

Taking the "Psycho" out of "Psycho-killer": The Impact of Criminal Portrayals of Psychiatric Disorders in Horror Films

Makayla Edwards, *Ball State University*



"Psycho", "maniac", and "madman" are all words that are found to be synonymous with serial killers and criminal activity. For decades, the media has perpetuated an extremely harmful image that those suffering from mental illness are violent and dangerous. These portrayals can be found across mediums from fictional books and movies to docuseries and podcasts. In the realm of fiction, specifically, some of the most harmful depictions can be found in horror films. These films tend to paint their villains to be caricatures of various psychiatric disorders including schizophrenia, bipolar disorder, dissociative identity disorder (formerly known as multiple personality disorder), and narcissistic personality disorder. These misrepresentations are not only grossly exaggerated but also highly inaccurate. In this piece, I will explore and expose the negative distortions of mental illness in various horror films. The scope will focus on two of the most influential psychological thrillers in the industry:

Psycho and *The Shining*. These films each depict an antagonist who displays exaggerated traits indicative of mental illness. By deconstructing and comparing these traits with modern research on the mental illnesses they are meant to represent, I will expose the inaccuracies of these portrayals. Furthermore, I will outline the lasting impacts of these inaccuracies on both the public perceptions of mental illness, as well as help-seeking among individuals suffering from psychological disorders. Even if the characters in these popular films are fictional, the stigma they direct toward mental illness is very real and must be addressed.

Introduction

“He has done horrible things to people, and he will do horrible things to you,” (*Split* 2:23). These are the final words of the trailer for the 2017 horror film *Split*, wherein the primary antagonist speaks about himself in the third person, saying he is about to harm the girls he has abducted. The movie centers around a man named Kevin, whose dissociative identity disorder (DID) supposedly leads him to kidnap and torture people. Throughout the film, Kevin takes on multiple personalities, ranging from peaceful to violent, all of which participate in the abduction of the girls. His disorder plays a principal role in his crimes and violence in the film.



Figure 1. Film capture of Hedwig, a 9-year-old with a lisp and one of the many personalities of Kevin (James McAvoy). 27 July 2016, [Split Official Trailer 1 \(2017\) - YouTube.com.](#)

Upon initial release, the film immediately sparked controversy due to its negative depictions of DID and its villainization of mental illness. Many found the film to be not only offensive but also extremely harmful to the public perception of the disorder. With various scenes cutting between peaceful and violent personalities, an extremely dangerous picture is painted: any individual suffering from the disorder may simply switch at any given moment and start attacking people. However, many studies, which will be discussed in detail later in this essay, have found that individuals suffering

from psychological disorders are statistically no more violent than their neurotypical counterparts.

Furthermore, a very important aspect of this characterization is often glossed over: *Split* is far from the first horror film to exploit and criminalize mental illness. Rather, much of the genre is built on it. Dating back to the 1960 release of Alfred Hitchcock's *Psycho*, various psychological disorders, both named and unnamed, have been used as grounds for a character to be violent and homicidal. *Psycho's* antagonist is a young man, Norman Bates, who suffers from an unnamed mental illness that causes him to take on the persona of his abusive mother. When taking on this persona, he murders various people, including a young woman staying at his motel. The mental illness being negatively portrayed would now be referred to as DID, but was not called such in the actual film. This film laid the framework for the "psycho-killer" and many others followed suit. Suddenly, horror antagonists didn't have to be fantastical creatures like Dracula or Frankenstein's Monster, they could be human beings.

In the two decades following *Psycho's* release, the industry became flooded with the new brand of "homicidal maniac". From *Texas Chainsaw Massacre* (1974) to *Halloween* (1978) to *Friday the 13th* (1995), villains characterized by various symptoms of mental illness filled the theaters. Audiences loved the concept of a "real" killer and Hollywood knew it. While these films may not have given as much focus to the actual mentality and inner struggles of the antagonist as *Psycho* did, it was still clear that the reasoning behind their violent tendencies was assumed to be mental illness. It wasn't until the movie adaptation of Stephen King's *The Shining* (1980) that filmmakers circled back to a more antagonist-led plot structure. Much like *Psycho*, *The Shining* centers around one man, Jack Torrance, and his descent into "madness." Similarly to Norman, Jack has a troubled past as well as delusions that both play a role in his unraveling. Although we are once again not given an actual diagnosis for the character, many analysts believe that Jack suffers from schizophrenia.

While *Split* has been heavily targeted in the media for its controversy and inaccuracies, both *The Shining* and *Psycho* remain revered as some of the best horror films to date. Though they are well-constructed films in many ways, this is cause for concern. These portrayals were cornerstones in shaping modern horror; they have even spurred off a subgenre now known as the psychological thriller. They are commonplace in present-day media, which means that even those who haven't seen the films are likely familiar with them in one way or another. What a majority of the population is less familiar with, though, is what people with psychological disorders are actually like. These films build such a stigma around mental illnesses, such as schizophrenia and dissociative identity disorder, that many people fear even being in the general vicinity of individuals suffering from them. They produce shame, and even

go so far as to deter those suffering from mental illness from seeking care for fear of being labeled as dangerous. Psychological disorders in film, particularly within the horror genre, can be extremely damaging to individuals who want to seek help but are afraid of negative societal perceptions of mental health. After all, films are not just moving pictures; they are active catalysts for real-world perceptions.

Dissociative Identity Disorder in *Psycho*

Alfred Hitchcock's *Psycho* follows Norman Bates, a homicidal motel owner who murders the primary female protagonist and motel guest, Marion Crane. As people begin to investigate the woman's death, Bates goes on to commit another murder and two additional attempts. The key thing to note here, though, is that the audience does not find out Norman is guilty until the end. Throughout the film, it is suggested that his sickly mother is committing the crimes and that Norman is simply another victim of her manipulation. And while the latter half is true, it is revealed that Norman's mother has been dead for a substantial amount of time and that he has been taking on her persona during the murders. While her death was initially ruled as a murder-suicide by her lover, Norman had actually killed them in a fit of rage. It is suggested that Norman's present mental state was a result of childhood abuse combined with unmanageable guilt from killing his mother.

This representation is problematic on a handful of fronts. Firstly, dubbing Bates as simply a "madman" without any particular diagnosis creates a blurred image of mental illnesses, grouping them all together as one generalized concept of "madness". This is damaging because it further alienates individuals suffering from any variant of mental illness by collectively categorizing them as dangerous. In the case of Norman Bates, the modern equivalent of the psychiatric condition he displays would be dissociative identity disorder. However, due to the lack of information about the disorder available following the film's release, many viewers miscategorized the character as suffering from schizophrenia or bipolar disorder. Misguided assumptions such as these can be detrimental and lead to widespread misinformation concerning the symptoms of various disorders. In her article entitled "We all go a little mad sometimes," Sonya Lipczynska contends:

The antagonists in these kinds of films usually display the kind of behaviours, which mainstream media generally considers as indicative of psychopathy. Rarely are these characters diagnosed with any particular disorder (the psychiatrist character at the end of *Psycho* does have a go), but instead, they present with specific symptoms to indicate a general "madness". These include split personality behaviour, talking to imaginary people, violent urges, sadism, manipulation, obsessive behaviours,

remorselessness, and general acts of depravity. Crucially, all these particular antagonists are human beings, made villainous by their mental illness. (61)



Figure 2. Film capture of Norman Bates approaching Marion. 1960, Psycho.

General “madness,” as Lipczynska describes, is extremely prevalent in *Psycho*. There are many scenes throughout the film that portray the violent behavior that Lipczynska is referring to, most notably being the infamous shower scene. The scene shows Marion getting into the shower, followed by Norman sneaking into the bathroom and pulling back the shower curtain to stab her multiple times. The scene is filmed to not directly show Norman, which functions not only as a plot device to maintain the mystery of the killer but also as a way to dehumanize him. The camera is maneuvered in alternating shots that specifically show only Marion or a backlit silhouette of the killer. The act of dehumanization is further shown through the use of dramatic music during the murder followed by the juxtaposed calm demeanor of Bates as he cleans up the aftermath, insinuating a lack of empathy and psychopathy. Even though the audience is led to believe at this point that the murderer is Bates’s mother, Bates’s eerie composure remains unsettling, to say the least.

The violent actions of Norman combined with the psychiatrist’s “psychoanalysis”

(which is being used very liberally as it is not a real informed medical opinion), creates a taboo around matters pertaining to mental health. The film is framing the scenario as “Norman’s mental illness makes him kill people,” which is a misinformed perspective that ultimately leads to negative perceptions. Dissociative identity disorder is not inherently linked to or considered a cause of criminal activity, including homicide (Weberman & Brand). However, characters such as Norman Bates encourage stigma suggestive of villainous intent among those suffering from mental health conditions.



Figure 3. Film capture of Norman smiling sinisterly at the camera. 1960, Psycho.

In one of the final scenes of the film, the audience sees Norman sitting alone in a cell after being caught. While Norman does not appear to be speaking, his mother voices over the scene, implying the killer’s inner thoughts. Mother speaks to the audience, telling them that she always knew Norman was “bad” and that he “intended to tell [the police] that [she] killed those girls and that man” (*Psycho* 1:48:01). The voice of Norman’s mother had been present throughout the whole film, but it is only at this point that she speaks directly to the audience. Ominous music underlays as the camera zooms in on Norman who seems to be in a trance. The audience is intended to be horrified by this, inching closer to Norman’s face as his smile becomes more sinister. This, the only point in which the audience experiences Norman’s psychological condition directly, is explicitly made to be one of the most frightening scenes in the entire film, which further encourages the idea that those suffering from mental disorders are to be feared, even in a calm and resting state.

Schizophrenia in *The Shining*

Jack Torrance, from Stanley Kubrick's film *The Shining*, is another example of violent misrepresentations of mental illness. Note that this is specifically referring to the film, not Stephen King's novel which the film is based on. This difference is critical because while the book focuses much more on supernatural elements, the film takes an approach far more indicative of mental illness. Though the film does incorporate the presence of spiritual entities as a reason behind Jack's homicidal behavior, a majority of audiences still perceived him to be "crazy" or "psychotic" (Mancine 17). This is because many of the behaviors exhibited by Jack in the film are gross exaggerations of symptoms associated with schizophrenia, including delusions, hallucinations, and disorganized behavior (Yusfa 50). This is then coupled with violent outbursts that imply a connection between schizophrenia and violence.



Figure 4. Film capture of Jack's face in the hole of the door he chopped through. 1980, *The Shining*.

One example of such behavior is the notorious "Here's Johnny!" scene, wherein Jack chases his wife Wendy into the bathroom and chops through the locked door with an axe. This scene, much like the one in *Psycho*, is accompanied by dramatic music as well as screams of terror from Wendy as Jack tries to harm her. He hacks away at the bathroom door as Wendy begs him to stop and even tries to defend herself with a knife. At this point, though, Jack has become so engrossed in his delusions that he no longer cares for her well-being and wishes to cause her harm. This outburst is caused by Jack's belief that Wendy is trying to get him to abandon his responsibilities because

she is selfish and doesn't want him to succeed. He is extremely angry at her for this and chases her, trying to stop her from leaving the property. In reality, their son had been injured, and Wendy wants to take him to get help. Paranoid delusions such as these are a common symptoms of schizophrenia (Yusfa 49); however, the violent reaction that Jack had is not.

Another instance of delusion-induced violence is when Jack chases Danny through the hedge maze. This happens after the encounter with Wendy, and it is clear that Jack is exhausted, as well as suffering the effects of the head injury he received in an earlier scene. He eerily stumbles through the maze yelling out for his son, whom he intends to harm. It is the middle of the night, and the maze is hazy and snowy. Intense music once again plays to create an anticipatory effect for the viewer. The scene is extremely dark and intense because it is one of the moments in which the audience is meant to be the most scared of Jack. The concept that Jack is trying to find his son Danny in the middle of the night in a foggy maze and harm him is not only terrifying but unrealistic. This is a man suffering from multiple injuries and paranoid delusions. In a real episode such as this, it is much more likely that an individual suffering from schizophrenia would not be violent, but would rather be terrified themselves. Paranoid delusions more often cause severe and debilitating anxiety and stress, not violence ("Paranoia"). The individual would be much more likely to go into a more catatonic state or sent into an anxiety attack than to chase down and attack their family. Framing the condition as scary and threatening encourages a negative perception of psychosis that can create harmful backlash for individuals suffering from paranoid schizophrenia.



Figure 5. Film capture of Jack walking through the maze. 1980, The Shining.

Violent behavior, such as that exhibited by Jack Torrance, is not considered to be directly caused by psychotic disorders such as schizophrenia (Stuart 122), but this does not stop the film industry from perpetuating this stigma. In a study of films portraying schizophrenia conducted by Patricia Owen, thirty-five out of the forty-one films reviewed depicted characters suffering from schizophrenia as dangerous and violent, and thirteen of them exhibited homicidal behavior (657). This behavior is also often coupled with various other horror tropes such as paranormal activity or cults (657). These portrayals may seem like mere works of fiction, scary movies to enjoy with a bag of popcorn, but unfortunately, the reality is far more detrimental.

Real World Impacts

Whether one claims that the portrayal of psychiatric disorders in the horror genre is merely fiction or a “warning” to the public, the result remains the same. It perpetuates societal bias against those with mental illness. In regards to simply categorizing it as fiction, it is ignorant to assume that means that cinematic depictions don’t influence public perception. Hollywood and the advertising industry have vicious holds on society’s collective subconscious and grossly impact the way that people understand the world around them (Hyler 1047). For instance, an individual who has never encountered somebody suffering from schizophrenia has no other reference than what has been shown to them. Whatever the media puts in front of them, they are inclined to believe. If the film industry is presenting violent images of people with schizophrenia or DID, then audiences have no explicit reason to believe otherwise. The viewer could theoretically seek out resources to help them understand the disorders, but that is assuming they are even aware of their existing bias, which is unlikely.

This stigma is rooted deeply in societal perceptions even though they are not based on fact. This is where the argument that cinematic portrayals are a sort of “warning” comes into play. These warnings and cautionary tales are not scientifically sound, however, and their impacts are staggering. In a study conducted by Bruce Link, a sociologist employed by Columbia University, and his colleagues, it was found that sixty-one percent of participants believed that individuals with schizophrenia were prone to violence (1331). Furthermore, sixty-three percent of participants claimed that they would prefer to social distance from an individual described as suffering from schizophrenia (1332). Another more recent study found that after viewing the film *Split*, participants were twenty percent less likely to be willing to be in contact with a person suffering from DID, and the number of participants who reported a negative impression of the disorder rose from zero to forty percent (Chen 545). The same study

found that after viewing *Shutter Island*, another film that inaccurately portrays DID (although less explicitly than *Split*), participants were fifty percent less willing to get in touch with an individual suffering from DID (545). This is proof that even if a negative portrayal may not be perceived as entirely accurate, that does not negate the overall stigma that is being encouraged by the film. The viewpoints that end up developing as a result of these films are unfortunately very real.

In contrast to this perception, it has been found that the prevalence of violence among those with a major mental disorder was virtually no different from those not suffering from one, assuming that neither party is abusing illegal drugs (Stuart 122). Furthermore, out of those studied, individuals suffering from schizophrenia were statistically least likely to commit an act of violence. More impactful determinants of violent behavior were actually socio-economic and socio-demographic factors, like being a working-class young male (123). A similar study of individuals suffering from dissociative disorders, including DID, found that symptoms of the disorder (emotional dysregulation, dissociation, etc.) were not indicative of criminal activity (Weberman & Brand 9), which greatly contrasts the cinematic portrayals of these disorders in both *Psycho* and *Split*.

Regardless of this research, the public perceptions of these specific disorders, along with public perceptions of mental illness as a whole, remain predominantly negative. This is a very harmful truth, not only because it creates a societal bias against those with psychological disorders, but also because it may deter said individuals from seeking help at all. A review of various studies at Cambridge University concluded in qualitative research that “anticipated and experienced stigma based on stereotypes deters help-seeking directly and through non-disclosure” (Clement 22). This compounded with inaccessible and underfunded mental healthcare puts individuals suffering from mental health conditions at a loss for support and treatment.

Conclusion

As Sonya Lipczynska explains in her article, the primary purpose of any horror movie is to scare its audience. By using mental illness as a motivator for murder, the stigma will only inevitably increase (62). Fueling public fear of those suffering from psychological disorders with villainous caricatures cannot be construed as anything but harmful. Even though the inaccuracy of these portrayals has been proven through empirical research, it doesn't seem to prevent Hollywood from continuously exploiting psychological disorders. Instead, as we see in the recent release of M. Night Shyamalan's *Split*, filmmakers continue to ostracize those with mental illness through depictions of violence and criminal activity.

People suffering from psychiatric disorders are not villains. They don't plan

to sneak up on women in the shower or chase their families with axes through abandoned hotels. A vast majority of them are compassionate people with good hearts that happen to face more complex mental and emotional struggles than the average person. The film industry paints them as “madmen” and “psychos” when in reality they are simply trying to live their lives, the same as anybody else. Individuals exhibiting signs of mental illness or psychosis should be able to seek help without feeling threatened by what social repercussions a diagnosis might bring, and, unfortunately, that will not be the case as long as they are continuously depicted as “psycho killers.”

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