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Melissa Bayer
Therapy Portrayal in the Media:
Exploring How Viewing Scenes of Therapy
In Film and Television Affect
a Person's Decision to Seek Therapy

ABSTRACT

The purpose of this study was to explore how viewing media representation of therapy, expressly film and television, can affect a person's willingness to attend therapy. This study also explored a person's perceptions of media on their beliefs about therapy and what scenes of therapy and therapists impacted them. Our current society is saturated with media messages and this study looks to explore how the constant amount of media can influence us and affect our decisions, such as attending therapy. Scenes of therapy have long been portrayed in the media and frequently continue to be in the media. Fifty people took a mixed-methods survey which asked questions about how they believe watching scenes of therapy impacted their willingness to attend therapy. Questions were also asked about which scenes of therapy and which specific therapists made an impact and why. The findings indicated that half the participants said they had a more negative image of therapists after watching scenes of therapy in the media and half had a more positive image. Recommendations for future research are discussed as well as the importance of the study.

THErapy PORTRAYAL IN THE MEDIA:
EXPLORING HOW VIEWING SCENES OF THERAPY IN FILM AND TELEVISION
AFFECT A PERSON'S DECISION TO SEEK THERAPY

A project based upon an independent investigation submitted in partial fulfillment of the requirements for the degree of Master of Social Work.

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Smith College School for Social Work
Northampton, Massachusetts
2014

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CHAPTER I

INTRODUCTION

{Tony urges Dr. Melfi to get out of town for a while}

Dr. Melfi: I have patients who are suicidal!

Tony Soprano: Well they're not gonna feel any better about their life if you get clipped.

In looking at a scene from the popular television program "The Sopranos", one can see how dramatized therapy is on television. This study will examine how therapeutic interactions with clients are portrayed in the media (film and television) and how watching these scenes of therapy might effect an individual's perception of therapy and whether they seek therapy or not. My research question is: How do portrayals of therapy in film and television affect an individuals perception and expectations of therapy and whether they will seek therapy or not?

The significant impact of media on our society makes this a relevant area to research. People increasingly depend on the media, specifically film and television, to access information and whether unconsciously or not, it does shape their opinions and views on the world. Film and television are easily accessible in our society. Hyler (1988) speaks to the importance of psychotherapy portrayal in films, "since this is often how our patients, and their families, form their image of us" (p. 205). In Kulick and Rosenberg's (2001) empirical study, they tested alcohol outcome expectancies, by showing college students film clips of people using alcohol with either positive, neutral, or negative outcomes. Kulick and Rosenberg then evaluated the expectancies of the students about alcohol use by using the Comprehensive Effects of Alcohol Scale. They found that students who watched the positive clips, endorsed more positive expectancies of alcohol, indicating that media does have an effect on decision making (Kulick & Rosenberg, 2001).

There is a reciprocal relationship between the media and our daily lives, in terms of how the media and the public influence each other. According to Nielsen's statistics, over 99 million

homes in the country have televisions. Although it is known that TV and film have an influence on our society, there are few studies that speak to the influence of media on how viewers perceive therapy. The current study will help explore this topic further. This study will help mental health professionals to see how they are being portrayed in the media and how these portrayals affect the way potential clients and current clients see them.

In learning of our clients' preconceived notions of therapy, we can help to address these expectations. The intended audience of the study findings will include all mental health professionals since it is relevant to clinical practice. Following is a review of the literature outlining the impact of media on society and then a review of the empirical literature concerning how media influences peoples perceptions of therapy. When I use the term media, I am specifically speaking to U.S. film and television. When I am speaking of therapy, I am speaking to any therapeutic interactions with a licensed professional, such as a social worker, psychologist or family counselor. This study is a mixed methods study done completely on the Internet by using a survey, and has 50 participants.

CHAPTER II

LITERATURE REVIEW

Film and television provide not only news and entertainment but portray cultural beliefs, norms and ideals. I am interested in exploring portrayals of and images of mental health, therapists, and therapy. Viewers are constantly unconsciously fed messages from the media. I looked at how therapy and mental illness are portrayed in the media and how this may affect a client's decision to seek therapy.

Previous studies such as Polce-Lynch, Myers, Kliewer and Kimartin's 2001 study suggest that media does have an impact on our culture and on our perceptions and identity for instance on our self-esteem and body image. An empirical study by Polce-Lynch, Myers, Kliewer, and Kilmartin (2001) asked 209 5th, 8th, and 12th graders about their perception of self and how the media affects that perception. Polce-Lynch et. al hypothesize that media influences may be associated with self-esteem development. They argue that media is omnipresent in teenagers lives via television, magazines, and movies. A Media Influence Scale (MIS) was used, by asking the youth questions about how they feel about themselves when comparing themselves to celebrities. The scale was a 12-item instrument and asked questions such as "When I compare myself to movie stars on TV or in the movies, I feel disappointed with how I look". The responses use a likert-type response, which range from 1(never) to 4(always). The results of this study were that the participants' self esteem, gender presentation, and evaluation of physical appearance were negatively affected by media representation. As the researchers commented,

there needs to be more empirical investigation to more accurately assess the association between media affects and self-esteem. One limitation of the research is that the sample was not diverse, composing of mostly middle class families. A strength of this study was how it strongly showed statistically that the media negatively affected the youths' attitudes. Other studies such as Yao, He, Ko and Pang's 2014 study, looked at the influence the internet has on self-esteem in young adults.

Previous studies such as Hedley's (1994) have examined the impact of film on perceptions of therapy. Hedley (1994) coded film clips from the top 50 grossing films of 1986-1990. He used content and statistical analysis as well as qualitative structural analysis to show that female actors are stereotyped as having disadvantages to male actors in power. Hedley analyzed popular movies to explore what men's' expectations are in regards to conflict with women. The results of the study were that male dominance was shown in most of the films Hedley analyzed, when men were in arguments with women. Hedley details that the stereotypes of women being portrayed as weak in film, further perpetuates this idea to society, showing that film has a large affect on the population.

Schill, Harsch and Ritter (1990) conducted an empirical study about the effect of a film portrayal on a viewer's perception, specifically on student's views on countertransference and psychiatric practice. The film *Lovesick* was shown to 114 college students. Of these 114 students, 57 were men and 57 were women. The average age was 19 and they were all volunteers from an introduction to psychology course, where they would get credit for taking part in this study. Only students who had not seen the film before were included. The students took a pre-movie survey, in which they were given ten assumptions that the researchers believed the students would make about the mental health profession after viewing the film. The students

responded using a six-point scale, one was strongly agree and six was strongly disagree. One of the ten assumptions was "the sexual feelings an analyst develops for one of his/her patients can be real love" (p. 400). The students also filled out the Langner Psychiatric Impairment Scale, which is a 22-item symptom checklist that evaluates the subject for an emotional disorder. This impairment scale was used in order to assess if greater psychological impairment affected beliefs more after watching the film. The students then watched the film and filled out the survey again, all in the same day. To evaluate whether watching the film changed the students views on counter transference and mental health professionals, an analysis of variance was created for each of the 10 items of the survey. Langner scores were then after the film split at the median into two different groups of low and high psychological distress.

In this film the therapist had a sexual relationship with a client. The students were given surveys before and after about the therapeutic process. The study found that the students had more negative beliefs about therapy after seeing the film, which supports my hypothesis that negative portrayals of therapists in films, have a negative impact on viewers. A table was created to present the significant levels of effect as well as the means and standard deviations. There was a substantial difference in students' views looking at the before and after results of the surveys. Students views about mental health professionals were more negative and also implied that the students thought that mental health professionals are corrupt and unethical. Schill, Harsch, and Ritter feel it is important to have mental health professionals portrayed accurately because, "watching a movie is how many people come to know what a psychiatrist does and the nature of psychiatric treatment" (p. 399). In conclusion, they found that the students views of mental health professionals were affected negatively by watching the film, but Schill et. al thought the results were slight and they were not sure how long these thoughts would stay with

the students after participating in the study. The lack of long-term follow up is a limitation of the study. Also, only college students were used, so the study was not a diverse sample of people and can not be generalized to the population as a whole. Future studies should address these issues.

de Carlo (2007) undertook a project where she applied ethnographic content analysis to examine 19 American films made during the time period 1942-2005. She did this in order to look at how American film portrays psychiatric mental health nurses and psychiatrists. She critiques the way mental health professionals are portrayed through film and feels they provide an inaccurate representation. She sees mental health professionals as stereotyped as cruel and out of the Middle Ages as being tortuous to their patients'. de Carlo (2007) speaks to how "research confirms that such stigmatizing portrayals in the media have a direct effect on the viewer's attitudes towards the people depicted" (p. 347) which she found through her research of previous studies. This further supports my hypothesis that client's perspectives of therapists and seeking therapy are affected by watching film and that therapy is often portrayed in a negative light.

Fischhoff (1996) did an empirical flexible methods study in which he surveyed 348 male and female college students who were enrolled in undergraduate psychology courses to look at how stereotyped images of the mentally ill affected one's view of mental health. They were given an 11 item open-ended survey and were asked to look at a certain category of person and to make up information about this person and where they thought this perception came from. They were forming stereotypes from looking at the different types of people listed such as schizophrenic, homicidal maniac etc., come up with a picture in their head of this person and then record where this image came from, such as the media, personal experience or books. Content analysis was used to categorize data. The number one answer the students gave for where their perceptions came from was television and film, in particular in regards to the category of "homicidal

maniac". Fischhoff emphasizes the point that visual images are readily more remembered than readings words in books and texts, which could make the students more likely to have preconceived stereotypes of different types of people from the visual media. The limitations of this study are that, like my study, it does not test directly how the media has impacted students perceptions, the students are answering that they think that this is how the media has influenced them. It is difficult to test and track the actual ways media impacts people, and not just how people perceive it has affected them.

Bram (1997) did a survey with undergraduates of their perceptions of psychotherapy, and used regression analyses. Bram looked at the students' perceptions of psychotherapy. Bram states that "...perceptions of psychotherapy and psychotherapists are related to treatment expectations, which have significant implications for persistence in therapy and treatment outcome" (1997), which supports the notion that media does have an influence, because it gives the viewer a preconceived notion of therapy. The participants of Bram's study were asked if they agreed or disagreed with 52 statements that looked at the participants perceptions in certain areas such as the purpose of therapy, and common myths about psychotherapy. The survey also asked the participants how many therapists they thought had sexual relations with their clients, to which the average response was 1 in 5. Bram believes that media influence has a large role on this response. The results were that the participants had a more negative interpretation of therapy, based on their previous knowledge and exposure to therapists

Maier, Gentile, Vogel, and Kaplan (2013) conducted an empirical study on how media influences self-stigma of individuals seeking psychological services. They speak about how social-cognitive theory and cultivation theory "suggest that the collective messages we see in the media and the figures we view can influence our perceptions of the world and our subsequent

behaviors" (2013). They mention how attitudes towards physicians are influenced by media portrayals of doctors. They did three studies: in the first study they discovered that the perceptions of psychologists and the perceptions of people going to therapy in the media predicted self-stigma, but that perceptions of people with mental illness in the media indirectly influenced self-stigma through perceptions of people seeking therapy. In the second study they looked at the role of media as an informational source which shaped their perceptions. The results were that the portrayals of psychologists, people who seek therapy, and people with a mental illness in the media influenced corresponding real-life perceptions. They made a model of media portrayal influencing perceptions of real-life figures which influence self-stigma, as well.

In a study done by Chory-Assad and Tamborini (2003) found that people who watched more TV shows depicting scenes of doctors, expected their real life doctors to be more cold and uncaring. The authors had found in a previous 2008 study that they did, that those who watched more TV expressed more concern about stigmatization from others, as well as having more negative attitudes toward seeking mental health services. They completed another study in which they asked 308 students to recall movies and television shows they had seen that showed therapists. The participants were asked how realistic they thought the character was and also to indicate if they would seek help from this character if in need of psychological help. The results were that the students were more likely to seek help if the psychologist had certain qualities such as being realistic and being positive. The study's limitations were that it was done only with college students and that the list of film and tv shows was rather small.

In my research, I have seen several empirical studies that explore the race and gender of the participants of their studies. Jane L. Wong (1994) did a study in which she measured the average person's perceptions of psychotherapy. She asked six questions that asked about

respondents' previous experiences with psychotherapy such as, "Have you read books about psychotherapy?".

Wong noted that one of the limitations to her study was that it was not racially diverse and that this may have negatively impacted her results. Bram (1997) did a 265-person study of undergrad students in 1st year psychology (since they are studying it, they probably hold more positive views) about their perceptions of psychotherapy. His sample was 85% Caucasian and 15% People of Color. It seems that of students being surveyed the majority are Caucasian and female. In Kulick and Rosenberg's (2001) study, they surveyed 108 students about the influence of positive and negative film portrayals of drinking on their alcohol outcome expectancies. This study was predominantly Caucasian and female. I used a self-report questionnaire to ask about age, gender, geographic location and previous therapy experience. In looking at Kulick and Rosenberg's study I notice that their study is not racially diverse. In many studies I have read, where college students are surveyed, there is little to no racial diversity. In several studies, the sample is students in an Intro. to Psychology class in a University. In many of these studies, this seems to be a matter of convenience. Future research should examine the impact of the media's influence on people's perception of therapy by using a racially and ethnically diverse sample.

Theoretical

Hylar (1988) analyzed films to note how accurately they portray mental illness, specifically how accurate they are in comparison to the DSM diagnoses, and in doing so noted that "for better or for worse, movies and television contribute significantly to shaping the public's perception of the mentally ill and those who treat them" (p. 195). Hylar also speaks to how it would be impossible to ignore the influence of film on people who have never been to therapy before, in how they perceive therapy, and that "it is important...for psychiatrists to be aware of

how their profession is depicted in films, since this is often how our patients, and their families, form their image of us (p. 205). He mentions the vast amount of movies that portray scenes of therapy, dating back to films such as *The Snake Pit* (1948) and *Possessed* (1947). The use of therapy in film is commonplace and Hyler also talks about the vast amount of literature that has focused on the use of psychotherapy in film. He argues that many films portray mental illness accurately in some form or another, such as *The Bell Jar* (1979) and *Promise* (1986), but that the results of therapy shown in film are often inaccurate, "a cure often occurs serendipitously" (p. 205). Hyler makes the point that one can compare the way psychotherapy is seen in film to the way other professions are seen in film, such as law. Often the minute technicalities are not shown, because ultimately many films depicting scenes of therapy are not documentaries, they are dramas, which are trying to create a story in which the audience will be captivated and entertained by.

There were several studies done that showed that not only does society have an impact on film but also that film has an impact on society (de Carlo, 2007; Gabbard, 2001). Gabbard (2001) studied over 400 theatrically released American films that portrayed some kind of psychotherapist. He makes four main points: 1) that Hollywood is infatuated with psychotherapy by including depictions of it in a large number of films, 2) that Hollywood does not make a distinction between different kinds of therapists (social workers, psychologists etc.), 3) the way therapists are portrayed is a direct reflection of society attitudes during that time (for example in the 30's and 40's therapists are portrayed more negatively but by the 60's they are portrayed in a more positive light); and 4) that the needs of the film always prevail over reality. Gabbard speaks to how influential films are on clients, even noting that one client of his after seeing *One Flew Over the Cuckoo's Nest* refused to receive electro shock treatments due to the portrayal of it in

the film. He also speaks to how clients have often asked him why he isn't like the therapist from the movies they have seen. He reasoned that "most people's first impression of psychology comes from the silver screen" (p. 171).

I have found much research to support my hypothesis, which is that people's views on therapy are negatively influenced by the media's representations of therapists, such as therapists engaging in unethical behavior. Even in films where the therapist is seen as a "good therapist" such as Robin Williams in *Good Will Hunting* (1999), he acts quite unethically by yelling in his client's face and threatening to hurt him. A client could potentially see films and television shows in which the therapist is seen as effective and helpful in treatment, but they may still come in with preconceived notions due to how many therapists in the media are portrayed as engaging in unethical behavior.

Carr (2008) discusses how the media affects terminal cancer patients' view of quality of life. In doing this she used three theories of media influence: Mass Society Theory, Social Responsibility Theory, and Limited Effects Theory. Mass Society Theory speaks to how the media brainwashes people and puts negative ideas and images into their heads. Social Responsibility Theory posits that the media is accountable to the viewers and that it should reflect on the diversity of society. It also states that media connects people to people, so the media is a source of truth telling and accuracy. Carr notes that this theory seems idealistic and that it shields accountability from the media, because the media is not all truthful and positive. The media does send some biased messages and finances play a large part in what is shown on TV. She lastly discusses the Limited Effects Theory, which is a theory that proposes the media reinforces the status quo and existing social trends, but that it has no power in influencing people who have strong beliefs. Mass Society Theory is most consistent with my hypothesis that

the media puts out negative stereotypes that influence people, i.e. to not go to therapy because of negative views of therapy they have seen portrayed in the media. I do not agree with the Limited Effects Theory. I think that the media has power over everyone, even people with quite strong morals and beliefs. Mass Society Theory will help to inform my study, as it supports my hypothesis in saying that everyone is influenced by the media in some aspect.

In doing my literature review I found several articles that discussed the importance of gender in film portrayals of therapists. Gabbard (2001) in his analysis speaks to how female therapists are often sexualized and cross a sexual boundary, while male therapists are portrayed as professional. Many concepts came out as I researched. I found articles in which people say that the media is a direct reflection of our society. I am finding studies in which people say that most mainstream movies are not made to educate viewers on anything. In much of the literature I read, surveys were used to assess the affect of media on their perception of mental health, for instance, if they had learned about mental health from a celebrity or on TV such as stars such as Demi Lovato who suffers from an eating disorder and bipolar disorder. Charles Kadushin (1997) was particularly helpful, as he reported on several different reasons that people seek treatment and explored the impact of the mass media. He hypothesized that the public's perceptions of psychotherapy were almost entirely based on popular culture. He used an accounting scheme, which is part of reason analysis. In many studies that Kadushin has done he used reason analysis to see why people go to psychotherapy. Reason analysis is a set of procedures used in survey research to construct causal explanations for the actions, decisions, or intentions of individuals. (Lazarsfield, 1935).

I have found many empirical articles that survey people to ask how the media affects their perceptions of themselves and others such as Polce-Lynch, Myers, Kliewar, and Kilmartin

(2001) who examined how the media affected teenagers sense of self, and Fischhoff (1996) who looked at how we stereotype people based on media perceptions, although it has proven difficult to find studies that actually document how directly film and television affect their perceptions of therapy. My study will help to bridge that gap. In surveying the literature about film and media perception, I hope to continue to further the research about this important topic.

CHAPTER III

METHODOLOGY

The purpose of my study is to find out how the media affects people's perceptions of therapy in order to see whether this impacts on whether people seek therapy and also to find out how these perceptions from the media may impact upon the relationship between the therapist and client. My research question is: How do portrayals of therapy in film and television affect people's expectations of therapy and whether or not they seek therapy? I am also interested in seeing how different ethnic groups and socioeconomic classes view the representation of therapy in media.

Based on previous findings on the impact of media on people's attitudes, I hypothesize that the media does have an impact on people's perceptions of therapists and that for some people; this may create negative views of therapy since therapists in films and television are usually, but not always, portrayed in an unethical stereotypical light. In my opinion, I think that many people have a view of therapists from the media and that the representation from the media is inaccurate.

Throughout this study, I will use the term media to refer to U.S. film and television. By using the term *therapy* in the media, I am referring to any scenes of therapy between any kind of mental health professional (Psychologist, Social Worker, Psychiatrist and Counselor) and a client. The research design is mixed-methods descriptive and correlational. The survey is mostly quantitative with a few qualitative questions. I administered a survey on the Internet via Survey Monkey to determine the perceived impact of images of therapy in the media on the survey's participants. I used correlational design because my research explores seeing how change in one

factor is associated with change in another factor. I am looking at how seeing representations of therapy in the media changes how they view therapy and if they want to seek therapy or not. I used a survey method.

I have some concerns about the validity and reliability of the study. As Elizabeth Perse details in *Media Effects and Society* (2001), testing media effects is difficult. She speaks of a study in which a researcher attempts to test the impact of violent movies on teens by showing them violent film scenes and then observing how aggressive they are when playing hockey, by noting the number of fouls they get, which is not in fact subjective. In the current study, I am asking them how they think the media has affected them, which is obviously entirely subjective.

Sample

My inclusion criteria is that the participants must have access to the Internet to take the survey online. They must be 18 years or older. They must be able to read and write in English. They must live in the United States. They must have some exposure to television and film. My exclusion criteria are: Participants who are under the age of 18, participants who are unable to read or write in English, participants who are unable to write by hand or to use the Internet, and participants who do not watch TV or movies at all.

The sampling method is purposive. The first place I posted was on the IMDB (International Movie Database Message board). This website is an important website for movie and television fans, as it lists extensive information about movies and television. This message board has been used in the past by Smith MSW students with success. The website address is <http://www.imdb.com/boards/>. There is a section on the message board section of the website that is entitled "Film General: Film topics not covered in the boards below". This is where I posted my recruitment announcement. I also posted it under "TV General: TV topics not covered

in the post below". I sent out my survey to family and friends. I also posted it on Facebook. I was hoping ideally to have at least half the participants having had previously attended therapy or attending it currently, to see their unique perspectives on therapy, since they've already been juxtaposed to people who have never been to therapy and seeing if their perceptions are different.

I used purposive sampling to guarantee that I got the sample size needed from diverse groups of people. I used a best-fit, diverse group of people for my survey. In order to see from a varied perspective how the media affects many different types of people. I do not necessarily need a certain amount of people from different groups, but I had hoped the sample would have a wide variety. Table 1 includes some of the demographic data from my study.

Table 1

Racial and Gender Demographics of the Respondents

n (percent)

Black	Mixed Race	White	Other
2 (4.35%)	5 (10.87%)	36 (78.26%)	2 (4.35%)

Male	Female	Genderqueer	Transgender
13 (28.2%)	31 (67.39%)	1 (2.17%)	1 (2.17%)

It was more difficult for me to find participants of color and participants of lower socioeconomic classes to participate in my survey, which led to there being an omission concerning lower income and a variety of races. My demographic data was analyzed by making a chart in Excel, noting frequencies of age, gender, race and socioeconomic class.

In knowing that it was difficult to find participants of color and participants of lower socioeconomic classes, diversity was still important in my study and I wanted to include as many people as possible. I am also aware of the fact that that even the practice of attending therapy is

oftentimes expensive, and therefore done so more by the upper class. In thinking of which movies showcase therapists often, I would think that more often than not the therapist is white, and it is important to note the implications of that in my research.

Ethical issues and risks involved in participation are making sure that no one involved in taking the survey becomes too emotionally distraught. Asking people about any of their previous therapy experiences could potentially be triggering. This survey with Survey Monkey was anonymous. No identifying information was collected. My sample size was 50 people.

Data Collection Methods

The survey includes a collection of demographic data, quantitative data and qualitative data. I report the frequencies of the demographics of participants, such as age, race, and geographic location. I also look at current and prior therapy experiences.

I was interested in exploring several questions in my study. The questions included: Have you been to therapy before? How long have you been in therapy? Are you currently in therapy? For how long? Have you seen therapy portrayed in TV? Have you seen therapy portrayed in movies? Do you feel that media portrayals of therapy have made you more or less receptive to seeking therapy? Using a likert scale ranging from less likely to more likely. Please explain. If you have gone to therapy, do you feel that your therapy experience was similar to what you thought it would be like based on what you have seen in the media? Or dissimilar? Please explain.

I used mostly closed-ended questions with just a few open-ended questions to make it more likely for someone to take the time to complete my survey, as well as making it more feasible for me to complete the data analysis this year. A participant would be more likely to take

a survey that takes less time and has questions that are easy to answer. Closed-answered questions are helpful in making it easier to quantify the data.

My data was collected through the Internet. Online surveys are most efficient for collecting data quickly, from a diverse population. Also, many people are more willing to do a survey online than in person.

The participant took a brief survey. The survey included questions about where they live such as in an urban, suburban or rural setting, age, gender, and race. If they did not wish to answer any of those questions then they were not forced to do so. The survey took no more than 10 minutes. This study was feasible, due to the nature of having mostly closed-ended questions and it's short length of required time to complete (10 minutes). Administering the survey online also made it more feasible since more participants are likely to take an online survey and it was easier for me to collect and analyze the data through the Internet.

The limitations of my data collection methods are that it was difficult to reach certain groups of people. It can be difficult to answer a question about how media portrayals of therapy in general have affected one's perception of therapy. One would have to think back to all the times they've seen therapy portrayed in media and film and individually conclude how this has impacted them. Without names of film titles or TV shows with portrayals of therapists in front of them while taking the survey, recalling when they've seen these portrayals of therapy may have been difficult to conjure up.

Data Analysis

My quantitative data was analyzed by making the responses more narrow and putting them into a small list of coding categories. I assigned the same codes to similar responses. I analyzed and reported the demographic data by breaking age, race, and geographic location into

small categories. In each subgroup I noted the frequency and then put the frequencies into a percentage. I did the same for race, geographic location and socioeconomic status, breaking them into subgroups and with the help of Survey Monkey calculating the frequency and percentages.

I analyzed the closed-ended responses by also noting the frequency and percentages. For instance, "Have you attended therapy before?" If the answer was yes, then I recorded the frequency of people who said yes and then made it into a percentage. I also looked at the relationships with the demographics such as who is more likely to seek therapy. I quantified the qualitative data, by doing a content analysis and reported the frequencies of particular themes as well as provided an analysis of each theme or outlier. In administering my survey, I hoped to receive more insight into how the media has an affect on people's willingness to go to therapy or not. The next chapter will look more in depth at the results of the survey and what these results mean.

CHAPTER IV

FINDINGS

The study explores the relationship between viewing depictions of therapy in the media and the perceived affect that may have on an individual's attitude towards therapy and clinicians, as well as whether or not it, influences their decision to attend therapy. The sample of 46 participants was collected through a Facebook posting, through an International Movie Database Message Board and through a snowball sample starting by e-mailing friends and family. The surveys were collected entirely online, through SurveyMonkey. My survey includes 17 questions. Depending on how you answer certain questions, you may receive slightly different questions. There are four questions about demographics: age, type of location currently living in, gender, and race. There are five quantitative questions and eight qualitative questions. Out of the 46 respondents, only 42 answered the majority of questions, so in discussing the answers to many of the questions, I am discussing 42 participants.

Demographic Data

There were 46 (n=46) participants in the study. 36 identify as Caucasian or White (78.26%). Two identified as Black (4.35%). Two identified as bi-racial: White/Asian mix (4.35%). One identified as Human (2.17%). One identified as American (2.17%). One identified as Multi-racial (2.17%) and one identified as Multiracial: Chinese/Malaysian/White Mix (2.17%). One identified as Asian-American (2.17%). Listed below in table 2 is a table illustrating the respondents' race.

Table 2

Respondents Racial Demographics

Black	Mixed Race	White	Other
2 (4.35%)	5 (10.87%)	36 (78.26%)	2 (4.35%)

In asking the question of what gender one identifies as, 13 participants identified as male (28.2%), 31 participants identified as female (67.39%). One identified as Genderqueer (2.17%). One identified as Transgender (2.17%). Listed below in table 3 are the respondents answers for gender.

Table 3

Respondents' gender identity

Male	Female	Genderqueer	Transgender
13 (28.2%)	31 (67.39%)	1 (2.17%)	1 (2.17%)

The results of age were that seven participants (15.56%) were from the ages of 18-24, 29 (64.44%) from the ages of 25-34, 2 (4.44%) from the ages of 35-44, two (4.44%) from the ages of 45-54, three (6.67%) from the ages of 55-64, and two (4.44%) from the ages of 65-74 (4.44%).

In regards to the question of current location that the participants are living in, 24 were living in an urban environment (52.17%), 18 were living in a suburban environment (39.13%), and four were living in a rural environment (8.70%).

Question Responses

My first question was "Have you seen therapy portrayed before in TV and/or film?" If the answer is no to both, then they would receive a message saying that they are not eligible to take the survey. Three people responded that they had seen therapy portrayed in TV, but not in film (6.52%). 43 people (93.48%) responded that they had seen therapy portrayed in both TV and

film. My second question, "Have you ever been to therapy before?" resulted in 40 respondents answering yes (86.96%) and six responding no (13.04%). The six people who responded no were directed to the question, "do you feel that media portrayal of therapy has had any influence on your decision to not attend?" Five of them responded no, and one answered maybe. The next question is also for the six people who have never been to therapy before, "What are your impressions of how therapy is portrayed in the media?" A respondent answered that there is often something scandalous going on when a therapist is portrayed in film or television that makes the respondent not trust the therapist, but she also mentions that she knows it's not reality. Another respondent mentioned that they have seen both negative and positive portrayals, but that they don't seem very accurate. A respondent mentioned how therapy gets glorified in the media as something that everyone does, to make it more entertaining for more viewers. Another respondent answered how it seems like therapy is only focused on pushing medication, while another respondent said that they think that the therapist only listens to the problems but does not help solve them. Since only six people who took my survey had never attended therapy before, it was a small sample for that population.

The next question is "are you currently in therapy?" 15 people responded yes (32.61%) and 31 (67.39%) answered no. Of the fifteen people who are currently in therapy, they were asked how long they've been attending. The answers ranged from two months to 20 years with the average being roughly 5 years. The next question is, "do you feel that media portrayals of therapy have made you more or less receptive to attending therapy?" Eight people answered more receptive (18.18%), 10 people answered somewhat receptive (22.73%), 20 people answered neither more receptive or less receptive (45.45%), 11 people answered somewhat less

receptive (11.36%) and one person answered less receptive (2.27%). Listed below in table 4 is the respondents response to "are you currently in therapy?"

Table 4

Respondents Response to "Are you currently in therapy?"

Are you currently in therapy?

Yes: 15 (32.61%)	No: 31 (67.39%)
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Table 5

Respondents Response to "Do you feel that media portrayals of therapy have made you more or less receptive to attending therapy?":

Do you feel that media portrayals of therapy have made you more or less receptive to attending therapy?

More Receptive	Somewhat Receptive	Neither more receptive or less receptive	Somewhat less receptive	Less receptive
8 (18.18%)	10 (22.73%)	20 (45.45%)	11 (11.36%)	1 (2.27%)

Out of the people who answered neither more receptive or less receptive, nine of them are currently in therapy (64% of all people currently in therapy answered this way), three have never attended therapy (60% of that group), and seven who have been to therapy in the past but are not currently in therapy (29% of that group).

Table 6

Respondents' response of being neither more receptive or less receptive to attending therapy after viewing scenes of therapy in the media.

**Neither More Receptive or Less Receptive
total=20 (45.45%) of respondents**

Currently in therapy	Never attended therapy	Been to therapy before not presently
9	3	7

Table 7

Respondents who responded being somewhat receptive to therapy after viewing scenes of therapy in the media.

Somewhat Receptive

Currently in therapy	Never attended therapy	Been to therapy before not presently
3	1	6

Table 8

Respondents' response of being more receptive to attending therapy after viewing scenes of therapy in the media.

More Receptive

Currently in therapy	Never attended therapy	Been to therapy before not presently
1	1	6

Table 9

Respondents' response of being somewhat less receptive to attending therapy after viewing scenes of therapy in the media.

Somewhat Less Receptive

Currently in therapy	Never attended therapy	Been to therapy before not presently
1	0	4

Table 10

Respondents' response of being less receptive to attending therapy after viewing scenes of therapy in the media.

Less Receptive

Currently in therapy	Never attended therapy	Been to therapy before not
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		presently
0	0	1

Table 11

Table illustrating responses of receptiveness to therapy after viewing scenes of therapy in the media, of people who are currently in therapy

People Currently in Therapy (n=14)

more receptive	somewhat receptive	neither more receptive or less receptive	somewhat less receptive	less receptive
1	3	9	1	0

Table 12

Table illustrating responses of receptiveness to therapy after viewing scenes of therapy in the media, of people who have never attended therapy.

People who have never attended Therapy (n=5)

more receptive	somewhat receptive	neither more receptive or less receptive	somewhat less receptive	less receptive
1	1	3	0	0

Table 13

Table illustrating responses of receptiveness to therapy after viewing scenes of therapy in the media, of people who have been to therapy before but not presently.

People who have been to therapy before but not presently (n=24)

more receptive	somewhat receptive	neither more receptive or less receptive	somewhat less receptive	less receptive
6	6	7	4	1

Out of the people who responded somewhat receptive, three of them are currently in therapy (21% of the people who are currently in therapy answered somewhat receptive), one who has never been to therapy before (20% of that group), and six who have been to therapy in the past but not currently (25% of that group). Out of the response more receptive, one person who is currently in therapy responded (7%), one person who has never been to therapy responded (20%), and six people who have been to therapy before but are not currently in therapy responded (25%). For the response somewhat less receptive, one person who is currently in therapy responded (7%) and four people who are not in therapy currently but have been in the past responded (17%). One person who has been to therapy in the past but is not attending currently, answered less receptive (4%). In looking at the percentages, I find that the percentages of each group, people who are currently in therapy, people who have gone to therapy before but not presently, and people who have never gone to therapy's results line up with the total percentages. For example: 30% of people who have been to therapy before but not presently, answered neither more receptive or less receptive, and 45% of all respondents answered neither more receptive or less receptive. In each group it follows that the majority of people answered neither more receptive or less receptive, and then the next highest percent is somewhat receptive, followed by more receptive, somewhat less receptive and finally less receptive, which indicates that only 14% (n = 42) of respondents feel that media portrayals of therapy have made them somewhat less receptive or less receptive to attending therapy. The percentage of respondents who indicated that media portrayals of therapy made them somewhat more receptive or more receptive to therapy is 41%. The amount of respondents who believe that media portrayals of therapy influenced them positively to attending therapy far outweighs that of the people who believe it negatively affected them.

The following question is, "Please explain how you feel that media portrayals of therapy have made you more or less receptive to attending therapy". 43 respondents chose to answer this question, since every question is optional. Out of the 40 respondents, 11 respondents answered with either N/A or "I don't feel that seeing therapy in the media had any effect". 10 respondents spoke to how seeing positive portrayals in therapy really made a positive impact on them wanting to attend therapy; several of those 10 mentioned how seeing therapy portrayed in the media in a positive light normalized therapy for them and made it seem more socially acceptable. It was also helpful for them to be able to relate their issues to the issues of the client on TV or film who is going to therapy. Another respondent mentioned how in some films therapy is portrayed as a healthy and helpful experience. A respondent spoke about how they think it's difficult to find negative depictions of therapy in the media. Two respondents spoke positively about how the media has actually portrayed therapy, where as in real-life it is hard to get people to talk about their therapy experiences, so it helped this respondent to have an idea about what therapy actually is. This respondent mentioned that before they had gone to therapy, they didn't really know what therapy would be like, so seeing therapy portrayed in the media, helped them to see what it would be like. Seven respondents answered that they have seen therapists portrayed in a negative light in the media, which may impact their willingness to attend. One respondent mentioned that she is less receptive to attending after seeing therapy portrayed in the media, because the characters on TV or film have problems that seem much more drastic than the respondent's own problems. Two respondents spoke to how they have seen therapists portrayed as evil or sadistic which gave them a negative view on therapy. Several people mentioned how seeing positive therapist/patient interactions in film and television gives them

unrealistic expectations for what their own therapy experiences will be like. Several respondents mentioned how unrealistic media depictions of therapists are.

The following question was "if you have gone to therapy, do you feel that your therapy experience was similar to what you thought it would be like based on what you have seen in the media?" A large majority answered no, because of how dramatized and unrealistic therapy is portrayed in the media. Respondents spoke to how the logistics are often correctly portrayed, such as 50 minute sessions, but that everything else is much more dramatized. One respondent mentioned how they were surprised that in their actual therapy, the therapist often didn't talk which seemed different from the media portrayal. One respondent addressed how they are gay and that they felt the media portrayal of therapy only involved straight people. A respondent who has been to therapy in the past but not currently mentioned how their actual therapy experience was different, but that they wish there were more media portrayals of people going to a therapist and realizing that the therapist isn't a good fit, because of approach and the type of therapy being provided. 10 respondents said that they do feel their therapy experience was similar or somewhat similar to what they have seen in the media.

The next question was, "what are some memorable therapist portrayals that you can recall from television and film?" Included is a list of all the films and television shows mentioned, with numbers next to them reflecting how many people mentioned it; people did list multiple shows, there was no limit to how many they could list. 41 respondents answered this question. Ordinary People (5), That 70's Show, Mad Men, Analyze This (5), The Sopranos (14) (this show was most often mentioned), Prime, Ally McBeal, Silver Linings Playbook (3), American Horror Story (2), Dawson's Creek, Private Practice, Hope Springs, The Bob Newhart Show (2), Reuben Reuben, Bones, Frasier (2), One Flew Over the Cuckoo's Nest, The Simpsons, Murder She Wrote, What

About Bob (4), Castle, Monk, Good Will Hunting (4), Stranger Than Fiction, Arrested Development, Curb Your Enthusiasm, There's Something about Mary, In Treatment (9) , Girls, Web Therapy, As Good as it Gets, Prince of Tides, Tell me you Love Me, Side Effects (2), Girl Interrupted, Obsessed, Hoarders, 2 and a half Men, Antz, It's Complicated, Dexter, Saving Silverman, Necessary Roughness, Transamerica, The Departed, Law and Order SVU, Mental, Love, Reign O'er Me, Sex and the City, 50/50, Donnie Darko, Brothers and Sisters, First Wives' Club, House.

Table 14

Responses to "what are some memorable therapist portrayals that you can recall from television and film?"

Ordinary People	5
That 70's Show	1
Mad Men	1
Analyze This	5
The Sopranos	14
Prime	1
Ally McBeal	1
Silver Linings Playbook	3
American Horror Story	2
Dawsons Creek	1
Private Practice	1

Hope Springs	1
The Bob Newhart Show	2
Reuben Reuben	1
Frasier	2
One Flew Over the Cuckoo's Nest	1
The Simpsons	1
Murder She Wrote	1
What About Bob	4
Castle	1
Monk	1
Good Will Hunting	4
Stranger than Fiction	1
Arrested Development	1
Curb Your Enthusiasm	1
There's Something About Mary	1
In Treatment	9
Girls	1
Web Therapy	1

As Good as it Gets	1
Prince of Tides	1
Tell Me You Love Me	1
Side Effects	2
Girl Interrupted	1
Obsessed	1
Hoarders	1
2 and a half men	1
Antz	1
It's Complicated	1
Dexter	1
Saving Silverman	1
Necessary Roughness	1
Transamerica	1
The Departed	1
Law and Order SVU	1
Mental	1
Love, Reign O'er Me	1

Sex and the City	1
50/50	1
Donnie Darko	1
Brothers and Sisters	1
First Wive's Club	1
House	1

The next question was, "What about these portrayals made them so memorable?" Six respondents answered that the humor was important for them. Many respondents answered that the accuracy of the portrayal made them memorable. Portrayals that offered extremes, either terror such as Nurse Ratchett or humor such as Frasier were memorable. A respondent spoke to the tension between the patient and therapist, how the patient may be rebelling and in therapy against their will in TV and film. The exaggeration of actual therapy was memorable. The humanity of the therapists were memorable, such as Dr. Melfi in the Sopranos who a respondent mentioned, "...was human...had great moments as well as flaws and empathic failures." This respondent also spoke to the flaws of the therapist and how it was interesting to see the therapist as well as the client's flaws.

The following question was, "Did you find those portrayals to be realistic?" Four people skipped the question or answered N/A. 15 respondents answered yes, citing some examples particularly "In Treatment". 12 respondents answered no, due to things such as exaggeration or that the client is portrayed as "crazy". The rest of the respondents responded with mixed answer

such as somewhat or “yes and no”, because there were some therapy portrayals that they deemed as accurate, and others that they found to be completely inaccurate.

My final question was, “do you feel that those memorable therapist portrayals influenced you to seek or not seek therapy?” Three respondents skipped the question. 24 people answered no, and rest said yes or that they’re not sure. The respondents, who said no, cited reasons such as they can “see the difference between TV and real life”. A respondent spoke about how the portrayals of therapists that they saw were so negative, that it made them not want to go to therapy, but then reading a book about therapy changed their mind. Several respondents mentioned how they did not consciously think that the portrayals of therapists impacted them, but that they left a positive impression. One respondent mentioned how attending therapy was a personal decision, and the media did not influence them.

My overall findings support my assumption that it is quite difficult to test how viewing scenes of therapy can influence people to go therapy. I found that the majority of the questions had a mixed response. Usually half of the respondents would say that they did not think the media effected them at all, about a quarter would say that it effected them positively leading to their attending therapy, and another quarter would say it effected them negatively. The results were fairly inconclusive. The qualitative findings were more informative.

CHAPTER V

DISCUSSION

The overall purpose of this study is to determine whether participants perceive that viewing scenes of therapy in film and television influenced their decision to seek therapy or not. The results of my survey were mixed, where about half of the participants thought that viewing scenes of therapy had no effect on their likelihood to seek therapy or not, a quarter thought that it had a positive effect and a quarter thought it had a negative effect.

My hypothesis was that viewing scenes of therapy would have a negative effect on participants perception of therapy, as shown in the study done by Schill, Harsch, and Ritter (1990) in which he gave students a survey before seeing the film *Lovesick* and after, testing the effect of the film portrayal on a viewer's perception of therapy. The results were that many students' perceptions of therapy were more negative after viewing the film. The film portrayed scenes of unethical therapeutic relationships, which is quite common in scenes of therapy in film and television, especially in a more fantastical scene. Schill however concluded that the results may be inconclusive, because of the lack of diversity in the sample and because the results only slightly leaned towards negativity. In Bram's (1997) study he looked at perceptions of psychotherapy. His participants had to look at 52 statements and say if they agreed with the statements, including some common myths about therapy such as "A person enters psychotherapy to be cured" and "Anyone can become a psychotherapist". Bram concluded that they media had a large role in the responses. The participants had a more negative interpretation of therapy. Maier, Gentile, Vogel and Kaplan (2013) looked at how media influences self-stigma in seeking psychological services. The results were that those who watched more TV expressed

more concern about stigmatization from others, as well as having more negative attitudes toward seeking mental health services. In Fischhoff's (1996) study he looked at how stereotyped views of the mentally ill affected one's view of mental health. The student's number one answer for where their stereotype of mentally ill people came from is the media. It seems that Schill, Harsh and Ritter's study, Bram's study, Maier, Gentile, Vogel, and Kaplan's study, and Fischhoff's studies, all support my hypothesis of the media contributing to people having a more negative impression of therapy. Also, in the more theoretical studies such as de Carlo and Gabbard, most authors believe that the media does have an important impact on how we perceive things in general.

In reading through the literature on this topic, it is clear how difficult it is to test for how people are affected by media. Schiller's study is really the only empirical study I could find that directly tested how media effects people's perceptions of therapy. There needs to be more empirical studies done on this subject, in order for results to be more conclusive. I received many non-definitive answers to my survey questions, saying that the participant didn't consciously decide to attend therapy, due to watching therapy in film and television. Out of the literature I read, many different articles spoke to how therapy in film and television is skewed in a negative direction, and the characters are unrealistic. In scenes of therapy in movies often times, the therapist acts in an unethical way or there are just unrealistic scenarios like a therapist hanging out with his client's family at a football game. In my survey, this wasn't overwhelmingly true in respondent's answers. About half of my respondents said that they had a negative view of therapy portrayals and half said they had seen positive portrayals; it's very subjective and depends what programs the participant watched.

I feel that just asking people how they perceived something affected them, somewhat limited my study. I'm not sure if it is conclusively possible to find out the answer to my research

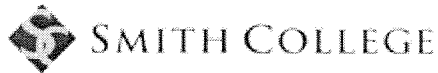
question. Perhaps someday in the future if an extremely controlled long-term study is done in which people are monitored over time to see how their beliefs change after watching specific movies, but this would be quite difficult to do and one could never control what other images they are exposed to. I did not expect to get conclusive results however, but was interested to see how big of an impact the media has on current views of therapy. With an expanding social media presence, it is crucial to be aware of the impact of media on our clients. This study had a small sample size, less than 50, and a fairly homogenous population. It was also a population in which most participants had been to therapy at some point before or are very open towards therapy, which could make the results non-generalizable and skewed in one direction. There also is no longer term follow-up.

The implications of this study on future research is that more empirical studies should be done in order to further collect more information on this topic. It can provide unique opportunities for participants to share what kind of media impacts on their attitudes towards therapy and also what may influence them to seek therapy or not. It is a useful tool for social workers and therapists to see what makes a positive impact on participants in terms of what they might look for in a therapist. It is also a start to beginning a conversation about how mental illness is portrayed in the media. In the future, I hope to continue working on this topic and to continue speaking with others about how the media has influenced their views of therapy.

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April 4, 2013

Melissa Bayer

Dear Melissa,

You did a very nice job on your revisions. Your project is now approved by the Human Subjects Review Committee.

Please note the following requirements:

Consent Forms: All subjects should be given a copy of the consent form.

Maintaining Data: You must retain all data and other documents for at least three (3) years past completion of the research activity.

In addition, these requirements may also be applicable:

Amendments: If you wish to change any aspect of the study (such as design, procedures, consent forms or subject population), please submit these changes to the Committee.

Renewal: You are required to apply for renewal of approval every year for as long as the study is active.

Completion: You are required to notify the Chair of the Human Subjects Review Committee when your study is completed (data collection finished). This requirement is met by completion of the the: project during the Third Summer.

Good luck with your study.

Sincerely,



Marsha Kline Pruett, M.S., Ph.D., M.S.L.
Vice Chair, Human Subjects Review Committee

Appendix B

Recruitment to IMDB Message boards

Survey about Therapy in Film and Television

Hello there! My name is Melissa and I am a social work masters student who is writing a thesis about how viewing scenes of therapy in film and television can impact a person's attitudes towards and willingness to attend therapy or not. Please help me out by taking a brief anonymous survey. Here is the link via SurveyMonkey. <https://www.surveymonkey.com/s/TW978X2> The survey should take no more than 10 to 15 minutes. Thank you very much for your help!

Best,
Melissa

Appendix C.
Recruitment to Facebook

Facebook

Have you ever seen "What About Bob?" or "The Sopranos"? I am a masters student in social work who is studying how viewing scenes of therapy in film and television may affect people's perception of therapy and whether or not they go to therapy. The survey is anonymous and will take less than 15 minutes. Thank you for your help! Please click on the link below to take the survey. <https://www.surveymonkey.com/s/TW978X2>

Appendix D.

E-mail Recruitment to friends and family

Hello there,

Will you please help me out with my master's thesis by taking a brief survey? I am researching how viewing scenes of therapy in film and television affects people's perception of therapy and if they seek and participate in therapy or not. The survey is anonymous and will take less than 15 minutes. Thank you for your help! Please click on the link below to take the survey.
<https://www.surveymonkey.com/s/TW978X2>

Best,
Melissa
MSW Student
Smith College School for Social Work

Appendix E.

Screening Page

In order to be eligible for the following survey, all of the criteria listed below must be met.

- 1. Must be over the age of 18.**
- 2. Must live in the United States.**
- 3. Must be able to read and write in English.**
- 4. Must watch American film.**
- 5. Must watch American television.**

If you meet all of the criteria, please click the “I agree” button below. If you do not meet all of the criteria, please click the “I do not agree” button below. Thank you!

Appendix F,

Disqualification Page

Thank you very much for taking the time to look at my survey. Unfortunately you do not meet all of the criteria, which indicates that you are ineligible to participate. Please exit out of the survey at this time.

Appendix F

Survey

<https://www.surveymonkey.com/s/TW978X2>

Media Portrayal of Therapy: How does it impact your willingness to attend therapy?

Survey Eligibility

1.* In order to be eligible for the following survey, all of the criteria listed below must be met.

Must be over the age of 18.

Must live in the United States.

Must be able to read and write in English.

Must watch American film.

Must watch American television.

If you meet all of the criteria, please click the “I agree” button below. If you do not meet all of the criteria, please click the “I do not agree” button below. Thank you!

I agree (check)

I do not agree (check)

(If do not agree is checked off. The participant will be directed to the disqualification page.)

Next

Thank you

Thank you very much for taking the time to look at my survey. Unfortunately you do not meet all of the criteria, which indicates that you are ineligible to participate. Please exit out of the survey at this time.

(If agree is checked off, the participant will be directed to the Informed Consent Page).

*2.

Dear Participant,

My name is Melissa Bayer and I am a Smith School for Social Work graduate student. For my master's thesis I am conducting research about how media portrayal of therapy is perceived to affect an individual's decision to seek therapy and how it affects their perceptions of therapy and therapists in general. Results may be used in future

presentations or publications.

If you choose to participate, you will take an online questionnaire. The questionnaire starts with four demographic questions, such as age, gender, and location and then there are nine questions related to how you perceive therapy in the media. The survey should take no more than 10 to 15 minutes to complete. You may refuse to answer any or all questions. All participants must be over the age of 18, able to read and write in English, have access to the Internet, have their own e-mail address, and have been exposed to American television and film. If you do not meet these criteria, then you are ineligible for the study.

This is a low risk study, which will only survey individuals over 18. Participation in the study could bring up some past memories for you of your own therapy experiences, which for some could be difficult. A list of referrals is provided.

There is no financial benefit for taking the survey, but with your help, your responses will allow you to share your perspective on if and how the media altered your perceptions of therapy. I would like to see how you think therapists are portrayed in media, and to see if it has affected you negatively or positively. By taking this survey, you may give deeper thought to how you believe the media has influenced you and it could possibly help the way you relate to your therapist, if you have one. It could also help therapists to see what characteristics of therapists in the media, helped attract clients to come to therapy, and also to see what characteristics of therapists in the media dissuaded them from attending.

Your participation in my study is completely voluntary. You may choose to not participate at any time. The survey will be entirely anonymous. The program I will use, SurveyMonkey, does not collect names, e-mail addresses, IP addresses, or any other identifying information. Your responses are only available to me through the use of a password. My research advisor will be able to access the data as well but only after any identifying information has been removed. In a publication or presentation, the data will be presented as a whole with no identifying data being presented. Please do not provide any identifying information in your responses. The research materials will be kept secure for at least 3 years as required in Federal guidelines and if the data is needed beyond three years, then I will keep the materials secure until no longer needed, at which time I will destroy them.

If you would like to participate, you are allowed to withdraw from the questionnaire at any time up until it is submitted and skip any questions you would like. Once you submit the survey, it is not possible to withdraw, as the information is anonymous. You will submit the survey by clicking on the “Done” button on the last page.

If you have any questions or concerns about your rights or about any aspect of the study, please contact me at mbayer@smith.edu or contact the Chair of the Smith College School for Social Work Human Subjects Review Committee at 413-585-7974.

BY CHECKING “I AGREE” BELOW, YOU ARE INDICATING THAT YOU HAVE READ AND UNDERSTOOD THE INFORMATION ABOVE AND THAT YOU HAVE

HAD AN OPPORTUNITY TO ASK QUESTIONS ABOUT THE STUDY, YOUR PARTICIPATION. AND YOUR RIGHTS AND THAT YOU AGREE TO PARTICIPATE IN THE STUDY.

Please print a copy and save it for your records. (Drop box to select “I agree” or “I disagree”)

**Thank you for your help,
Melissa
Social Work Student**

(check) I agree
(check) I disagree

Prev _____ Next

(If participant checks I disagree then they are directed to the disqualification page. Appendix E. If they check agree then they are directed to page 3).

3. What is your age?

(check) 18 to 24
(check) 25 to 34
(check) 35 to 44
(check) 45 to 54
(check) 55 to 64
(check) 65 to 74
(check) 75 or older

4. What type of location do you currently live?

(check) Urban
(check) Suburban
(check) Rural
Other (please specify) _____

5. How do you identify your gender?

6. What race do you identify as?

7. Have you seen therapy portrayed before in TV and/or film?

(check) Yes, I have seen therapy portrayed in TV, but not in film.
(check) Yes, I have seen therapy portrayed in film, but not TV.
(check) Yes, I have seen therapy portrayed in both TV and film.
(check) No, I have not seen therapy portrayed in either TV or film.

(If the participant answers yes, they are directed to question 8. If they answer no, they are directed to the disqualification page. Appendix E).

Prev ___ Next

8. Have you ever been to therapy before?

(check) Yes

(check) No

(If the participant checks no, then they are directed to their own set of questions. These questions are just if they have not attended therapy before).

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9. Do you feel that media portrayal of therapy has had any influence on your decision to not attend?

(Answer box)

10. What are your impressions of how therapy is portrayed in the media?

(Answer box)

(If the participant said yes to question 8. They are directed to their own set of questions.)

9. Are you currently in therapy?

(check) Yes

(check) No

(If they click yes. They will be directed to the following question)

10. If you are currently in therapy, for how long have you been attending?

(Answer box)

(If they checked no to question 9, they will be directed to the next page, where everyone will meet. The participants who have not been to therapy before, the participants who are not currently in therapy, and the participants who are currently in therapy).

11. Do you feel that media portrayals of therapy have made you more or less receptive to attending therapy?

(check) More receptive

(check) Somewhat receptive

(check) Neither more receptive or less receptive

(check) Somewhat less receptive

(check) Less receptive

12. Please explain how you feel that media portrayals of therapy have made you more or less receptive to attending therapy.

(Answer box)

13. If you have gone to therapy, do you feel that your therapy experience was similar to what you thought it would be like based on what you have seen in the media?
(Answer box)

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14. What are some memorable therapist portrayls that you can recall from television and film?
(Answer box)

15. What about those portrayals made them so memorable?

16. Did you find those portrayals to be realistic?

17. Do you feel that those memorable therapist portrayals influenced you to seek or not seek therapy? Please explain.
(Answer box)

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Referrall Sources

Thank you for taking my survey! Below are a list of referrals for mental health counseling.
Please print.

American Psychological Association: Counseling Services Finder

<http://locator.apa.org>

National Association of Social Workers

www.TherapyMatcher.org

Mental Health America

Phone: (For Crisis) 1-800-273-TALK

Phone: 1-800-969-6642

Website: http://www.nmha.org/go/find_therapy

Prev__Done

Appendix H.

Informed Consent

Dear Participant,

My name is Melissa Bayer and I am a Smith School for Social Work graduate student. For my master's thesis I am conducting research about how media portrayal of therapy is perceived to affect an individual's decision to seek therapy and how it affects their perceptions of therapy and therapists in general. Results may be used in future presentations or publications.

If you choose to participate, you will take an online questionnaire. The questionnaire starts with four demographic questions, such as age, gender, and location and then there are nine questions related to how you perceive therapy in the media. The survey should take no more than 10 to 15 minutes to complete. You may refuse to answer any or all questions. All participants must be over the age of 18, able to read and write in English, have access to the Internet, have their own e-mail address, and have been exposed to American television and film. If you do not meet these criteria, then you are ineligible for the study.

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