What is the significance of this semantic distinction?
- Do filmmakers have a responsibility to avoid glamorizing suicide to prevent contagion, or is a director's sole responsibility to make the best possible film without worrying about things like social influence?

and spends her life sewing, until her mother dies suddenly, after which she strangles her younger sister to death. This character seems to lose touch with reality, suggesting a link between dissociation and suicide attempts. The film ends with the protagonist escaping from life by swimming away on an inflatable tube in the ocean; this is simulta-

neously a suicide attempt (not dissimilar from the protagonist in Kate Chopin's *The Awakening*) and her ultimate dream (to learn to swim). The viewer may also be reminded of another attempted suicide by drowning in *The Piano* (1993).

Further Exploration

If you have time to read only one book relevant to this chapter, make it:
McKeon, R. (2009). *Suicidal behavior*. Cambridge, MA: Hogrefe Publishing.

If you only have time for one article, read:
Picture This: Depression and Suicide Prevention (a Substance Abuse and Mental Health Services Administration publication). Enter the title into a web search engine to download a PDF copy.



Mood Disorders and Suicide

Bipolar Disorder

- ☐ *Blue Sky* (1994)
- ☐ *Mr. Jones* (1993)
- ☐ *Michael Clayton* (2007)

Depression

- ☐ *The Visitor* (2007)
- ☐ *Scent of a Woman* (1992)
- ☐ *American Splendor* (2003)

Suicide

- ☐ *House of Sand and Fog* (2003)
- ☐ *The Hours* (2002)
- ☐ *Dead Poets Society* (1989)
- ☐ *Seven Pounds* (2008)