

When Art Invalidates Trauma – Movie review of “Chup: The Revenge of the Artist”



To the editor,

Chup, directed by R Balakrishnan (Balki), is an engaging crime thriller.¹ The protagonist, Danny, experiences repeated childhood abuse from his father. As a coping mechanism, he develops an alternate personality. He makes two cups of tea, orders *Vada Pao* for two people, and communicates with an alter ego who is more arrogant, apathetic, and vengeful. The movie revolves around his serial killings of biased or paid movie critics who perform reviews unethically.

We aim to review the movie through a psychological lens.

Depiction of the Protagonist: The diagnosis

The movie makes it clear that the protagonist has a psychiatric illness. However, the exact diagnosis remains elusive. The closest we could assume was dissociative identity disorder (DID).

The alters in DID do not directly communicate among themselves.² However, the two alters of the protagonist show this, with complete awareness of the alter ego, which makes it unusual for DID. We reviewed other cinematic portrayals of DID and found that its symptoms are commonly employed to depict

schizophrenia, leading to audience misconceptions.³ These films often blur the boundaries between DID, schizophrenia, and psychopathy.³ This is exemplified in the movie *Voices Within*, which equates auditory hallucinations with DID. Though DID and schizophrenia can be comorbid,⁴ enough information is not provided in *Chup* to consider phenomenology suggestive of schizophrenia. The protagonist may be harbouring distress related to a personally-sanctioned “overvalued idea” that biased film critics should be punished to death based on how they have critiqued a movie.

Childhood trauma is strongly associated with DID.² This is depicted in the movie. However, in many movies, the narrative usually weaves around the character’s journey from a repressed trauma to an eventual cure.³ This was seen in *Identity*, *Raat Aur Din*, and *Anniyan*, where the generally “repressed” protagonists take on new identities to fight injustice.

Also, the ability of the protagonist to maintain a romantic relationship, emotional bonding with his mother and dog, and the lack of legal troubles do not fit into the psychological construct of psychopathy.

Irrespective of the diagnosis, the brutality depicted in the protagonist can increase the stigma towards people with mental illness (PMI). In cinema, the portrayal of negative aspects of psychiatric disorders and patients consistently exceeds the positive ones.⁵ Violence, boundary violations, sensational melodrama, and suicide are common themes of negative interpretation of PMI. They are portrayed as caricatured stereotypes such as homicidal, anti-social, deceptive, narcissistic, and even as zoo specimens.⁶ Such negative depictions increase the stigma towards PMI as they influence the public image and shape community attitudes.⁶ In reality, PMI are likelier to be victims of violent crime than perpetrators.⁷

Depiction of the Mental Health Professional (MHP)

Schneider argued that the portrayals of MHPs in movies are not representative of the actual profession but rather exaggerations, of the story plot, of certain aspects or characters.⁸ Bollywood movies

also have described MHPs in myriad ways. For instance, while in *Bhool Bhulaiyaa* Akshay Kumar is shown as eccentric, in *Dear Zindagi*, Shahrukh Khan is depicted as an empathetic and skilled professional.

In this movie, the police think of approaching a psychologist when looking for a person who thinks “differently.” The psychologist visits *Ashram* as her getaway and passes distasteful comments like “You critics are killers,” making her character appear impudent.

The movie, however, talks about the importance of forensic psychology, which will likely promote this subspecialty in India.

Psychiatric Illness and Criminality

The false consideration of the equivalence of psychiatric illness and criminality stems from incorrectly labeling all criminals as PMI. The Indian Penal Code protects those who have a severe mental illness if they cannot appreciate the nature of the crime and differentiate right from wrong.⁹

However, DID poses unique medicolegal challenges. Courts generally reject DID as a diagnosis due to a lack of validity, and reliability in the diagnostic process and limited knowledge of etiology. Additionally, there is the possibility of people faking the disorder, which poses challenges in determining legal responsibility for the crimes committed, given the possible claims of insanity defence on the grounds that the perpetrating alter is different from the person who is being punished. The case of Chris Sizemore, who had two very distinctive identities, named *Eve White* and *Eve Black*, and how *Eve Black* committed a prohibited act but *Eve White* had no memory of it, is used as an argument to support protecting DID patients from facing legal liability for the illegal actions committed.¹⁰ Some courts have adopted the method of judging several identities within a patient with DID as separate identities, but also hold the innocent identities too responsible for the crime.

A framework is needed to define whether DID should be considered a valid reason for a person’s incompetence to stand trial or non-liability for a crime.¹¹

Conclusion

Chup has done commendable work in cinematography and storyline and highlights the role of MHPs in understanding criminal psychology. While the movie's protagonist was portrayed as having a mental illness, the movie lost an opportunity to advocate help-seeking and healing from trauma. The brief reference to the psychiatric care facility was in a negative light (Portrayed in black and white, with the patient being unresponsive as a distressed mother visits him). It also lost an opportunity for the previously introduced psychologist to interact with the protagonist. Most importantly, the movie falls short of the groundwork about psychiatric illnesses and their treatment.

Considering the influence of movies on the public, filmmakers need to represent mental-health-related issues sensitively and accurately within the realms of creative freedom. They can consider consulting MHPs and persons with lived experiences of mental illness before producing the movies. They can also promote help-seeking and advocacy by displaying relevant information before or during the movies. Perhaps, an argument can be made by professional bodies to the appropriate authorities for including MHPs in the censor board, especially for movies that depict mental disorders.

Till such a change occurs, MHPs should act as advocacy agents and support, critique, and empower art and movies where appropriate.

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