The media’s ability especially via newspapers to shape public perception of mental illness has been well documented. Newspapers are influential in transmitting key information and ideas, including social commentary. This is true for print editions as well as online editions. India is said to have the second largest newspaper market in the world with 16,993 newspapers registered with the Registrar of Newspapers for India as on 31st March, 2017 [1]. Data from the World Association of Newspapers and News Publishers reveal that India’s paid newspaper circulation grew 32% between 2013 and 2015 [2]. Hindi-language newspapers have by far the widest circulation with over of 314 million copies sold per day, but there are also publications produced in each of the 22 scheduled Indian languages and in several other languages spoken through the country [3]. After the falling broadband prices, fast internet speed and budget Smartphone boom in India, more and more people are consuming online news as well. A Comscore Inc. report in 2013 says Indian news and information websites drew an additional 9.4 million readers in August when compared with a year ago, a 34% increase [4].

Newspapers have a wider reach, cultural penetration and consequently, their role in reporting on mental illness is seen as one of the main conduits through which the public, especially those without personal exposure to mental illness, learn and come into contact with issues surrounding mental health. Thereby they play an influential role in shaping people’s knowledge, attitudes and behaviour towards mental illness. At the same time, reading a newspaper might also collateral offer distinct advantages to a mental health professional namely a psychiatrist, psychologist and the psychiatric social worker. A purely bio scientific model of illness offers only a circumferential viewpoint of human beings. Doctors often need a deeper understanding of their patients that takes account of their emotional, cultural and existential aspects. The stories about mental illness published can offer such a perspective and help mental health professionals see the world from another person's telescopic viewpoint. This is especially applicable to real life accounts of illness and suffering, chronicles that a common man can relate to Psychiatric patients often present in de-contextualised states. Imagine a patient presenting with a history of chronic alcohol dependence, significant withdrawal symptoms yet harbouring an indifferent motivation to abstain. In another scenario a young adolescent who has been behaving strangely is brought by anxious relatives, he believes in black magic that people are out to kill him, refusing to let the social worker into the house and the relatives believe spiritual factors are at play rather than biological. Imagine if you could now cite the example of a politician or a movie star in the news recently who passed away due to cirrhosis to press upon the need for de-addiction to the patient in the first scenario. Would it be of value in the second scenario to allude to the example of the 11 members of the Bhatia family who were found hanging in their Delhi residence presumably under the web of a delusional family member and a resulting suicide pact? [5]. How about the homicides of a family of four in Kerala in August 2018 where the perpetrator was convinced that the family had stolen his powers of black magic? [6]. Would these examples be one they could relate to? Would it help in educating the caregivers of the dire consequences that could follow if he...
does not receive clinical help soon and to explain the biological model of illness causation? Would it help them conceptualize the illness better and make them more amenable to the treatment offered?

Similarly, a patient’s vernacular, mental health vocabulary and illness behaviour can often be influenced by recent news events and the recognition of the same can help us become more sensitive to the nuances and subtexts of a patient’s communication. The wide spectrum of articles in the papers can help us understand diverse ethnic, religious and political groups in the circumference of our psychiatry practice. The health beliefs held by members of minority ethnic and religious communities have been proven to influence mental illness especially as determinants of help seeking behaviours and treatment strategies [7-8]. Further on, a few articles in the newspaper can sensationalize certain events [9-10], even depicting individuals with mental disorders as being aggressive and dangerous, reinforcing the stigmatisation and lack of acceptance of those with psychiatric diagnoses and increasing social distances [11-13]. Newspapers can help mental health professionals become aware of the context of such references from the patients, and the knowledge of these accounts can equip us to help the patient generate an alternative hypothesis for the concerned real-life accounts, avoid stereotyping, correct the inaccuracies, the skewed myths and destigmatize the concept then and there. A newspaper can thus serve as a medium for us to generate an antithesis commensurate to the patient’s thesis. In the process some stories might just even tug the necessary strings to galvanize the compassionate and humanistic instincts of doctors. The cross-sectional distress of a patient can evoke an affective and automatic response of empathy, a process referred to as “experience sharing” [14-15]. A contrasting source of empathy is one which involves consciously reflecting on another person’s experiences referred to as “perspective taking”, like for example journalistic stories generating empathetic responses from readers [16-17].

Newspaper stories that emphasise real life experiences of coping with adverse circumstances and a mastery of crisis have been found to decrease the suicide rates in individuals with increased vulnerability to suicide in the general population. This protective effect has been termed the ‘Papageno effect’ [18] in honour of the lead character in Mozart’s opera ‘The Magic Flute’. In the play when Papageno fears that he has lost his love, Papagena, he prepares to kill himself. But then at the last minute three boys save him by reminding him of alternatives other than dying. Would it be of value to cite the examples of an exemplar industrialist, a movie star or a cricketer, who in newspaper interviews have confessed to have overcome a mental health crisis and suicidal ideations in the past to now achieve laurels? [19]. Could such a careful assortment of positive messages dampen a select individual’s suicidal ideation or change personal beliefs of coping skills?

Another facet is how the fountainhead role of robust unified reporting of mental health articles can influence mental health policy and legislation, let’s take for example how the concurrent nationwide reports on the suicides linked to the blue whale game resulted in significant sensitization, multiple mental health related workshops were conducted in schools, a ban was imposed and it also sparked research into the psychobiological determinants of online gaming [20]. The Netflix TV show ‘13 reasons why’ was one of the most popular global hits of 2017, the show glamorized adolescent suicide and drew opinionated articles in some of the most prominent newspapers in India [21]. One of them even went on to report the surge of phone calls mental health facilities were receiving from concerned parents and teenagers as word spread regarding the circumstances of suicide of the lead character in the series [22]. This could well have been the case in several other centres in the country and an awareness of the various dimensions of the issue would definitely have helped professionals better cope with queries from concerned parents. Another growing trend is that of healthcare journalism and the covering of research articles published in journals and/or presented at national conferences by well circulated newspapers, helping mental health professionals from different parts of the country become cognizant about the contemporary waves in scientific research.

For mental health professionals involved in mental health policy making, in district mental health programmes or mental health review boards, a local newspaper could be a vital channel that helps them incorporate contextual factors, cultural and religious paradigms, community responses and the social
barriers enveloping mental illness while formulating policy changes and implementing locally tailored solutions. The newspaper also plays a role in keeping us abreast of the latest legal changes and their implications. The new mental health care act has received a polarized reception since being unanimously passed by the parliament in March 2017. While some politicians and civil activist groups have praised the new instalment; numerous psychiatrists, disability and human rights activists have voiced their concerns regarding the act through several prominent national and regional newspapers. These divided opinions can be a compelling variable in influencing public opinion and their perception of expected standards of care during treatment for a mental health illness [23]. Following this script via the newspaper can serve as a gateway for professionals to understand the relevance of the often contradictory yet coexisting standpoints of different groups, the nuances of the well-informed patient’s queries in the clinic and also the challenges that could lie ahead in the implementation of the act. Another recent example would be the initiation of decriminalization of Section 377-related to homosexuality, which was covered widely and in minute detail by newspapers, incorporating the personal, religious, political and judicial aspects, elucidating the various mental health issues which prevail in the LGBT community, a significant amount of which are secondary to psychosocial aspects-stigma and poor support systems [24-25]. This coverage helps sensitise us to the recent trends, thereby ensuring political and medico legal correctness, assisting in moulding oneself to the current times while dealing with sensitive issues related to patients in daily clinical practice.

One of the tasks facing the clinician is to find a story into which the patient’s abnormal / worrying behaviour can be fitted. We often ask a patient “What’s the story? “Or “How did it all begin?” The objective is to reassemble a narrative chain out of an apparently disconnected series of events, encouraging the patient to become the author of their own story—to consider what has happened to them and how they came to be here today This concept of learning through stories is a concept we are conditioned from as early as our time in school and a newspaper is a rich agglomeration of diverse stories, conveying implicit observations and explicit facts about one’s immediate environment. Similes, metaphors and analogies among others in newspaper sections such as editorials, commentaries, viewpoints, panorama etc – can be essential tools in this narrative process; providing the therapist with a means of communicating potentially complex psychological concepts to clients in a form they can more easily relate to. The right use of these tools might help patients put their illness in a context which helps give meaning to their apparently meaningless pain. They are much more than just a ‘figure of speech’; they are representative of a fundamental way in which we understand the world, and particularly, our own inner experiences. They govern the principle of ‘Lexicon’, wherein such grammatical rules help to merge words into logical sentences, using which abstract concepts can be conveyed effectively and made more tangible. An added benefit would be vocabulary acquisition and that these language attributes along with the construct of semantics, pragmatics and syntax in the articles might help improve our communication skills also, skills that are an integral part of psychiatric interviewing [26].

Newspaper as a resource is accessible to everyone but it is not one that everyone uses. Time is a precious resource for a health professional and the long hours spent in an often stressful environment might be the limiting factor in the utilization of this resource. However, over the last decade News conglomerates have dramatically revamped how we stay informed with the latest news. All the major newspapers of India have started their E-papers and news websites. Online news is transcendent, employs video, audio, and graphic elements in innovative ways. News content will be delivered to readers based on their expectations and not as a pre-determined “package”; users increasingly find them based on their preferences, interests and preferred delivery modes. Google News app is known for delivering most relevant news in the news feed by using Artificial intelligence techniques. The “For you” tab shows top headlines and news developments again with a personalized news list based on personal activity on Google platforms. Flipboard, In short and BBC news are some other popular online news apps that one can personalize to give one a crisp round-up of national as well as international news bulletins. Newspaper audiobooks have also come around which can be utilized while commuting to work. These applications can be easily downloaded, are simple to use and can be read on the go suiting even a busy health professional [27-29]. For others, apart from these online sources medical college libraries often subscribe to regional, national and international
newspaper prints. It might just be a welcome break from our digital screens too. It needn’t be that one has to read every word of every page and considering the menu driven torrent of sections in a newspaper, there must be at least one among these 12-15 sections that relates and identifies with the ambience of one’s psychiatry practice, columns that stick out to you, articles that can even be savoured rather than gulped, commentaries that can be read and re-read, insights that can weigh up to experiences and maybe in due course fatigue might no longer remain a limiting factor; paradoxically the habit of reading the paper might itself now serve as a restorative tonic for the fatigue. Imagine if you could discuss these readings at work with your peers, just processing the synthesised information and examining the essence of the thoughts behind these pieces before sharing it will provide a unique outlook and then the ensuing discussion might further generate an analysis of diverse data points. Imagine further on if someday there could be newspaper clubs for mental health professionals to help stretch its potential and maximize the learning benefits. It could serve as a lancet to the society and a way to tip our hats as professionals to the complexity of human problems at the centre of the community.

Psychiatry today is bestowed with a Persian bazaar of books and a lightning rod of research ideas, psychiatry is consistently inventing and reinventing itself and the only constant is the fabric of change. The drugs we use, the algorithms and practice guidelines we affirm to, the promise of evidence based medicine, the digitalization that we constantly chase might all become insufficient in 25 years from now, we will encounter problems we have not yet imagined, problems that do not have a precedent, problems that outclass algorithms, problems that require critical thinking, adaptability and for doctors to think like patients. This might require doctors to see things from a patient’s vantage point for example to read the same things a patient reads, to hear the stories that patients hear and to imbibe their perceptions of mental illness. There is a growing acknowledgement of the importance of the humanities in psychiatry, and perhaps this is part of a wider trend that recognises the empirical gaps of a purely biotechnological approach to patient care. It simply won’t do to find the patient having multiple relapses to alcohol use, a poor motivation to quit and then to start the latest anti craving agent or to diagnose schizophrenia and start the latest anti-psychotic. We need to pay close attention to the patient’s story and the context in which he appears as well, an approach that will enable us to respond empathetically to his own unique experiential landscape. Sir William Osler once said “It is much more important to know what sort of a patient has a disease than what sort of a disease a patient has”. Since Oslerian times we have developed cutting edge tools to help us in understanding the disease better-genomics, imagining, wireless health, biomarkers; artificial intelligence; but we have made very few strides in developing tools that will help us in understanding the patient behind the disease better. Tools like the newspaper might be an underutilized appliance in this process and could help us cultivate an emotional resonance to patient care, an exercise in empathy, stimulating critical thinking, a reflective moral imagination and a cultural competence. It is important to know the DSM, ICD the Kaplan and Sadding and the Rutter’s but if you want to stay ahead of the curve you might just have to know the newspaper too.

REFERENCES


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