MEDIA PORTRAYAL OF MENTALLY DISORDERED OFFENDERS: A CASE STUDY

Jodie Alder goes behind the headlines to show how the media’s treatment of people with mental health problems can cause further problems and stigmatisation

Abstract

The negative portrayal by the media of people diagnosed with a mental health disorder who commit crime can have profound effects on all concerned. In cases where the manslaughter of a stranger occurs in a public place, the media coverage is widespread and affects the offender, the victim’s family, mental health services and even the care, treatment and legislation of all those diagnosed with a mental health disorder.

This article will use the case of John Barrett, who murdered a stranger, Denis Finnegan, in a London park. It will demonstrate how, and attempt to understand why, media saturation occurs. A thematic analysis of newspaper coverage representing this case was undertaken with reference to existing literature, which provided three themes: the mentally disordered offender as ‘other’, the concept of blame and race.

Keywords
mental health, race, stigma, forensic services, dangerousness

THE IMPLICATIONS of the negative portrayal by the media of people diagnosed with a mental health disorder who commit crime are profound. This article will use the case of John Barrett, who murdered Denis Finnegan in Richmond Park, London, in September 2004, to deconstruct the newspaper narrative surrounding such cases.

Like previous cases involving offenders with mental health disorders, the case of John Barrett received widespread UK media attention and went on to challenge the ways in which mental health services provided care and supervision to people diagnosed with a mental health disorder in forensic mental health services. Paterson (2006) stated that it is important to provide an explanation of why some events come to be influential and pay detailed attention to the way in which they are reported by the media and, in particular, how responsibility for such events comes to be attributed.

An extensive literature review of the media portrayal of mentally disordered offenders was undertaken and informally analysed for recurring themes. The literature was then cross-referenced with articles that focused on the John Barrett case drawn from UK tabloid and broadsheet newspapers accessed via internet archive facilities, ranging from the date of the offence to the present day. As a result of this process, the following emergent themes will be discussed: the mentally disordered offender as ‘other’, the concept of who is to blame and race.

The case of John Barrett, his history and the incidents leading up to the offence committed by him are outlined in detail in the official inquiry report published, as required, by the Home Office in all cases involving homicide committed by people known to have contact with mental health services (NHS London 2006). The report will not be discussed here.

Mentally disordered offender as other
Murder is a heinous crime whoever commits it, but mentally disordered offenders such as
John Barrett are placed in a different socio-legal category from that of ‘normal’ murderers, where they occupy a distinct and discreditable stratum of deviancy. They are portrayed as unreasonably dangerous and represented by the media as ‘double trouble’: mad and bad (Morrall 2000).

Many of the newspaper articles reporting on the John Barrett case positioned him not only as someone who had committed murder, but also as someone diagnosed with a mental illness. Examples of headlines included ‘Violent, mad, set free’ (The Sun 2005), and ‘Schizophrenic admits killing park cyclist’ (Daily Mail 2005).

In the parameters of accepted newspaper commentary the fact that John Barrett was diagnosed with a mental illness was used to define him and to act as an explanation for the otherwise seemingly inexplicable act. This can be attributed to the fact that mental illness is considered a challenge to the ontological security of members of society (that is, the way in which people give meaning to their lives, and feel secure through the maintenance of routine and order). Laurance (2003) stated that society is now a place in which traditional sources of predictability and reassurance are breaking down, and people have free floating anxieties that are projected onto ‘monsters’ such as paedophiles or those diagnosed with a mental illness. Media coverage of crimes committed by mentally disordered offenders seeks to define them as ‘other’ and to separate them from ‘us’. Morrall (2000) suggests that, unlike ‘normal’ murders, those committed by mentally disordered offenders are perceived to undermine not only the safety of members of the public, but also the ‘rational’ basis of society.

Morrall (2000) also stated that mental illness has come to be viewed as placing the health of rational social systems in jeopardy in a way that no other type of deviancy does. Madness intimidates authority so profusely because unintelligible actions and words, particularly when flaunted in public, openly contest social norms based on reason. The credibility of the ‘rationalist’ paradigm is undermined by the ‘crazed’ behaviour and thoughts of the mentally disordered offender, as when an innocent bystander, such as Denis Finnegan, is inexplicably killed by someone diagnosed with a mental illness, such as John Barrett.

Newspaper coverage of murders committed by mentally disordered offenders have been found to portray such offenders as having no social identity and as ‘different’ from and ‘unlike’ ‘normal people’ in an attempt to restore order and meaning to the ways in which we see the world and strengthen the dichotomy between ‘us’ and ‘them’ (Stout et al 2004). Such interpretative framing reinforces our superiority over ‘them’ through the use of polarised distinctions between normal/abnormal, good/bad and responsible/irresponsible.

Newspaper coverage of the John Barrett case referred most frequently to the victim Denis Finnegan as a ‘former banker’ (Akbar 2006, Laville and Taylor 2006, Frean 2005), but also framed him as a successful, employed middle-aged man. In contrast John Barrett was referred to most consistently as a ‘paranoid schizophrenic with a history of violence’ (Akbar 2006, Laville and Taylor 2006, Frean 2005), a statement that was factually inaccurate. The official inquiry established that John Barrett had a diagnosis of delusional disorder at the time of the index offence, not paranoid schizophrenia as consistently reported.

This is an important distinction and it is suggested here that paranoid schizophrenia was the phrase chosen to represent John because, unlike delusional disorder, it does not require an explanation in the same way: it is a term that is widely associated with the concept of dangerousness and may vividly conjure up pictures of similar ‘deranged’ killers such as Peter Sutcliffe, who have received the same diagnosis. By being associated with other well-known cases in this way, it negates the requirement of the newspaper to define the diagnosis or explain what it is. However, because of the similarities between the diagnoses, I believe there is also little cause to challenge it as a factual misrepresentation.

Who is to blame?
In cases such as John Barrett’s, instead of punishment and incarceration, mentally disordered offenders often receive mental health dispositions so that they can receive treatment and rehabilitation. Such outcomes are often difficult for the relatives of the victim and the general public to comprehend. Society finds itself unable to blame the offender, who is found to have diminished responsibility, and therefore retribution is unable to be sought in any meaningful way. Blame is instead apportioned to external agencies that may be implicated in the care of mentally disordered offenders and this blame is often directed at mental health services.

Morrall (2000) found that criticism directed towards practitioners and the health service is more frequent and prominent in the newspapers than ‘moral panics’ about the dangerousness of the mad; it is not the mentally disordered offenders that are maligned but those responsible for their care. If a moral panic has been orchestrated around
mentally disordered offenders, it has been directed at the psychiatric disciplines and systems of mental health care (Morrall 2000).

Blame is most often directed at three levels:

- Service reforms, in particular the deinstitutionalisation of mental health services.
- Service-level mismanagement.
- Inadequate mental health legislation.

‘Care in the community’ and the deinstitutionalisation of mental health services was controversial from the start (Philips 1998). However, the murder of Jonathan Zito on a London Underground platform in 1992 by Christopher Clunis, a man diagnosed with paranoid schizophrenia, marked a watershed in the history of mental health care in the UK. Until that point, the focus of public concern had been on the welfare of patients discharged into the community as the old Victorian asylums closed. However, after Jonathan Zito was murdered, the focus shifted to the protection of the public (Laurance 2003).

An article in the Daily Mail (Hardcastle 2006) voiced this demonisation of care in the community in an article entitled: ‘Forget the killer’s rights, what about protection for the innocent public?’ In it Hardcastle stated that one person a week is killed by someone ‘receiving laughably what is called care in the community’, violent schizophrenic John Barrett was able to walk out of hospital and stab to death a man who happened to be cycling past. What kind of care is it that allows someone who is not responsible for his actions to end up killing someone?

The article highlighted two core beliefs of the psychiatric services: mentally ill people should be cared for in the community and everything done against their will was an abuse of their human rights: ‘As a result, community care became a mantra that could not be challenged, even when it was demonstrably failing’ (Hardcastle 2006).

McKenna et al (2007) stated that media scrutiny is also directed at service-level mismanagement for allowing mentally disordered offenders to ‘slip through the protective net’. These criticisms include blaming deficits in information transmission across services, compromised clinical decision making, alleged inappropriate discharge of persons from compulsory treatment and lack of post-discharge clinical follow up, all of which were themes in the newspaper commentary concerning John Barrett (McKenna et al 2007).

Risk management and its prediction has increasingly become a focus of mental health care in the light of this inquiry culture. Prins (1999) stated that much of the concern about risk has been media driven; mental health, criminal justice and legal professionals are forced into making predictions, and subsequently there may be an assumption on the part of the public that such professionals are capable of getting it right every time, which is not the case. Newspaper coverage of cases such as John Barrett’s often refer to the much-quoted statement made by American psychologist Kvaraceus in 1966 that ‘nothing predicts behaviour like behaviour’ (Prins 1999), the implication being that due to John Barrett’s violent offending history, better predictions of risk should have been made. However, such statements rely on statistical error and reinforce the fallacious view that risk is a static phenomenon.

The media’s apportioning of blame to external agencies does not end with mental health services: it is also attributed to inadequate mental health legislation within which mental health professionals manage mentally disordered offenders. Following John Barrett’s guilty plea on the grounds of diminished responsibility for the manslaughter of Denis Finnegan, the then secretary of state for health John Reid stated that the national implications of the case should be examined (BBC 2005).

Following the publication of the official inquiry, Rosie Winterton, the then mental health minister, stated that in response to the report a new mental health bill would ‘make it easier to ensure people with mental disorder receive the treatment they need’ (Revill 2006). The Mental Health Alliance, a coalition of 75 mental health organisations, expressed anger that the government was seen to use the killing of Denis Finnegan to justify an attempt to overhaul existing mental health legislation and introduce compulsory treatment in the community of people with a mental illness. In numerous articles (Goodchild 2005, The Independent 2006) The Independent newspaper shared the alliance’s outrage, stating that for five years it had campaigned for better understanding of mental illness and better provisions for the mentally ill. The articles also stated that the draft mental health bill, as it was then, provided neither of these requirements.

In December 2006, The Independent published a leading article entitled ‘An affront to human decency’ (The Independent 2006). It suggested that the government had timed the publication of the inquiry into the care and treatment of John Barrett for the day after the Queen’s speech in which the draft mental health bill was reintroduced. It went on to state: ‘The government’s obsession with being seen to act on the concerns of the sensationalist press is cowardly and dishonest. Instead of
emphasising the good work done in dealing with common forms of mental illness, it pretends that new draconian laws will deal with the failures of the system in atypical cases of patients with a history of violence.’ In an earlier article (Goodchild 2005), it was stated that the irony of the government’s use of the John Barrett case to highlight the need for change in the Mental Health Act 1983 was that the proposals would not have prevented the offence committed against Denis Finnegan as the official inquiry indicated - failures in the mental healthcare system may have been systemic, but legislation was not the answer.

Big, black and dangerous?
The term ‘big, black and dangerous’ was first used in connection with mentally disordered offenders by Prins et al (1993) during an inquiry to investigate the death of a young African-Caribbean patient, Orville Blackwood. The inquiry also reviewed the reports of previous inquiries into two other deaths of African-Caribbean patients at Broadmoor hospital, Michael Martin and Joseph Watts, to see if there were any common themes.

The inquiry made a number of conclusions, most relevant to this article being that a culture of racism existed in mental health care, most of it at an institutional level of racial bias against ethnic minorities. Fernando (1995) stated that the additional concepts of psychotic and delusional illnesses carry their own special images of alienation, dangerousness and inferiority - all of which get mixed up and compounded with cultural misunderstandings and mistakes. He claimed that the development of schizophrenia as a psychiatric diagnosis can be seen as a deeply racist process. Fernando reported that despite Europe’s great military power at the beginning of the 1900s, there was a sense of insecurity felt worldwide. Rising crime rates and the apparent failure to contain criminality and insanity were giving rise to anxiety in Europe’s ruling classes. Psychiatric and psychological thinking at this time was strongly influenced by the concepts of degeneration, which attributed lunacy and racial inferiority as inborn qualities of an individual, and atavism, which explained criminality and insanity as reversions to primitive stages of racial evolution. Schizophrenia was perceived from the start as a form of degeneration and atavism.

Philo (1996) claimed that institutionalised racism can be equally applied to the media’s coverage of violent crime committed by ethnic minorities. While most newspaper coverage does not explicitly identify race as a factor in offences, including the case of John Barrett, by using visual images the implication of race can be made in a more subtle way.

Entman (1990) stated that African-Americans were more likely than Caucasians to be featured in news stories about crime, were more likely to be portrayed as dangerous and were more likely to have images shown of them. In the vast majority of newspaper coverage, images of John Barrett, as a mixed race male offender, and Denis Finnegan, a white male victim, were used. All of the images used of John Barrett showed him handcuffed to a white prison guard. In contrast, photos of Denis Finnegan portrayed him relaxed and smiling at a social event. Entman (1990) found that black offenders were far more likely to be pictured physically restrained than their white counterparts in an attempt to reassure the public that the ‘big, black and dangerous’ offender is securely held in custody.

There is evidence that the newsworthiness of a violent offence increases when the victim is white. This motivated Sorenson et al (1998) to coin the term ‘worthy victim’ to describe those who get attention in newspaper coverage of murder. It was found that such coverage focused on ‘the worthy victims: the white, youngest and oldest women of high socio-economic status, who are killed by strangers’. Denis Finnegan fulfilled many of these criteria.

Murder involving black offenders and white victims, such as in the case of John Barrett, are more likely to be seen as newsworthy because they use stereotypes grounded in white racism and white fear of black crime. Lundman (2003) claimed that what can be viewed as institutionalised racism within the media may not be conscious on the part of the journalists producing newspaper coverage. He found that journalists are simply not aware of the ways in which race typifications affect their work. Journalists construct news on a daily basis and they make their decisions about what is newsworthy under considerable time pressures, revolving around tight and recurrent deadlines. Journalists rarely have the time or the inclination to take a reflective look back, or an anticipatory look forward, at their own work or that of their colleagues. They are creatures of the present and respond by producing newspaper coverage that reflects race typifications.

Discussion
Philo (1996) stated that journalists are bound by their own codes of practice to avoid reporting the cases of crimes committed by mentally disordered offenders in an inflammatory or derogatory way. In the second edition of the Broadcasting Standards Council Code of Practice concerns about the portrayal of mental illness are...
reflected in a new section on violence and mental health: ‘Because some forms of human behaviour seem incomprehensible, the assumption may be made that the persons concerned are mentally ill. It is important in reporting acts of criminal violence not to associate them intrinsically with questions about the mental health of their perpetrators’ (Philo 1996).

In the book On Monsters; An Unnatural History of Our Worst Fears (Asma 2009), Judge Brodsky is quoted as saying that newspapers need to recognise their role in creating and maintaining lazy stereotypes and attempt to provide a wider and more complex portrayal of mentally disordered offenders. He says: ‘There is absolutely no doubt that people do monstrous things, but if we are going to be a civilised society then we have to struggle with the real complexities of crime and not the cartoon versions of saints versus monsters. The media, with their simplistic monster labels are partly to blame for overdramatizing criminals and closing off real understanding. They have invested interest in fostering these dehumanizing labels, it makes for “good news” and creates profits. Add to that the fearmongering of politicians who are “tough on crime” and you have a recipe for public misconception, a picture of crime and punishment that bears little resemblance to reality. In addition, mass communication tends to oversimplify a message; when reporters cover crime, the complexities are eliminated and criminals get transformed into monsters.’

### Conclusion

I have used the case of John Barrett to explore the complexities of the way in which his case was portrayed by the media and used for political purposes to maintain order and stability in society, and to reassure the public. This article has aimed to situate him not as a deranged monster, but as a man who had a mental illness and who committed a horrific crime.

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