

1980s

Sensational and Emotional Portrayals

In the 1980s, films focused more on the emotional and tragic aspects of mental health conditions, often sensationalizing them. Mental health conditions were linked to extreme behavior or trauma, and individuals were depicted either as innocent victims or burdens. Mental health was often portrayed through heightened emotional narratives, blending psychological struggles with themes of love, sacrifice, and personal redemption.

Mental health conditions were typically not treated with clinical precision but rather as plot devices to generate sympathy or tragedy. The medical treatment of psychological conditions was either absent or depicted as a miraculous event, and formal psychiatric care was rarely shown as part of the healing process. Institutions such as psychiatric hospitals were portrayed as harsh spaces, contributing to the fear and stigma around mental health.

Women were either cast as caregivers, responsible for the emotional and psychological well-being of male protagonists or were shown to be helpless “victims” of mental health conditions, in need of support from male characters.



OVERVIEW - Sadma deals with themes of trauma, memory loss, and the psychological impact of **Amnesia**. The film tells the story of Nehalata, a young woman who suffers from retrograde amnesia after a car accident, causing her to regress mentally to the state of a child. Somu, a kind-hearted man, takes her in and cares for her, developing a deep, complex bond with her. Though Sadma handles mental health with more sensitivity than many of its contemporaries, it still reflects some of the limitations of mental health portrayals in the 1980s.



DIAGNOSIS

Unlike other films of the time, Sadma offered a somewhat accurate depiction of Nehalata's condition. After experiencing a traumatic accident and displaying symptoms, **Nehalata's doctor accurately diagnoses her with Amnesia**, empathetically explains the condition to her parents and appropriately advises them to seek psychiatric help, suggesting that recovery is possible over time.

PORTRAYAL OF TREATMENT

While the initial diagnosis is medically accurate, the film misrepresents Nehalata's recovery. She receives no medical care, and instead, **Somu is advised to take her to a local baba, who attributes her healing to God**. After drinking an unknown potion and falling unconscious, she miraculously recovers. This portrayal reduces her recovery to a narrative device rather than a realistic depiction of mental health treatment.



STIGMA

The film does not explore the stigma surrounding her mental health explicitly, however the treatment she receives from others shows the lack of understanding of her mental health condition. Once she is taken away from her parents, the people around her- unaware of her condition- often view her regression as an innocent or pitiable state rather than a serious medical issue.



KEY SCENES

Somu tells Nehalata, **"Tumhe kuch yaad nahi hai, lekin tumhe kuch yaad aayega"** (**"You don't remember anything now, but you will soon"**), expressing his hope for her recovery, despite not fully understanding her condition. In contrast, others exploit Nehalata's vulnerability, like the brothel madam who dismisses her with, **"Pagal hai, iska kuch nahi ho sakta"** (**"She's mad, nothing can be done"**), echoing society's common disregard for mental health.



OVERVIEW - In the film Arth , mental health is explored primarily through the character of Kavita, an actress, who suffers from a psychological breakdown. The narrative revolves around guilt and insecurity—rooted in her affair with a married man—ultimately leading to her emotional collapse.



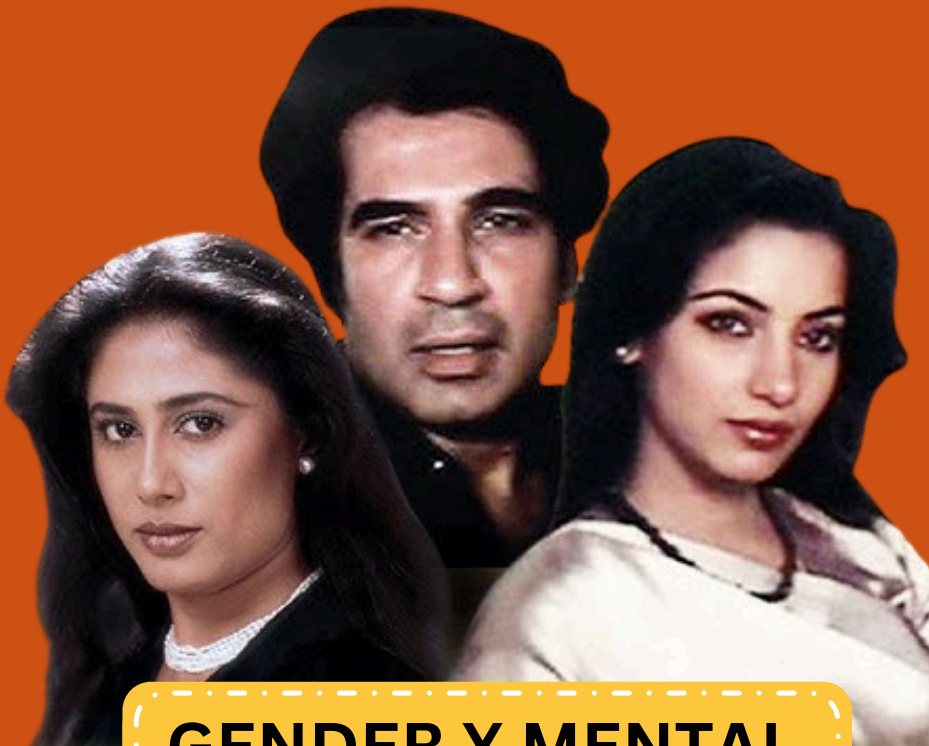
DIAGNOSIS

Kavita is shown to suffer from intense mood swings and emotional outbursts, delusions of insecurity, particularly about her relationship with her lover and paranoia and anxiety related to her self-worth. While the film inaccurately labels her condition as schizophrenia, Kavita’s behavior aligns more closely with borderline personality traits rather than a clinical depiction of schizophrenia. This misdiagnosis reflects the general lack of understanding and misuse of psychiatric terminology in popular cinema.



PORTRAYAL OF TREATMENT

A significant scene highlights the societal perception of psychiatric treatment, where Kavita's mother, fearing the stigma of psychiatric care, begs the protagonist's wife to intervene before her daughter is subjected to Electroconvulsive Therapy (ECT). The film portrays ECT as a horrifying and punitive measure rather than a therapeutic intervention, reflecting the negative cultural attitudes towards mental health treatment at the time.



GENDER X MENTAL HEALTH

The film juxtaposes two female characters: Kavita’s guilt-ridden persona against the protagonist's wife, who emerges as a strong, independent figure by the end. This contrast amplifies Kavita's struggles with insecurity and paranoia. Her distress is portrayed as a direct consequence of her affair, suggesting that mental health issues in women are often depicted as emotional instability stemming from moral or romantic conflicts.

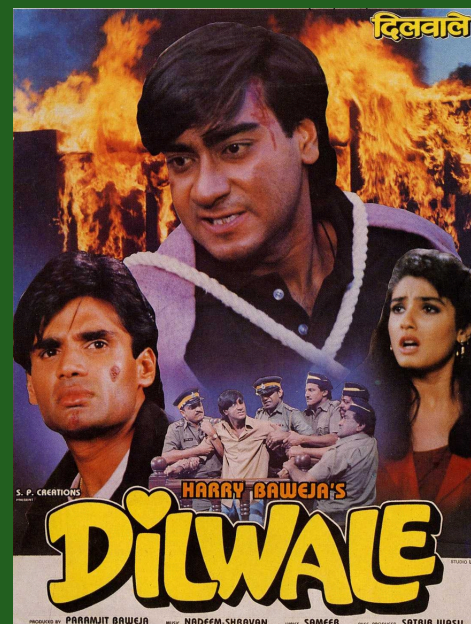
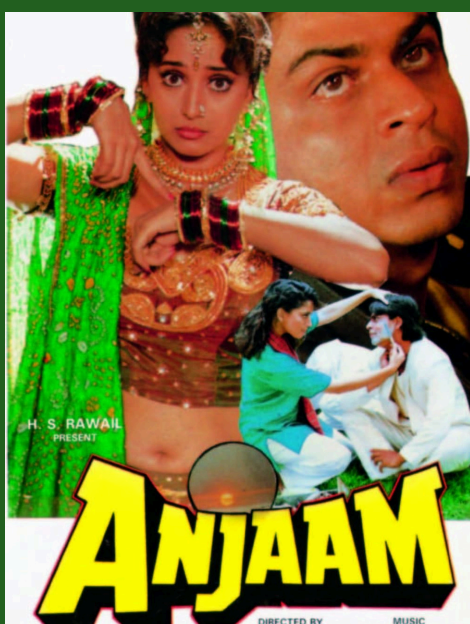
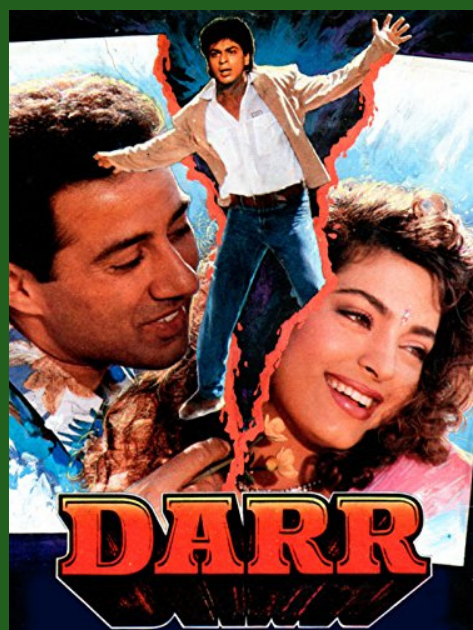
1990s

The Rise of the Anti-Hero and Obsession

The 1990s saw a shift in Hindi cinema from sympathetic portrayals of mental health conditions to a focus on obsession and toxic behavior, often associated with anti-heroes. Obsession and violence were framed as defining traits of anti-heroes, reinforcing the idea that mental health conditions are inherently dangerous.

Films like *Darr* (1993), *Anjaam* (1994), and *Gupt* (1997) sensationalized psychological disorders, presenting characters as obsessive, violent, or dangerous. The absence of structured treatment or support systems further perpetuated the stigma, portraying mental illnesses as inseparable from violence and personal downfall, hindering any constructive understanding of psychological conditions.

Rather than exploring mental health with empathy these films leveraged mental health struggles to heighten suspense and drama, turning personal distress into narrative spectacle.



OVERVIEW - In Darr mental health is explored through the character of Rahul, whose **obsessive love for Kiran drives him to dangerous and violent behavior**. The film portrays Rahul as an anti-hero, blending romantic obsession with psychological disturbance. While the narrative focuses on the thrill and tension of Rahul's actions, it largely overlooks a nuanced or empathetic depiction of his mental health.



DIAGNOSIS

Rahul exhibits **obsessive tendencies, emotional instability, and violent behavior**, bordering on delusion. The film leaves his psychological state ambiguous, focusing on his obsession rather than diagnosing his mental condition.

PORTRAYAL OF TREATMENT

The portrayal touches on Rahul's loneliness, trauma, and obsession with Kiran but lacks a clinical perspective. When his father **consults a psychiatrist—one of the first in a mainstream Hindi film**—the doctor diagnosis him with “multiple issues”, based on preliminary information provided by his father. Rather than support, Rahul is cast as an antagonist, framing his behavior as “madness”, reinforcing the idea of mental disturbances as threats instead of conditions needing empathy or care.

VILLAINIZATION OF MENTAL HEALTH CONDITIONS

The film had the potential to spark meaningful discussions about mental health, particularly among young men. However, it instead reinforced the common trope of romanticized stalking, long embedded in Hindi cinema. Rahul's obsession is sensationalized, casting him as an anti-hero whose psychological struggles are overshadowed by his role as a romantic villain. Rather than being addressed with empathy or clinical understanding, his instability serves as a narrative tool to elevate his character's allure. The repeated use of stalking in these films reflects not just a lack of awareness but a tendency to glorify toxic behavior, with women often positioned as the trigger for the protagonist's descent into emotional turmoil.



OVERVIEW - Dastak offers a portrayal of **Antisocial personality disorder (ASPD)** through the character of Sharad, a deeply disturbed individual obsessed with Miss Universe, Sushmita. The narrative follows his escalating obsession, where he stalks her, writes letters, and hurts himself by cutting his body with a razor. His actions are driven by unresolved childhood trauma, but the narrative does not explore his mental state with empathy or clinical depth.

VILLAINIZATION OF BEHAVIOUR

Dastak follows the trend of 90s Bollywood films in which male protagonists' obsessive love becomes synonymous with villainous behavior. The film feeds into stereotypes of mental health conditions, equating it with criminal or violent behavior. The lack of nuanced portrayal results in the protagonist's mental health being overshadowed by his role as an anti-hero and a villain.

GENDER X MENTAL HEALTH

The female lead is portrayed as both the object of desire and the trigger for the protagonist's downfall, following a pattern observed in films like Darr. This reinforces the harmful trope that women are responsible for men's emotional unraveling, perpetuating a problematic narrative around romantic obsession and mental health.

PORTRAYAL OF TREATMENT

Sharad's past as a patient in a psychiatric hospital hints at a clinical diagnosis, but the film offers little focus on treatment or rehabilitation. Instead, his **intelligence is highlighted by a psychiatrist who describes him as "the most intelligent patient I have ever seen,"** reinforcing the trope of the "tortured genius".



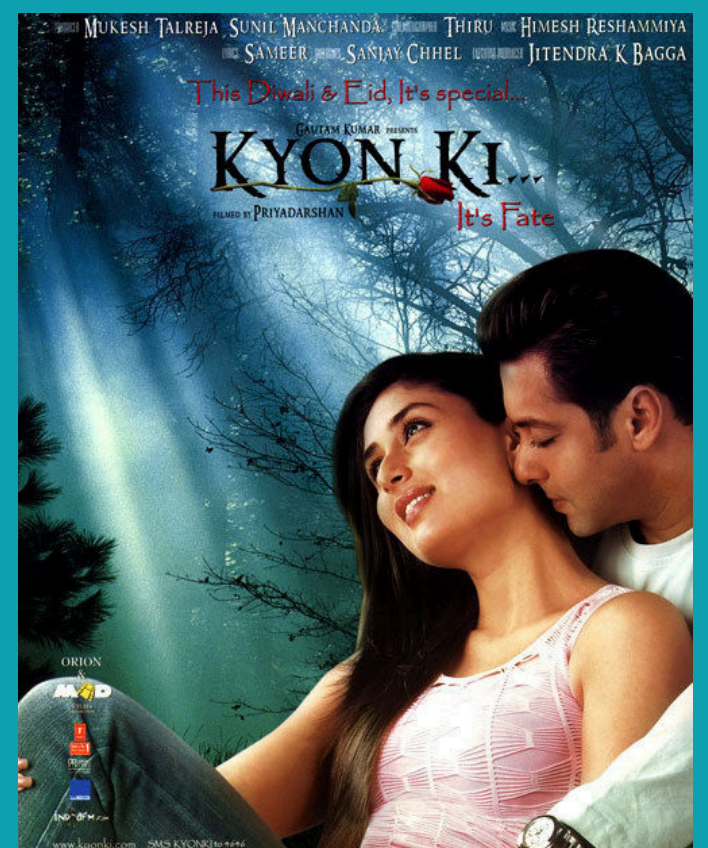
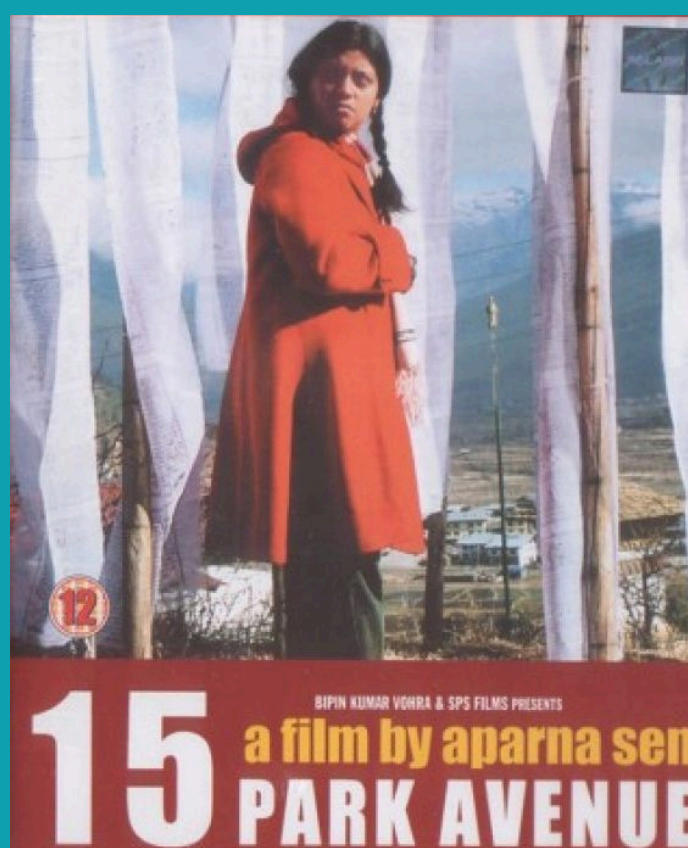
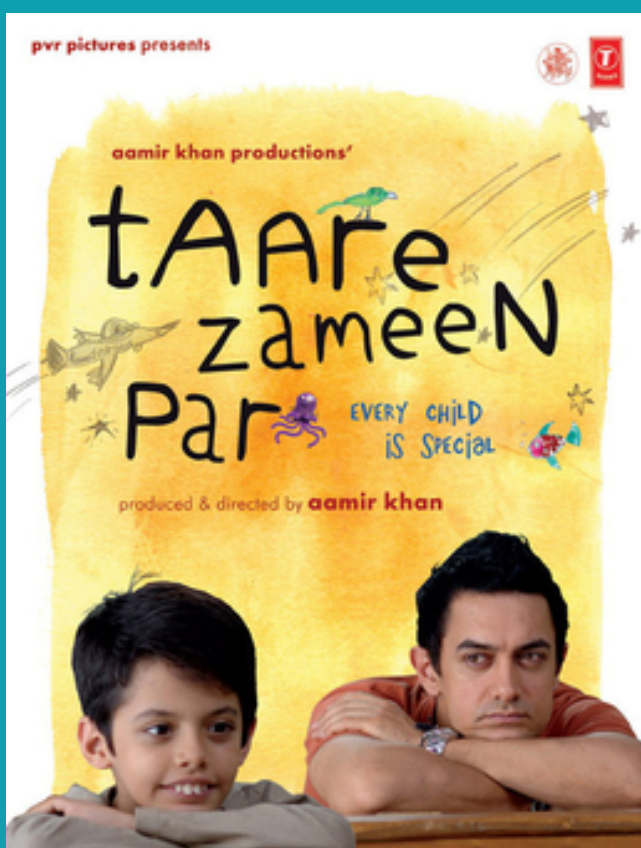
2000s

A Decade of Duality

The 2000s saw a gradual shift toward more realistic depictions of mental health, though many films still fell into old tropes. In some cases, mental health conditions began to be explored with empathy but many narratives still relied on dramatic plot devices for resolution.

While films like *Kyon Ki* (2005) and *Bhool Bhulaiyaa* (2007) sensationalized mental illness through exaggerated portrayals, *Taare Zameen Par* (2007) and *15 Park Avenue* (2005) offered more authentic depictions of conditions such as dyslexia and schizophrenia.

Despite these advances, films in the 2000s often perpetuated the notion that mental health crises, particularly among male protagonists, were driven by failed romantic relationships, reinforcing the problematic idea that depression and mental illness were equivalent to grief caused by unfulfilled love. While this decade showed promise in engaging more seriously with mental health topics, it also highlighted the limitations in the portrayal of recovery and professional support, reflecting the need for a deeper understanding of mental well-being off-screen and better representation of mental health conditions on screen.



OVERVIEW - Radhe's mental health journey follows his **trauma from a brutal attack**, leading to his dramatic decline and eventual institutionalization in an ashram rather than a hospital. The film sensationalizes his condition, using visual tropes like chaining and restraint, depicting mental health as "madness." It fails to show any professional mental health care, such as therapy or counseling.



DIAGNOSIS

When Radhe is hospitalized, the doctor refrains from a specific diagnosis and **suggests curing his mental illness through an ashram**, implying that prayers and non-medical practices may aid healing. Despite concerns from Radhe's friend regarding treatment at the ashram, the doctor defends its harsh measures as necessary to prevent violence among patients.



STIGMA

Radhe's condition leads to his complete isolation—from his family, his community, and even from Nirjara. The response of Radhe's family and community shows how **mental health conditions were seen as a family disgrace**. Rather than receiving support, Radhe is ostracized and isolated, reinforcing the narrative that mental health conditions lead to exclusion from society.



KEY SCENES

Radhe's family is unsure how to handle his condition, believing that his illness is a result of his past wrongdoings. In a particularly powerful scene, Radhe is chained in the ashram, and his brother yells at him, **"I'm tired of you! Do you know how much shame you've brought to our family? What will it take to fix you?"** This moment highlights the stigma surrounding mental health, where the narrative of shame from his family implies that Radhe is somehow responsible for his illness.

PORTRAYAL OF TREATMENT

The film presents a grim and outdated view of mental health treatment, depicting institutions as places of confinement rather than rehabilitation. **Radhe experiences unscientific methods such as prayers and rituals**, led by a godman, instead of proper care. The portrayal of patients, including Radhe, being physically restrained perpetuates the stigma of violence associated with mental health conditions. The conclusion reinforces the misconception that mental health issues can be easily "fixed" through these methods, undermining the need for ongoing care.



OVERVIEW - Bhool Bhulaiyaa, **blends elements of traditional folklore and mental health.** The film revolves around Avni who is believed to be possessed by the spirit of a dancer named Manjulika, leading to a series of strange events in an ancestral palace. However, as the film progresses, it is revealed that Avni is suffering from Dissociative Identity Disorder. The film attempts to introduce mental health as a central theme, but it often oscillates between superstition and psychological reasoning.



DIAGNOSIS

Avni's dissociative identity disorder is initially **confused with possession**, leading her family to seek spiritual remedies due to stigma around mental health. Dr. Aditya, her psychiatrist, diagnoses her condition, linking it to trauma and emotional fixation on Manjulika. The family, initially skeptical, eventually accepts the scientific explanation.



STIGMA

The majority of the characters, including Avni's family, attribute her strange behaviour to the vengeful spirit of Manjulika. **They refuse to consider the possibility of a mental health issue** and instead seek spiritual remedies, including rituals and the use of an exorcist, before finally turning to Dr. Aditya for help. Avni's condition leads her to be viewed with fear and suspicion.

PORTRAYAL OF TREATMENT

The film depicts a family's reliance on **spiritual remedies, like exorcism, to address Avni's possession** by Manjulika, showcasing a preference for superstition over science. Dr. Aditya confronts Avni's dissociative identity disorder by recreating her trauma, which, while effective in the film, contrasts with real treatment needs such as long-term psychotherapy and support. The film's resolution simplifies the complexity of treating DID, reducing it to a single encounter rather than a comprehensive therapeutic process.



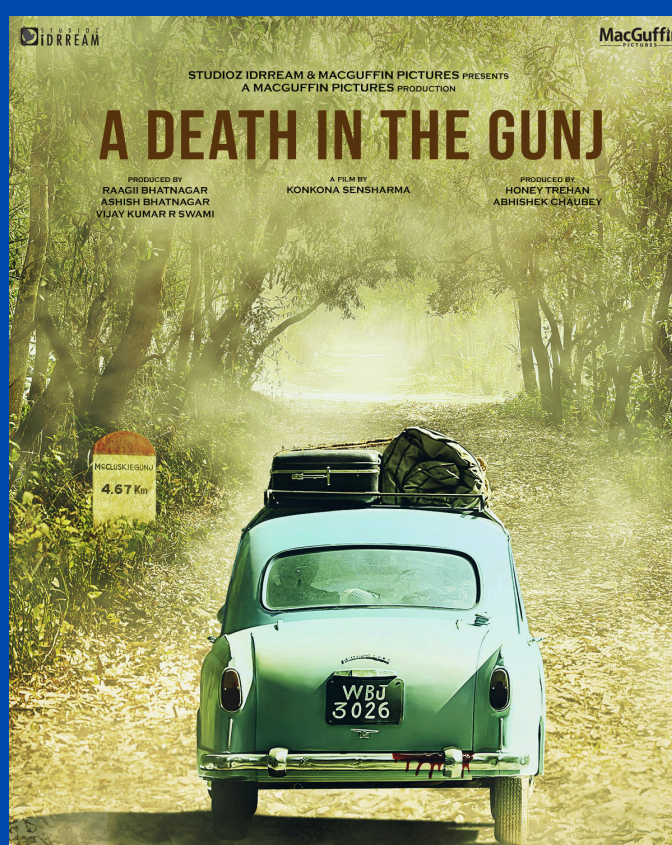
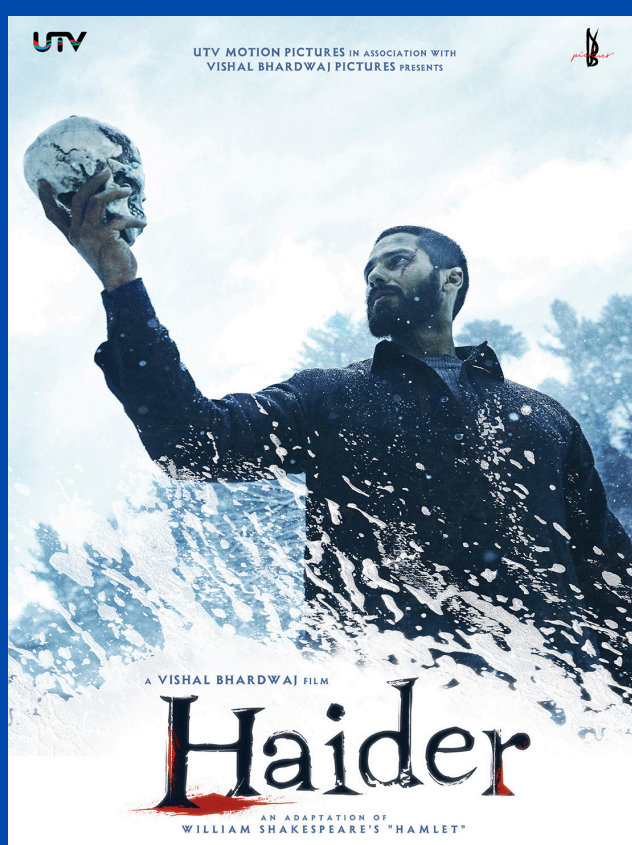
2010s

Evolving Representation, Challenging Stereotypes

In the 2010s, Hindi cinema witnessed a significant shift in how mental health was portrayed, moving toward more realistic and empathetic representations. Films like *Dear Zindagi* (2016) addressed depression through the lens of therapy, although with certain issues around the portrayal of therapist-client relationship and emphasizing emotional well-being. *Tamasha* (2015) explored themes of identity crisis and burnout, portraying how societal pressures can affect mental health.

A notable trend was the shift away from portraying mental illness as sensational or tragic. Instead, these films focused on personal struggles with anxiety, trauma, and recovery, often set in urban environments, reflecting the changing societal narrative around mental health.

Furthermore, female protagonists took center stage in these narratives, challenging earlier stereotypes, where they were shown as triggers for mental health conditions or caregivers. Overall, this period marked a departure from caricatured representations toward more relatable and empathetic storytelling.



OVERVIEW - In Dear Zindagi, the portrayal of mental health marks a significant shift toward a more nuanced and realistic approach in Hindi cinema. The film explores the **emotional struggles of Kaira, a young cinematographer**, focusing on her mental health journey with empathy and insight. The film tried to normalize therapy and offers an encouraging portrayal of seeking professional help.



DIAGNOSIS

The movie explores **insomnia and emotional trauma** through Kaira's mental health struggles, rooted in childhood abandonment. Her insomnia symbolizes deeper issues like fear of commitment and family conflicts. It also addresses the stigma of mental health, highlighting Kaira's hesitance to seek help due to societal misconceptions about therapy and vulnerability.

PORTRAYAL OF TREATMENT

The film presents a refreshing perspective on mental health treatment through Kaira's sessions with therapist Dr. Jehangir "Jug" Khan. **Therapy is depicted as collaborative, conversational, and stigma-free, emphasizing that emotional growth is a gradual process.** Their interactions are relatable and informal, making therapy seem accessible. However, the portrayal may oversimplify therapy, as Jug often acts as a friend and mentor, blurring professional boundaries. While casual elements exist in therapy, therapists typically maintain professionalism to ensure a safe space and prevent emotional entanglement.

SUPPORT SYSTEM

Initially, Kaira's friends and family dismiss her struggles, labeling her as difficult or moody. Her parents' lack of emotional understanding and criticism further isolates her, reflecting the stigma and lack of awareness around mental health. Eventually, **Kaira's close friends offer her emotional support and companionship.** They understand her struggles and provide support and understanding.

KEY DIALOGUES

At a mental health convention, Jug says, **"Crazy is a frightening word! People accept physical problems, but when it's mental health, families act like everything's fine—like the mind isn't part of the body,"** powerfully highlighting the stigma around mental health and the tendency to dismiss psychological struggles over physical ones.



OVERVIEW - The movie Chhichhore explores mental health, focusing on academic pressures and the stigma of failure in Indian society. It follows a group of college friends reuniting after one of their sons attempts suicide due to exam stress. The film illustrates how failure is stigmatized, causing emotional harm to youth. **It sensitively portrays how parents and peers can intensify this pressure**, contrasting college life to highlight the importance of prioritizing mental well-being over societal expectations.

SUPPORT SYSTEM

Upon discovering Raghav's suicide attempt due to academic pressure, his family reacts with shock and concern. **The parents prioritize supporting him with love and reassurance, emphasizing resilience and the importance of finding joy beyond grades.** They foster open communication to help Raghav cope with pressure and understand that failure is not the end, promoting healing through their united front.



KEY DIALOGUES

In one scene, the doctor treating Raghav says, ***“Mental health bhi physical health ki tarah hi zaroori hai.”*** (***“Mental health is as important as physical health.”***) while he explains to the family the importance of taking care of mental well-being alongside physical recovery. This line underscores the film’s key message—that mental health should not be ignored and should be taken as seriously as physical health.



PORTRAYAL OF TREATMENT

Chhichhore emphasizes the role of social support and acceptance in mental well-being. The reunion of Anni and his friends serves as a metaphor for the healing power of relationships and shared experiences, showing that openness can foster resilience. However, the film also subtly reflects the lack of professional mental health interventions—highlighting that emotional support from peers and family, though important, cannot replace professional help.



2020s

Empathy, Inclusivity But With Limitations

In the 2020s, Hindi cinema continued to evolve in its portrayal of mental health, reflecting increased awareness and a shift toward more authentic depictions. Films and streaming series from this period focus on individual struggles with trauma, emotional well-being, and systemic challenges faced by those dealing with mental health issues.

While films like *Atrangi Re* (2021), have been heavily criticized for their representation of mental health and therapy, OTT platforms have portrayed characters to be open and non-judgemental towards therapy. Additionally, OTT films like *Qala* explored the long-term impact of intergenerational trauma and sexism. The film emphasizes that trauma is not easily resolved, and it explores how emotional neglect and gender discrimination shape mental health challenges, especially for women in the public eye.

Sensitive depictions of male mental health, though still under-explored, is beginning to receive some attention through discussions around toxic masculinity and its emotional toll.

Importantly, these portrayals tend to integrate mental health issues into everyday settings, moving away from the institution-based narratives of earlier decades. This shift aligns with a broader cultural change toward destigmatizing therapy and emotional vulnerability, fostering more empathetic and inclusive mental health discourse.



OVERVIEW - Qala sheds light on mental health by exploring **emotional struggles without villainizing anyone**. Each individual's behavior is shaped by their environment—Qala faces inner turmoil, while her mother remains bound by societal conditioning. The film also depicts the young musician Jagan grappling with the emotional fallout of losing his voice, emphasizing how personal trauma and professional setbacks deeply impact mental well-being.

EXPERIENCES OF MENTAL HEALTH CONDITIONS

Qala faces emotional neglect & abuse from her mother, who enforces strict gender norms, telling her she can never be a Pandit. This **trauma leads to guilt, hallucinations, and feelings of inadequacy**, as she struggles with visions of her deceased brother & enduring constant comparisons to Jagan. These experiences result in severe anxiety, paranoia, and suicidal thoughts, highlighting the long-term impact of emotional abuse on mental health.

PORTRAYAL OF TREATMENT

The stigma surrounding mental health becomes apparent in how Qala's symptoms are dismissed. When she consults a doctor, she openly mentions her mental struggles, but her **concerns are brushed off as "overthinking" or attributed to hormonal changes linked to menstruation**. This reflects the persistent sexism in healthcare, where women's emotional and mental distress is often trivialized. The film subtly critiques the outdated practice of diagnosing emotional outbursts as "hysteria," a condition historically treated with restrictive 'rest cures,' forcing women to withdraw from work and isolate themselves.

GENDER X MENTAL HEALTH

Qala's mental breakdown illustrates the long-term impact of intergenerational trauma and sexism. The absence of meaningful support from her mother and the pressures to meet rigid expectations highlight how mental health is neglected. **The film subtly critiques how women in creative fields, despite their success, face emotional exploitation and societal disregard.** This nuanced depiction shows progress in the representation of mental health, addressing the complexity of emotional struggles while critiquing the systems that perpetuate them. The film emphasizes that trauma is not easily resolved, and it explores how emotional neglect and gender discrimination shape mental health challenges, especially for women in the public eye.



OVERVIEW - Atrangi Re delves into **complex psychological themes involving trauma, dissociation, and coping mechanisms**, while mixing it with romance and fantasy. The overall depiction of Rinku's condition is problematic, wherein her mental health condition is exploited for comic effect. The title of the film itself means 'unusual' or 'weird', which serves as an indicator of what the filmmakers were trying to depict in the film and hints how insensitively the issue is dealt with.



DIAGNOSIS

The film follows Rinku, who hallucinates a fictional lover, Sajjad, after her parents' murder. While the film accurately portrays Rinku's experience of hallucinations, it falls short in showing how such symptoms should be properly managed and treated. For instance, the psychiatrist discusses Rinku's condition in a lighthearted, almost dismissive manner. He suggests that she should be "kept in a museum" and laments that she's "freely roaming" the streets of Delhi. To make matters worse, he initially congratulates his friend for avoiding a "disaster" by not falling in love with a woman he refers to as "crazy." He further trivializes her condition by labeling her symptoms as 'paagalpan' or 'madness.' This satirical portrayal perpetuates stigma around mental health conditions and downplays their seriousness.

PORTRAYAL OF TREATMENT

Instead of addressing her trauma with appropriate therapy, the characters devise a plan to "play along" with her delusions, making it seem like her imaginary lover, Sajjad, is slowly disappearing from her life. This attempt to "wean her off" her hallucination lacks real psychological depth or grounding in evidence-based therapy, like cognitive-behavioral therapy or trauma-informed therapy, which might have been more appropriate in real-life scenarios.

Additionally, they attempt to 'cure' her schizophrenia using unprescribed medication, without any professional treatment or consultation. The pills given to Rinku seem to have an immediate effect, instantly eliminating her hallucinations upon taking them. However, the psychiatrist's emphasis on medication as a necessary part of Rinku's treatment is a small positive note. Seeking professional help is crucial in managing schizophrenia, as it requires ongoing treatment, even when symptoms subside. A combination of prescribed medication and psychosocial therapy is essential for effectively managing the condition.

SUPPORT SYSTEM

Rinku's erratic behavior is often seen as rebellious, with her family viewing her as problematic rather than understanding her psychological distress. Her grandmother, **Dulhayen, lacks compassion and support, opting for control and punishment by forcing Rinku into marriage** to handle her perceived "issues".