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Academic Focus Essay: The Stigma Surrounding Mental Health

Introduction

“The stigma surrounding mental health illness is an important issue that affects the likelihood of diagnosis and uptake of services, as those affected may work to avoid exposure, judgment, or any perceived loss in status associated with their mental health illness” (Kearns, Muldoon, Msetfi, & Surgenor, 2017). The diagnosis and recovery process is just a portion of the overall mental illness, for there are many other factors that tie into it. The road to recovery for people affected by mental illness is not often a straight path; it is rather bumpy and rough. The stigma placed on mental health makes the road to recovery harder for people. Others have never had first-hand experience or known someone with a mental illness, which can cause him or her to be unaware of the stigma. Professionals and advocates for mental health are trying to reduce the stigma. Mental health should be commensurate with medical care. Most likely when a person visits the doctor for a medical concern, he or she will not be judged for seeking the help. When it comes to getting help for mental health, people are judged.

Mental health should be just as valued as physical health; therefore, if a person has a mental illness it is important for the person to seek professional help. Various forms of therapy such as talk therapy, medication, and inpatient programs are several of the different ways people can acquire help. “Stigma yields two kinds of harm that may impede treatment participation: it diminishes self-esteem and robs people of social opportunities” (Stull, McGrew, Salyers & Ashburn-Nardo, 2013). Mental health stigma creates a barrier for people who want or need help. Part of the barrier comes from people associating term “mental health” with being insane, crazy, or even being deemed unsafe for the community. People will then conceal their mental health issues in order to avoid being labeled as such.

The awareness for mental health has been a growing initiative: The need to fight stigma and discrimination has also been acknowledged by the psychiatric profession...These programmes shared common aims in seeking to increase the awareness and knowledge of mental illness and treatment options, improve public attitudes towards people with mental illness and their families and generate action to eliminate discrimination and prejudice.
(Corrigan, 2004)

With widespread awareness, the stigma involving mental health will significantly decrease. This decrease will positively impact those who are affected by mental health.

“Stigma involves many factors, including stereotypes, prejudice, and discrimination” (Schulze, 2007). Ending mental health stigma could make a huge impact. Unfortunately, the awareness and resources are very limited. Within mental illnesses, there are numerous different types of illnesses. Several of the more common mental illnesses are depression, post-traumatic stress disorder, anxiety disorders, bipolar disorder, and eating disorders. Each type has its own stigma built

around it. The study I have conducted and research I have done will cover the issue of the need to break stigma around mental health, how the stigma affects people, and the awareness of the stigma.

Methods

To gather primary information on how much people knew about mental health stigma, I conducted a survey. I emailed the survey to 40 male and female students at Anderson University. The survey was also posted on Facebook and Twitter. Posting the survey on social media made the survey more randomized. The demographics of those who took the survey through social media varied more. A participant was 57 years old and others were eighteen. The respondents answered 12 questions through multiple-choice, rating formats, checkbox answers, and a few open-ended questions. The questions discussed the knowledge and awareness of mental health stigma.

Results

My primary study results indicate that although most people know what mental health stigma is, not everyone does. Out of the 40 people I emailed, there were 12 respondents. Through social media, there were 9 respondents. The people who were aware of mental health stigma either agreed or strongly agreed that people are affected by it. One question focused on ways mental health stigma can be demonstrated. A respondent stated: “Having a premade assumption about someone with a mental illness. For example, someone treats a depressed person as if they were going to harm themselves right then and there.”

Ninety percent of the respondents agreed that mental health stigma can make the illness worse and that we need to reduce the stigma. The participants are aware that mental health affects people. They were asked to give an example of this. One example from a participant was: “It affects how people perceive those who have mental health diagnoses and it can invalidate their struggles.”

The next questions looked at whether the survey takers themselves have ever been affected by mental health stigma and how to help reduce the stigma. Sixty percent of the participants reported that they have been affected.

Mental health can be defined in several different ways and still be considered accurate. Within this survey I asked the participants to define mental health in their own words. An example of a response was: “Psychological wellness.”

The last two questions on the survey were the gender and age of the participant. These variables are good to look at with the statistical outcomes and comparing age or gender with what they know about mental health stigma. The majority of the participants were female. Only 20 percent of the respondents were male. 80 percent of the participants were 18-19 years old and the other 20 percent were 24 and 57.

Discussion

Imagine if society blamed people for being diagnosed with an illness such as cancer — claiming it was their choices in life that led to the disease? This would make him or her feel guilty about the situation, that they in no way deserved. This is common to people who have a mental illness, but with the added burden of shame. Considering that 18% of people living in the United

States of America suffer from a mental illness, why is it that we hardly hear about it? Why is there so much judgment and misunderstanding surrounding the subject? People with a mental health issue are often viewed as the outcasts of society. This causes it to be much more difficult to admit their issue and seek help. To have a better understanding of mental health, the stigma around it has to be lifted.

There are several ways that people who have mental illness are put-down or degraded. Most commonly, people are stated to be depressed, rather than someone who has depression. There is degrading language that just floats around society that makes having a mental health illness “cool” or “popular.” This causes people who actually have the mental illness to feel embarrassed and dehumanized. The most common misconception is that they should be feared or looked down upon. Breaking the stigma can help raise awareness of the true effects that mental illnesses have and the way to talk about them.

If the majority of people looked down upon you for something you needed help with yourself, would you still want to get the help? This is a reoccurring thought of people who are needing to seek treatment for their mental health but are too scared to. It takes a lot of courage for someone to get the help. Society makes them feel like outcasts and that they will be looked down upon if they get diagnosed with a mental illness. The stigma should be broken. If it were to get truly broken, people would be able to seek treatment just as someone who was going to the doctor for having the flu. This would be an amazing change.

For example, Lia was a young adult who was suffering from her mind, but she was not sure exactly how to overcome what she was going through. She had been dealing with terrible thoughts and even got to the point of self-harm. Lia was aware of the stigma built around mental health and was too scared to ask for the help she needed.

This continued for several years until her mental illnesses lead to an eating disorder, which then led to a suicide attempt. The suicide attempt was what drove her to seek help. The medical professionals had to get her the psychiatric help she had needed for years. It is absolutely absurd that in order for someone to get the help they need, they have to be standing face-to-face with death. If the stigma around mental health never escalated in society as much as it has, she might have been able to seek help long before it had gotten to that point.

Lia is my best friend. So, yes, this story is true, it is not a glorified story like in the popular Netflix show *Thirteen Reasons Why* that deals with teen suicide. Thousands, maybe even millions, would benefit if mental health stigma was removed from society. People need to make others feel comfortable about getting help when they are not mentally well. If this was as common as it should be, I believe Lia would have never gone as far as she did. After doing this research, I can firmly confirm my belief that the mental health stigma is a major issue and needs to be stopped.

Conclusion

There were several negatives I found throughout my research. Without the stigma, sadly not as much awareness would be created in today’s society. Also when it comes to stigma, everyone tends to blame everyone for everything. There needs to be open communication about it. The open communication would allow for people to really dig in deep and talk about mental health. Educating

people about mental health has endless benefits for people and all societies. By educating people, others would be able to help each overcome and get help so they do not go down the same path Lia did.

Further research could be done to look at specific mental illnesses and how each stigma around them happens in society. It might help bring awareness to people all over the world so they are aware of mental health. Everyone is aware of what cancer is but are they aware of schizophrenia? With this further research and awareness, the stigma on mental health could be broken forever. Think about it: a world where people can openly talk about their mental health without having to even think of the stigma.

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Appendix 1

This survey asks the participants about their knowledge on mental health stigma and how they feel about it. The questions were multiple-choice, rating formats, checkbox answers, and a few open-ended.

1. Do you know what mental health stigma is?
 - a. Yes
 - b. No
2. Do you agree that people's mental health is being affected by stigma?
 - a. Strongly agree
 - b. Agree
 - c. Neither
 - d. Disagree
 - e. Strongly disagree
3. In what ways do you think mental health stigma can be demonstrated?
4. Do you agree with this statement? Mental health stigma can make problems worse.

- a. Strongly agree
 - b. Agree
 - c. Neither
 - d. Disagree
 - e. Strongly disagree
5. Do you agree with this statement? We need to reduce mental health stigma.
- a. Strongly agree
 - b. Agree
 - c. Neither
 - d. Disagree
 - e. Strongly disagree
6. How do you think mental health stigma affects people?
7. Have you ever been affected by mental health stigma?
- a. Yes
 - b. No
 - c. Prefer not to say
8. Define mental health in your own words.
9. How would you challenge mental health stigma?
- a. Tell a professional
 - b. Speak up for someone
 - c. Give support to someone
 - d. Challenge a person's view
 - e. Raise awareness
 - f. You Wouldn't
10. What would be the best way to raise awareness on mental health stigma?
- a. Posters
 - b. T.V.
 - c. Radio
 - d. Texts
 - e. Websites
 - f. Class Course
11. How old are you?
12. Gender
- a. Female
 - b. Male
 - c. Other

The Mental State of the States: Cultural Issues Annotation

The mental healthcare system in the United States is a multibillion dollar industry that is still not big enough to serve all those who need it. Not only are the costs of treatment a big barrier, but so are the attitudes towards mental health. Prescription medicines and outpatient services simply aren't doing enough. In a time where addiction is ripping families apart and students no longer feel safe going to school, we need to focus more on addressing mental health issues and providing services and sources for those who may be silently suffering and those who are crying out for help.

Working in the emergency department at Community Hospital Anderson, we receive many patients who are suffering from addiction, suicidal ideation, and other various mental disorders. While we can treat them at that very time, most need extended treatment like detoxification facilities and inpatient programs. The trouble with this lies between insurance companies, funding, and availability of facilities. Most facilities don't take all insurances which cause the patient to have to pay out-of-pocket. Even then, treatment is in such high demand that facilities simply can't keep up. This is why I believe that we need to focus more on our nation's mental health state.

American Psychological Association. (n.d.). Growing Mental and Behavioral Health Concerns Facing Older Americans. Retrieved from <http://www.apa.org/advocacy/health/older-americans.aspx>

The elderly, like other generations, are in desperate need of mental health care. Nearly 20 percent of adults over the age of 55 suffer from a mental disorder with two-thirds of those in nursing homes having mental and behavior issues. With that being said, only about 3 percent are seeking medical help. Some reasons are due to underfunding, access barriers, denial, the stigma surrounding mental health, and the lack of trained professionals to work with the elderly population.

I think there's a lack of coordination between the primary care, mental health, and aging service providers. If a patient goes to their primary care physician with recurring urinary problems (incontinence or urinary tract infections) the doctor should also be consulting with a geropsychologist who will provide preventions, assessments, consultations, and intervention services that may be able to keep the patient from having these issues and frequent visits to their doctor.

Roughly 20 percent of the elderly population and 37 percent of those who live within nursing homes suffer from depression, which may lead to suicide. Even though the elderly population only makes up about 13 percent of the total population, they are responsible for about 20 percent of our suicides. Many people aren't aware that the elderly have the highest suicide rate among any other age group.

And lastly, private insurance companies have found loopholes to avoid covering mental illness, making it less affordable even for patients that have Medicaid or Medicare insurance. Because of this, physicians may not prescribe a patient the psychotherapy they need because it does not come with the same reimbursement as prescription drugs. It seems that the majority of it boils down to money: the root of all evil.

Dauphinais, D. (2017, June 22). Getting Mental Health Care Shouldn't Be This Difficult. Retrieved from https://www.huffingtonpost.com/dean-dauphinais/getting-mental-health-hel_b_10573100.html

Working in the emergency department I see many people who come in with suicidal ideations, nervous breakdowns, and even after suicide attempts. Of all of the patients that we see, these patients tend to have a longer stay in our department. This is due to the lack of social workers to get the resources and help that these people need. We don't have a mental health facility within our hospital, so our patients must have a video conference with a psychologist or psychiatrist in order to determine the kind of help they need. We are not the only facility they work with, so some patients have to wait hours in order to speak to someone.

In the case of the 26-year-old this article speaks of, he and his family had to wait for 12 hours before they were able to talk to a social worker. Can you imagine how the patient and his family felt during those long hours? Once they were able to speak to the social worker they agreed to get him into a partial inpatient program where he would spend the day in treatment and go home at night. Sounds good, right? However, there was a 5-week wait to be admitted into this program. Not only do we need to staff our hospitals with more social workers, but they need to also have more behavior and mental health facilities to treat those who are in desperate need.

What is this family supposed to do in the meantime while their son no longer wants to live? Being a mother myself, I don't ever want to go through something like this with one of my children and feel so helpless when it comes to my child's wellbeing.

DeFreitas, S. C., Crone, T., DeLeon, M., & Ajayi, A. (2018). Perceived and Personal Mental Health Stigma in Latino and African American College Students. *Frontiers in Public Health*, 6, 49. <http://doi.org/10.3389/fpubh.2018.00049>

It is thought that ethnic minority groups, who already suffer prejudice and discrimination because of their group affiliation, suffer double stigma when faced with the burdens of mental illness. This is why members of these ethnic minority groups who suffer from a mental illness may choose not to seek treatment. According to this article, the main reason why they feel this way is misinformation about mental illnesses. Research also shows that if these groups are more acculturated, then they are more likely to seek treatment. This reduction in stigma may be due to obtaining knowledge of disorders as a part of becoming more familiar with the American culture.

In this study, 122 participants made up of 47 African-Americans and 75 Latinos took handwritten surveys about the stigma around mental illness. Both ethnic groups were similar in all categories except for African-Americans exhibited significantly higher perceived stigma than Latinos. It's sad to think that someone would forgo seeking treatment out of fear of what their peers would think. Common stigmas include that the individuals with mental illnesses "are dangerous, will never recover, and that their mental illness is their own fault." It's devastating to know that people actually believe this and that there is a lack of education to abolish this misconception.

Gold, J. (2017, November 30). Health Insurers Are Still Skimping On Mental Health Coverage. Retrieved from <https://www.npr.org/sections/health-shots/2017/11/29/567264925/health-insurers-are-still-skimping-on-mental-health-coverage>

Gold reports that it has been about 10 years since Congress passed the Mental Health Parity and Addiction Equity Act. This was their promise to make mental health and substance abuse treatment easier to get access to just like other health conditions. Patients are still struggling today to get access to treatment despite our spike in suicide rates and the opioid epidemic. With that being said, in 2015 mental health care was 4 to 6 times more likely to be provided out-of-network than

medical or surgical care, causing a significant barrier as most cannot afford to pay out-of-pocket. How is this making it easier to get access to? Professionals in the mental health field receive low reimbursement rates, which causes them to not contract with insurance companies. It has also been said that primary care providers are paid more than mental health providers. On one hand, I can understand why they don't contract with insurance companies, but on the other hand, it all comes down to money which is selfish on their part. I understand that it is a business, but we are talking about the mental state of our citizens.

Gruber, J., & Saxbe, D. (2018, February 27). Five Improvements We Should Make to Mental Health Care-Even if They Won't Prevent Gun Deaths. Retrieved from <https://slate.com/technology/2018/02/how-to-fix-americas-broken-mental-health-care-system.html>

According to Gruber and Saxbe, we as a nation need to stop blaming every bad thing that happens on mental illness. This puts a huge stigma on mental health and may prevent some from seeking treatment out of fear of being judged. In a time when mass shootings seem to happen on a weekly basis we need to look further into the problem: quit blaming mental health and start looking more into the gun laws. An ABC News poll showed “Americans by a 2-to-1 margin blame mass shootings mainly on problems identifying and treating people with mental health problems, rather than on inadequate gun control laws.”

Research has shown that those who suffer from mental illness are more likely to fall victim to violence rather than committing it. Another study showed that gender and race were stronger predictors of violence potential in people rather than mental illness. Does this come down to blaming social media or the news for this stigma? I'm not saying that none of the people behind the recent mass shooting didn't suffer from some type of mental illness. As a matter of fact, one in four people have some sort of mental disorder. That doesn't mean we can blame it for their actions but look deeper into the issue: like stricter gun laws.

The United States incarcerates the most people compared to other developed countries with most of its prisoners suffering from mental illness. In 2016, a study showed that more people who suffered from mental illness could be found in jail rather than a treatment facility or a hospital. With that being said, very few jails offer any type of psychiatric services and people wonder why prisoners who get released seem to go right back in! They aren't getting the help that they need.

For example, a 16-year-old boy with seven diagnosed mental disorders stabbed his dad's girlfriend. The judge ordered him to have a psychiatric evaluation, but due to the lack of availability he spent 1,266 days in jail without being evaluated. Instead, authorities placed the boy in solitary confinement, which worsened his symptoms. To me, this is unacceptable! There needs to be more resources for those who are incarcerated, especially if they are expected to be released. How do we expect them to return to the general population as a “changed” person when they were just locked up and no treatment was available to them?

Some may argue that incarcerated people shouldn't get treatment that the taxpayers will have to fork over for when people in the general population aren't able to get it for various reasons. I agree that it seems a little foolish, but the incarcerated are humans too and also deserve the right to have access to medical treatment.

Johnson, S. R. (2017, October 30). Study finds providers lack resources to stem opioid crisis. Retrieved from <http://www.modernhealthcare.com/article/20171030/NEWS/171039983>

Johnson reports, “New research suggests providers need mental health resources to address conditions and trauma that plague more than half of patients who visit emergency rooms for drug misuse. Experts say identifying and treating mental illness could effectively stop people who misuse drugs from relapsing in their recovery.” So, what researchers are saying is that if we treat the underlying problem, we could hopefully stop this ongoing opioid epidemic. But how do we make sure that these patients get the treatment that they need?

Back in the early 1900s, those who were deemed to have a mental illness were committed to asylums, often against their will. Do we need to go back to that? Do we need to start committing people to make sure they get the help they need? It may sound a little barbaric, but we need to put a stop to this accelerating epidemic. At this point, there’s no end in sight.

Having clinicals for my nursing class at the Anderson Center opened my eyes to how bad it really is. Most of these people wanted to get help but fell short of finding a facility that had room for them or that they could afford. Maybe now is the time that we start looking into opening more state hospitals.

Mental Health America. (2016, July 14). Lesbian/Gay/Bisexual/Transgender Communities and Mental Health. Retrieved from <http://www.mentalhealthamerica.net/lgbt-mental-health>

According to this report, in mental health care, lack of cultural sensitivity, stigma, and unconscious and conscious reluctance to address sexuality may impede the effectiveness of care. Research suggests that lesbian/gay/bisexual/transgender (LGBT) individuals face health disparities that are linked to societal stigma, discrimination, and the denial of their civil and human rights. Discrimination against LGBT persons have been associated with high rates of psychiatric disorders, substance abuse, and suicide. Not only do these people fear backlash while out in the public, but over 1 in 5 LGBT individuals report that they withhold information about sexuality and sexual practices from their doctors. Besides your very best friend, your doctor should be someone that you should feel comfortable confiding in, especially when it comes to the things that have a big impact on your health.

Not only are LGBT individuals withholding information, about 30 percent of transgender persons avoid or postpone seeking medical treatment due to disrespect or discrimination. Reasons behind the avoidance are due to providers denying care, using harsh language, or blaming the patient’s sexual orientation or gender identity as the cause for an illness. This simply has to stop. Your sexual or gender preference should not affect the manner in which you receive medical care nor should it be the reason for avoiding treatment. Not only are these people possibly doing more harm to themselves by not seeking treatment, but they are also being affected and suffering mentally.

Ornstein, N. (2016, June 08). How to Fix a Broken Mental-Health System. Retrieved from <https://www.theatlantic.com/politics/archive/2016/06/getting-mental-health-on-the-docket/485996/>

Ornstein discusses that during John F. Kennedy’s presidency, the Community Mental Health Act of 1963 made it so mental health patients in state hospitals would be released back into the community and able to attend community health centers instead. This seemed like a good and humane idea, but the fact that there was a lack of community health centers didn’t help the matter. In 2013, 90 percent of the beds in the state hospitals have been eliminated leaving those left untreated to the streets, jail, or prisons. More than half of the community health centers which were

proposed were never built, meaning many states pocketed extra money from closing down their state hospitals and never replacing them.

If these centers were built and adequately staffed this could be the first stop for someone in a mental crisis instead of it being in jail. Jails are staffed with personnel who are untrained and quite often hostile. There is awareness out there for more facilities, but again it boils down to reimbursement from the insurance companies. Either they don't cover the services or the facilities aren't reimbursed enough to cover the services. So facilities may require patients to pay out-of-pocket, which, let's face it, those who are homeless or addicts will not be able to afford—care that they inevitably need.

The mental health crisis and the opioid crisis are closely tied together as the vast majority of those with a serious mental illness will have a dual diagnosis, which includes drug issues that inevitably lands them in jail or prison. It's a vicious cycle that needs to end in order to save one of our most vulnerable populations.

Snow, K., & McFadden, C. (2017, December 12). What's happening to our kids? America's youngest facing mental health crisis. Retrieved from <https://www.today.com/health/america-s-youngest-generation-facing-mental-health-crisis-t119914>

According to Snow and McFadden, our youngest generation is currently facing a mental health crisis. The Centers for Disease Control and Prevention (CDC) reports that 1 in 5 American children ages 3 through 17 have a diagnosable mental, emotional, or behavioral disorder in a given year. Of those, only 20 percent of them get diagnosed and seek treatment, meaning 80 percent still need help. Suicide rates among teen girls have reached a 40-year high in 2015 and nearly 5,000 young people take their own lives every year here in the United States.

What do we think contributes to such high rates and why aren't more adolescents being treated? Research has shown that depression can start in children as young as 2 to 5 years old and that adolescence is one of the most vulnerable times to develop depression and anxiety. Parents and teachers need to be more educated on the warning signs of such mental illnesses to help diagnose them early. This raises the question: should schools have to do more as far as educating students on mental/behavior disorders and how prevalent they are?

Studwell, K. (n.d.). The Mental Health Needs of Veterans, Service Members and Their Families. Retrieved from <https://www.bing.com/cr?IG=B83FF2A517F4435486256CBACF210DD5&CID=3CAB207EBF0360612B092BB4BE4C6186&rd=1&h=oqgAoEjt-etvKOYz2-iCwFpWsXc2AZF3JaYVWG8TD2U&v=1&r=https://www.apa.org/advocacy/military-veterans/mental-health-needs.pdf&p=DevEx,5068.1>

Studwell reports, “Over 2 million Americans have been deployed to Iraq and Afghanistan over the past decade and increasing numbers are returning home with complex mental and behavioral health challenges.” Service members who are returning home are facing many obstacles while trying to reintegrate back into the civilian society. Some are experiencing post traumatic stress disorder (PTSD), experienced traumatic brain injuries (TBI), while some suffer from suicide ideation and actually go through with it. We could only imagine what these brave souls had to endure and witness while defending our country.

Making one of the biggest sacrifices for our country, you would think they would have top-notch health care. Wrong. A 2013 report stated that there simply weren't enough facilities or

workers able to keep up with the high demand these mentally wounded soldiers simply needed. Of those that were working to help the soldiers, many of them lacked sufficient training in evidence-based practices, ultimately not being able to provide that top-notch help we all think they need and deserve. If we consider ourselves such a “patriotic” country, then don’t you think we should be making sure our military servicemen and women deserve proper mental health services?

Dead Poets Society: Hopeless without Christ

The room is dark. Neil walks to the window and picks up his wreath crown from playing the character of Puck in Shakespeare's *A Midsummer Night's Dream*. He places it on his head, looking out the window into the chilly winter night. Dramatic music is heard in the background, contrasting with the forlorn darkness of the scene. Neil slowly bows his head to his chest, as if he is offering a final bow to his existence. He is acknowledging the sacrifice he has to make. If Neil cannot keep his dream of acting alive, he cannot live and go on without it. He creeps to his father's office, drawing a gun out of a drawer in the desk. Neil Perry's last act was one that made a significant impact on everyone close to him, for better or worse.

A film of a genre all its own, blending comedy and drama, *Dead Poets Society*, produced in 1989, evokes serious reflection on the purpose of life. Everyday experiences are contemplated, ideals are challenged, and aspirations are evaluated through this masterpiece of a film. *Dead Poets Society* offers incredible acting and tangible portrayals of the personalities of students and teachers at Welton Preparatory School. Robin Williams, especially, produces excellent theatrics as a new English teacher determined to remove all standards of conformity through his teaching. It also displays nearly every emotion imaginable as feelings and conflicts within each character are explored.

Two primary actors in *Dead Poets Society*, Josh Charles as Knox Overstreet and Robert Sean Leonard as Neil Perry, portray youthfulness and enthusiasm at Welton, despite Headmaster Nolan's (Norman Lloyd) strict standard of order and conformity. The boys challenge any and all rules and ideals with their rambunctious spirits. While visiting a family friend, Knox meets the dreamy Chris Noel, a girl he cannot get over. To his dismay, Chris is dating another boy, but with the encouragement of his classmates and great determination, he convinces Chris that she deserves more than a lame football player and should give him a chance. After hearing about an old club called the Dead Poets Society from a new professor, Neil sets out to reinstitute it with a few of his classmates. Participating in the Society gives the boys a free outlet to share their thoughts and ideas, whether they relate to poetry or not. Although Headmaster Nolan disapproves of the reinstitution of the Society, the boys choose to hold meetings, ultimately resulting in the expulsion of Charlie Dalton, an active member of the society, and the severe punishment of other members. Josh Charles and Robert Sean Leonard portray the wild and adventurous roles of Knox and Neil flawlessly, creating relatable and endearing characters.

An early scene in which their acting stands out includes the play, *A Midsummer Night's Dream* in which Neil Perry defies his father's orders by starring in the lead role, Puck. The scene is an emotionally tumultuous one, as it reveals the stark contrast between the joy and freedom Neil experiences as he performs and the utter disappointment of Mr. Perry at his son's passion for acting. Neil delivers his lines with keen sensitivity and delight, capturing the audience's attention with each word and movement as he seems to embody Puck himself. As Mr. Perry enters the theater, Neil falters, surprised to see his father. There is hope that Mr. Perry will recognize his son's talent and passion and realize his injustice toward Neil, as he sees his son pursuing his dreams, free and full of

life. Unfortunately, Mr. Perry remains hardhearted and determined to enforce his own plan for Neil's life. Mr. Perry's resolve to control his son's life and Neil's inability to stand up for himself and defy his father ultimately lead to Neil's suicide. In his final minutes, the anxious boy musters enough courage to make a poignant statement. As he undresses for bed, Neil's eyes fall on the crown he wore as Puck in *A Midsummer Night's Dream*. He carries it to the window, places it on his brow, and drops his head, signifying his final bow as an actor, a student, and a boy.

Although the film's aspects of acting and emotion are impressive and impactful, the underlying lack of Christianity, and therefore hope, is strikingly obvious. This absence leads to tragic decisions, especially Neil's suicide. Because the boys at Welton were not taught the value in suffering through difficult situations, and that such suffering would produce good character, they had no hope. In Neil's case specifically, his depressing experience of being denied the freedom to pursue acting caused him such unbearable pain and hopelessness that his only recourse was to commit suicide. He was desperate to escape his father's grasp, even though that escape meant death. If only Neil knew that Christ could offer him hope, reason to live, and strength to fulfill his calling. If only he understood his value in God's eyes. Then, he could have had the courage to carry on. Without any Christian values, bleak situations were encountered and hard decisions had to be made without guidance. While Mr. Keating spoke of "seizing the day," he failed to equip his students with the tools to do so when they encountered various obstacles. In contrast, the Bible offers abundant instruction on living life to the full in the midst of persecution and adversity. *Dead Poets Society* is an inspiring film through which exemplary acting and thought-provoking themes are revealed, but it falls short in portraying a truly redemptive message.

To Kill a Mockingbird: What is Justice?

“Do you swear to tell the truth, the whole truth, and nothing but the truth?” As one witness after another swears to uphold this oath, it becomes increasingly evident that some of the witnesses are not telling the “whole truth” at all. As Tom Robinson sits before the court, he stands against immeasurable odds, odds only defined by the color of his skin. As the camera pans out, we notice that Robinson is the only black man seated on the main floor of the courtroom. His fellow African Americans are forced to be seated in the balcony. Before the trial begins, he is convicted in the minds of the jury just for being black. The stark and deeply divided court room provides an illustration of the prevailing culture and attitudes of Alabama in the 1930s.

This compelling film, *To Kill a Mockingbird*, was released in December of 1962. Our view as Americans of this film is much different today in comparison to the audience who viewed it for the first time in 1962. When the film was released, segregation and prejudice were leading components of the culture. The black man always lost. Even when conscience clearly spoke to the contrary, the status quo prevailed. The film seems almost irrelevant to the mindset of present day American thinking. Furthermore, though the film was riveting emotionally, it contained little action or dramatic content to hold the attention of the audience. Despite the shortcomings found in the film, there were several aspects worthy of the viewer’s attention. The film achieves its greatness by way of the superb acting of the cast, the theme of the status quo prevailing over the conscience of the people, and the multiple meanings of the analogy “it is a sin to kill a mockingbird.”

The talent of the actors in this film is simply inspiring. Each individual brought a unique element to the film that set them apart. Three of the actors who provided an especially stirring performance were Gregory Peck as Atticus, Mary Badham as Jean Louise Finch, (referred to by her nickname, Scout), and Phillip Alford as Jem Finch. Gregory Peck possesses an incredible talent for speaking few words while still depicting emotion through his mannerisms and actions. The dignity he portrays through his silent strength and few words is phenomenal. He displays this strength in the scene that takes place outside the home of Tom Robinson. As a drunken Mr. Ewell approaches him, Atticus stands silent and steady. The constancy of Atticus causes Mr. Ewell to lose his courage. In addition, Mary Badham, who acts the part of the young narrator, Scout, portrays her character in a way that seems very true to reality. Scout is a young, curious girl with endless questions and comments. It is never easy to capture the essence of youth when given only a script of words. Mary Badham displayed both the innocence and strength of the perspective of a child. Thus, her nickname, Scout, seems appropriate as she is both observant and full of questions. If we reflect upon the scene outside the jail before the trial takes place, Scout’s innocence is evident as she unknowingly confronts the mob gathered before her. The third actor worthy of mention is the multi-talented individual who plays the role of Jem Finch, Phillip Alford. Through his character, Jem, he exquisitely depicts the battle of boyish curiosity giving way to the maturity of a young man. Jem transitions from a childish curiosity in his mysterious neighbor in the beginning of the movie to

a mature understanding of the implications of the unfair verdict against Tom Robinson towards the end of the movie.

Throughout the film, we continually see how the status quo prevails, despite the best judgment of the conscience. As Jem and Scout learn increasingly more about their neighbor, Boo Radley, they are faced with a decision. Will they choose to see Boo for who he is, or will they judge him by the rumors spread by their neighbors and fellow town members? In comparison, the jury is faced with a similar decision, but their perspective is more clouded than that of the children. Will they listen to their consciences, the knowledge of the truth, or will they allow the prevailing prejudice of the culture to determine their judgement? It is made clear throughout the movie that the children, surrounded by the palpable atmosphere of prejudice in their town, have not personally adopted this prejudice. During the trial, they willingly sit in the balcony along with the black people in attendance. Metaphorically, from their balcony perspective, they are able to see deeper than the surface and into the character of the person. In fact, prejudice is a concept they cannot even understand.

The analogy of the mockingbird is referenced many times throughout the movie. The character of Atticus possesses an unchallenged judgement of right and wrong. He passes judgement against the metaphorical “blue jay” and for the “mockingbird” through the entire movie. This judgement is illustrated when deciding that Tom Robinson is innocent and worth defending, despite the criticism he receives from his peers. In contrast, Atticus takes the life of the sick dog in the middle of the street. He turns to his children, Scout and Jem, and asserts, “Stay away from him. He’s just as dangerous dead as alive.” Atticus seems to have an infallible sense of those who are harmless, and those who are dangerous. Finally, toward the end of the movie, both the children and Atticus are faced with the most important judgement of the movie. Should Boo Radley be exposed as a murderer? It seems a dishonor to expose the selfless sacrifice of Boo as a criminal act. At this time in the film, Scout fully understands the meaning of this film’s title. She looks into the eyes of her father and declares, “It would be a sin to kill a mockingbird.”