Characters with Mental Health Challenges in Anglophone TV Series and Chinese Audiences

by

Xin Li

Submitted in fulfilment of the requirements for the Degree

of Film and Television Studies

School of Culture and Creative Arts

College of Arts

Oct 2025

Abstract

In this thesis, I discuss the portrayals of characters with mental health challenges in Anglophone television dramas and Chinese audiences' engagement with these characters. Combining television analyses and audience research, I employed a variety of methods for character and audience analysis, including textual analysis, online questionnaires, and semi-structured interviews. For television studies, this research validates and expands upon the existing academic perspective by proposing that attachment theory, a psychological framework that explains how early relationships with caregivers shape emotional and relational patterns throughout life, and trauma narratives have been used as a type or paradigm to describe characters with mental health challenges, and I further propose a positive paradigm shift regarding the characterisation of 'madness and genius'. To address the research gap in audience reception, I examine the interpretations, gratifications, and emotional engagement of Chinese audiences with characters with mental health challenges in Anglophone TV series. In the area of cross-cultural research, I demonstrate the cultural influences on Chinese audiences' reception, revealing the complex interactions between representation, interpretation and identity across cultural boundaries.

Table of Contents

List of Tables

List of Figures

Acknowledgement

I sincerely appreciate everyone's contribution to this thesis:

Thanks to my supervisors, Dr Ian Goode and Professor Ian Garwood, for your invaluable guidance and support throughout this journey. Your insights and encouragement have been fundamental to the completion of this work.

Thanks to all the participants who generously shared their thoughts and experiences with me through the questionnaire and interviews. Your input has been essential to this research.

Thanks to my parents, who have supported my dreams.

Thanks to my friends for their steadfast companionship and encouragement.

Thanks to every charming character with mental health challenges who has attracted and inspired me. You will always hold a special place in my heart, with particular thanks to James and Beth in this thesis.

Thanks to Cael for everything.

Finally, thanks to myself for accomplishing all of this.

Author's Declaration

"I declare that, except where explicit reference is made to the contribution of others, that this dissertation is the result of my own work and has not been submitted for any other degree at the University of Glasgow or any other institution."

Printed Name: Xin Li

Signature: _____

Chapter 1 Introduction

1.1 The Overview of the Research

This project began with my personal interest and experience. I've long been drawn to characters in Anglophone television (TV) dramas who are portrayed as mentally unstable, emotionally erratic, or psychologically "unwell". They have different images compared to the characters in Chinese TV dramas, such as contradiction, excitement or unpredictable chaos. Sometimes I identify with them, reflect through them, or simply admire how their "madness" was made visible through performance, dialogue, and screen aesthetics. At some point, I began to wonder: do other Chinese viewers feel the same way? Or are my understandings shaped by something uniquely personal, such as my cultural lens, emotional history, and aesthetic sensibility? This research grew from that question. It became a way to explore how madness is constructed on Anglophone TV dramas, but also how Chinese audiences interpret, engage, or find resonance in these portrayals. This work is rooted in curiosity and cultural connection. I have a concern about understanding the emotional and cultural construction of these characters, and the connection they create between the Anglophone TV dramas and the Chinese audiences.

Firstly, it is meaningful to make connections between the two areas of study, television analysis and audience experience. Viewers of television serials are repeatedly exposed to fictional characters and narratives, and over time, this ongoing interaction with the narrative deepens memories about the story while increasing understanding and reflection on the characters (Dill-Shackleford et al., 2016). The value of television narratives both to the individual and to society can be better understood by combining the analysis of the characters and their impact on the audience. The internet has enhanced cross-cultural communication, allowing Anglophone TV series to have a large audience in China. Also, mental health challenges have received increasing attention in China, but influenced by prevailing cultural attitudes towards mental health, they are still rarely discussed in daily life and Chinese TV series. In this study, I fill this gap and expand the understanding of cross-cultural communication

between Anglophone television series and Chinese audiences through the theme of mental health challenges.

Characters with mental health challenges have long been portrayed in Anglophone TV dramas. Their mental health challenges can be the defining feature in characterisation and driving plots, and scholars have identified several recurring cultural paradigms used to describe these characters. As Rose (2003) argues, the spread of psychiatric and psychopharmacological language into everyday life in Western countries has reshaped how people understand their own mental states, with conditions such as depression and anxiety becoming part of the common public vocabulary. Public discussion of mental health has become more frequent and less stigmatised. Research on the representation of mental health challenges tends to shift from anti-stigma to cultural studies in which scholars tend to link the representation of mental health conditions to discourses of race, class and gender (Harper, 2009; Cross, 2010). These cultural paradigms of mental health change over time and continue to influence audiences across cultural contexts, warranting further investigation. My research validates and expands upon this existing academic perspective and further proposes a positive paradigm shift regarding the characterisation in selected television dramas. Through the survey of Chinese audiences, I confirm the validity of this description and shift in a cross-cultural context.

Many studies have shown that watching Anglophone TV dramas can influence Chinese viewers' prevailing cultural values (Gao, 2016; Huang et al., 2019; Wu, 2015; Y. B. Zhang & Harwood, 2002), such as their perception of gender roles (X. Zhang & Su, 2021) or Confucian morality (Zhang & Harwood, 2002). At the same time, viewers who watch more American TV dramas are more likely to identify with their values (Xu, 2018). As for mental health perception, some Chinese communities view mental illness as evidence of weakness of character and a source of family shame (Parker, Gladstone & Chee, 2001), and *the Report on National Mental Health Development in China (2019–2020)* (中国国民心理健康发展报告 2019–2020) found that respondents most commonly expressed a need for "self-regulation" rather than professional support (Fu, Zhang & Chen, 2021). Although existing research discusses how Chinese audiences engage with Anglophone television dramas in various aspects, there is a lack of research on

Chinese audiences' perceptions of characters with mental health challenges. This study fills this gap, which is significant because of the growing concern about mental health challenges in Chinese society and easy access to television works from different cultures through the Internet.

In this study, I draw connections between fictional characters in Anglophone television dramas and Chinese audiences through the theme of mental health challenges. Through analysing character portrayals and audience engagement, I reveal the interactions between fictional narratives and audience perceptions, as well as the differences between Western culture and Chinese culture. Notably, this thesis also attempts to avoid generalising the "Chinese audience". I do not consider the Chinese audience as a singular entity, and I view Chinese audiences as individuals with their own agency and differences. Their responses are shaped by a range of intersecting factors, such as generation, gender, geographic location, and personal experience, which can lead to different and sometimes contradictory responses.

To bring together Anglophone TV dramas' depiction of mental health challenges and Chinese audiences' engagement, I use a mixed-methods design that combines textual analysis, an online questionnaire, and semi-structured interviews. For the textual analysis, I chose two recent series, *The End of the f***king World* Season 1 (UK, 2017) and *The Queen's Gambit* (USA, 2020), which are part of the general shift in this pattern of mental health representation focusing on protagonists with complex mental health challenges. I analyse selected episodes and key scenes paying attention to dialogue, narrative, and visual style, such as framing, colour and music. This allows me to identify recurring patterns in how mental health challenges are constructed and how these dramas invite particular emotional responses.

For audience research, I first conducted an online questionnaire completed by 147 respondents. The questionnaire combined closed questions with optional open-ended questions that invited participants to describe how they understand, feel about, and relate to characters with mental health challenges in Anglophone TV series. Then I conducted semi-structured interviews with 6 Chinese participants to explore these engagements in more depth, especially their experiences and the emotional and reflective aspects of viewing. Together,

the textual analysis, questionnaire and interviews generate a large amount of material that allows me to connect specific representations in these dramas to participants' interpretations, pleasures and emotional responses, as I develop in more detail in the methodology chapter.

In this thesis, I use the term “Anglophone television/TV drama” to refer to series produced in the United States and the United Kingdom, as my case studies are limited to US and UK TV dramas. However, as audience surveys were conducted in Mandarin Chinese, participants most frequently used the colloquial term 美剧 (literally 'American drama'). In everyday usage among Chinese audiences, 美剧 functions as a broad umbrella term including not only American but also British and European television dramas. In translating participant responses into English, 美剧 has therefore been rendered as 'Western' to reflect the breadth of its colloquial usage better. This term is retained in all direct quotations to preserve the scope of participants' original reference. The research instruments reproduced in the appendices similarly use 'Western,' as this was the working terminology at the time of data collection.

Research Questions

To explore how characters with mental health challenges are represented in Anglophone television dramas and how Chinese audiences engage with these characters from different cultures, this thesis aims to answer the following questions:

1. How do selected Anglophone television dramas construct characters with mental health challenges to invite the audience's emotions, in terms of culturally specific archetypes, psychological constructions and aesthetic choices?
2. How do Chinese participants in this study engage with these characters?

- How do they understand and interpret characters with mental health challenges in these dramas?
- How do they describe the pleasures and gratifications of enjoying these characters?
- How do they describe their emotional responses to, and perceived influences from, these characters over time?

3. How do cultural differences between Chinese participants and Anglophone contexts of these dramas influence how they describe their engagement with these characters?

I have conducted empirical research on all three questions. The first question guided my deep understanding of how Anglophone television dramas depict mental health challenges, focusing on how they construct characters' mental health challenges from the perspectives of television theory, psychological theory, and aesthetic choices. The investigation of the second and third questions is based on the analysis results of the first question. This allows me to gain a deeper understanding of the reactions of Chinese audiences in real life, establishing a connection between television studies and audience studies from a cross-cultural perspective. Research on the representation of mental health challenges in Anglophone television dramas and their reception by Chinese viewers has always been separate, leaving a gap that hinders the exchange of cross-cultural knowledge and important insights into the theme of mental health challenges. Based on existing research and empirical data, I address the gap in the field and expand the understanding by building a bridge between fictional characters and audiences, between Chinese and Western cultures, through the theme of mental health challenges.

The primary contributions of this research are as follows. For television studies, my research validates and expands upon the existing academic perspective. I propose that attachment theory, a psychological framework that explains how early relationships with caregivers shape emotional and relational patterns throughout life, and trauma narratives have been used as a type or paradigm to describe characters with mental health challenges. Building on this, I further propose a positive paradigm shift regarding the characterisation of 'madness and genius'. To address the research gap in audience reception, I examine the interpretations, gratifications, and emotional engagement of Chinese audiences with characters with mental health challenges in Anglophone TV series. In the area of cross-cultural research, I demonstrate the cultural influences on Chinese audiences' reception, revealing the complex interactions between representation, interpretation and identity across cultural boundaries.

1.2 Research Background

Mental Health Challenges in China

In recent years, mental health challenges have received increasing attention in China. In September 2020, the National Health Commission of China (国家卫生健康委办公厅) issued the *Exploring a Work Plan for Depression Prevention and Treatment Services* (探索抑郁症防治特色服务工作方案), requiring senior high schools and higher education institutions to incorporate depression screening into student health examinations and to establish student mental health records (National Health Commission of China, 2020). People are beginning to be more exposed to information about mental health challenges. *The Report on National Mental Health Development in China (2019-2020)* (中国国民心理健康发展报告 2019-2020) found that 24.6% of Chinese adolescents showed depressive symptoms, with 7.4% classified as severe, and that rates increased with school level from primary through to senior high school (Fu, Zhang & Chen, 2021). It also found that public recognition of the importance of mental health work had increased by 6.1 percentage points compared to a 2008 survey, suggesting a gradual but measurable shift in awareness (Fu, Zhang & Chen, 2021). The concepts and related systems of mental health have undergone tremendous development, influenced by a variety of political, economic, social and cultural factors at different times (Li et al., 2023). Before the early 2000s, the development of mental health challenges in China had been slow and neglected, then two main changes occurred, including the reform of the public system of mental health led by the government and the growth of mental health services outside the system driven by market forces (Huang, 2021).

On one hand, the Chinese government has implemented national mental health policies and services, including legal protections, human rights, improvements to the medical system, personnel training, and enhancing public awareness of mental health (Li et al., 2023). For example, the Mental Health Law was introduced in October 2012, which was later amended in 2018 to further protect the rights of individuals with mental health challenges (Li et al., 2023). On the other hand, market-oriented services fulfil the needs of people suffering from common mental health challenges and desiring to understand themselves better,

especially the urban middle class (Huang, 2021). This distinction is crucial, as the social landscape, media consumption habits, and access to mental health resources in urban China differ significantly from those in rural areas. Therefore, this thesis will focus primarily on the experiences and interpretations in this particular urban context when discussing Anglophone TV series and mental health discourses. Demand for knowledge related to self-regulation and interpersonal communication is growing, and technology and social media advances have also contributed to the dissemination of information about mental health challenges.

Despite growing awareness and needs, mental health challenges are still far from being well-developed in China. One of the main challenges is the significant shortage of mental health resources in China; for instance, mental health services are mainly concentrated in urban centres with limited access in rural and remote communities (Xiang et al., 2018). Besides, mental health challenges still tend to be highly stigmatised in the Chinese population. Even urban Chinese individuals with knowledge of mental health often prefer to rely on family and religious networks rather than seeking professional help for challenges such as depression (Loo & Furnham, 2012). While stigma and discrimination related to mental health challenges are prevalent in all countries, their manifestations are influenced by cultural contexts. In Chinese society, mental health challenges are often considered personal or family failure, weakness, or shame (Mak & Chen, 2010). As a result, these values, such as conformity to societal norms, deference to authority, emotional suppression and filial piety, often conflict with the principles of Western psychotherapy (Wang et al., 2020). However, this is a complex and evolving area. It would be misleading to assume that all Chinese individuals will react in the same way to mental health challenges. Some may strongly identify with prevailing cultural attitudes towards mental health, while others, influenced by global media and changing social attitudes, may have a more liberal or individualistic attitude. In short, cultural background may influence personal perception or audience reception, but it does not completely determine it.

Despite the growing visibility of discussions about mental health in Chinese society, this trend has been reflected more slowly in mainstream television

narratives. In the Anglophone television series analysed in this thesis, the mental health of the main characters often drives the entire plot, but such direct representations are not common in highly rated Chinese television series. For example, recent critically acclaimed productions such as *The Bad Kids* (隐秘的角落, 2020), *The Knockout* (狂飙, 2023), and *Blossoms Shanghai* (繁花, 2023), while featuring psychologically complex characters, do not directly focus on characters' mental health conditions. Some popular Anglophone TV dramas in recent years contain characters with significant mental health challenges: *Fleabag* (UK, 2016-2019), *The end of the fucking world* (UK, 2017-2019), *Patrick Melrose* (UK, 2018), *Shameless* (US, 2011-2021), *You're the worst* (US, 2014-2019), and *Killing Eve* (UK/US, 2018-2022). Some adult animated TV series are also included: *Bojack Horseman* (US, 2014-2020), *Rick and Morty* (US, 2013-present), and *Harley Quinn* (US, 2019-present). In these shows, mental health challenges might make these characters have characteristics that are different from other characters. They often acted against expectations for abnormal reasons, which might cause destructive results, and therefore change their own and others' lives. For example, at *the end of the f***king world* (UK), the male protagonist James had an anti-social personality and often abused and killed small animals. He approached a girl to kill her, which led to their acquaintance and the unfolding of the story. In the subsequent development of the plot, the adventure experiences and interaction with different people, in turn, affected James' performance of psychological problems.

Anglophone TV series can be an important source of information for the massive audience in China, who tend to be younger, or more educated, more open to Western culture, and are very used to any controversial content, such as mental health challenges (Cao, 2012). These dramas may indicate the name of some mental health challenges (for example, depression, drug addiction, anti-social personality); the symptoms will be reflected in the behaviour of the character (for example, a role with bipolar disorder is sometimes overly excited and sometimes in too low spirits, accompanied by suicidal tendencies); the reasons for mental health challenges may be told; and seeking professional help was usually mentioned (For example, take medicine, see a psychologist). Therefore, given the popularity of Anglophone TV dramas in China and the varying perceptions of mental health challenges, these popular dramas reflect the

general tendency of Chinese audiences to mental health challenges, and at the same time, can influence Chinese audiences' perceptions of mental health challenges. However, audiences are primarily engaging with constructed characters in these dramas, not clinical patients in need of treatment. A character's mental struggle can be depicted as compelling and even romanticised. While these portrayals can reduce stigma and foster empathy, they may influence audience understanding about specific representations rather than the realities of mental conditions. Therefore, it is important to realise this distinction between dramatic representation and clinical reality. This study aims to find out the relationships between the portrayal of mental health challenges, Anglophone TV series, and Chinese audiences.

Anglophone TV Series and Chinese Audiences

The Popularity of Anglophone TV Series in China

Before the advent of the Internet, Chinese audiences watched foreign movies and series on TV, which were introduced and translated by China Central Television, with a relatively small number. In 1980, NBC's *Atlantis*, the first American drama, was broadcast in China (Sun, 2014, as cited in Xu, 2018). In 1990, *Growing Pains* became the first American sitcom to be aired in China, allowing Chinese audiences to understand ordinary Americans' lives and profoundly influencing domestic family-themed sitcoms. Since the 2000s, the rapid development of the Internet in China has created a boom in online video. The principal place to consume foreign shows in China has changed to the Internet instead of the broadcast/satellite TV network. The popularity of Anglophone TV dramas is highly related to the internet. Online viewing gives ordinary Chinese viewers access to a larger number of Western series than before, so they have a chance to make free choices according to their preferences.

In 2004, Chinese online video companies began to introduce foreign TV series for seeing potential commercial value. They purchased streaming licenses from Anglophone TV companies (Gao, 2016), so the online users in China can watch these translated episodes instantly by purchasing memberships of these websites. In 2010, China's commercial video site Sohu created the first online

channel named 'Western TV series ', focusing on Anglophone TV series broadcasting, followed by its rival iQiyi, Tencent and others (Sun, 2014b, as cited in Xu, 2018). Despite their name, these channels also include many other non-American TV series like *Sherlock* (UK), collectively referred to as Western TV series by Chinese users. In contrast, there are Japanese and Korean TV series and domestic TV series channels.

Channels of western programming are well-deserved to be one of China's fastest-growing content categories. From 2011 to 2012, the ratings of Anglophone TV series on Youku increased by 400% (Xu, 2018). At that time, the five major online video companies in China were Sohu, Youku, Tencent, Letv and iQIYI. Before 1 April 2014, the number of Western TV series they bought was 76, 58, 36, 34, 34, respectively (Wu, 2015). Every year, nearly half of the TV series broadcast in the United States are introduced to China via the Internet (Sun, 2014, as cited in Xu, 2018).

Online broadcasting has led to a rapid increase in the Chinese audiences of Anglophone TV series, which are mainly concentrated on the Internet. Many forums for fans of Western TV series were established at that time, the largest of which had more than 1 million registered users (Wen, 2017, cited in Xu, 2018). The American television series is one of the most popular sources of TV program imports in China (Gao, 2016).

Access to Foreign Television in China

The rapidly growing influence of online video platforms has attracted content regulation. Some topics in Anglophone episodes may conflict with Chinese prevailing cultural attitudes, particularly those related to ethnic relations, violence, and sexuality (Wu, 2015). Mental health challenges are included because they often involve related negative behaviour. In China, both domestic and foreign television programmes are subject to a content approval system rather than a rating system (Wen, 2017, as cited in Xu, 2018). Every program needs to obtain permission before producing or broadcasting. They are usually banned for content not suitable for the public or minors. Therefore, series tend to limit their content to narrow, safe topics to pass audits more easily, such as family or romance. For the same reason, many foreign TV shows are forbidden or

broadcast with sensitive content being deleted and modified. These regulations have been extended to online platforms, where foreign television programmes require specific distribution licences (Xu, 2018). In July 2014, the State Administration of Radio, Film and Television (SARFT) required all online video platforms to remove all overseas dramas, self-produced dramas, and micro movies (Xu, 2018). Then, they required that all overseas film and television dramas uploaded to the Internet must obtain a "Film Release License" or "TV Drama Distribution License" in accordance with the law; otherwise, they cannot go live (Xu, 2018). Later, even programs with legal contracts could no longer be broadcast.

As a result, many Anglophone series are either unavailable through authorised channels or are broadcast in edited versions. This has led many viewers to access these programmes through unofficial sources to watch unedited editions (Qianshui, 2021). This context is relevant to this study, as participants' viewing experiences were often shaped by the availability and format of these programmes in China.

Chinese Online Viewers

Although few Anglophone TV series are officially imported, there are still many online audiences in China. These series can be watched for free on pirate streaming services. Fans with English and programming skills voluntarily set up translation teams and websites to translate and release overseas series. For example, YYeTs is one of the earliest and most influential subtitle groups in China. Users can download translation subtitles and pirated copies of English TV shows for free on the YYeTs website. When being closed down on February 3, 2021, YYeTs website reported more than 8 million registered members (Zhu, 2021).

Despite the large number, in China, viewers of Anglophone TV dramas tend to be a specific demographic compared to mainstream audiences. American dramas are mainly popular in large and medium-sized cities in China (Wen, 2017, as cited in Xu, 2018). American series viewers are still limited compared with the total number of Chinese audiences. Due to the barriers to accessing foreign language TV programs, people should have some online skills, such as

information retrieval, to get in touch with the news, pirate resources, and fan groups. In addition, there are language and cultural barriers to understanding the content of Western series. Although language problems can be overcome by translated subtitles, audiences still need some background knowledge for understanding and accepting different cultures. According to Tan (2011), Chinese audiences of *Friends (1994)* turned out to have homogenising characteristics: young (19-32 years old), urban, computer-savvy, English-literate, university-educated students or white-collar workers. Although it is a small sample size, a connection between skills and audiences tends to be indicated.

1.3 Thesis Structure

In addition to this introduction chapter, this thesis consists of seven chapters: the literature review chapter, the research methodology chapter, the four analyses and findings chapters and the conclusion chapter. Each chapter builds on the previous one, gradually shifting the focus from the text to the audience, exploring the portrayal of characters with mental health challenges, the engagement of Chinese audiences, and the underlying cultural significance. In the following, I will introduce the main content of each chapter of this thesis.

Chapter 2 is the literature review that focuses on existing scholarship, mainly in English, on the portrayal of characters with mental health challenges in Anglophone television dramas, media effects, and research on the Chinese TV audience. In the first part, I review the studies of onscreen 'madness' in Western culture and characters with mental health challenges in Anglophone TV series. In the second part, I move to the research of television's effect on viewers, the specific effects of Anglophone TV series on Chinese audiences, and television and audience emotions. In the third part of audience involvement, I focus on audience engagement with the characters, similarity and changes, and Chinese audiences' perception of mental health challenges. This chapter lays the theoretical foundation for the following research.

Chapter 3 is the research methodology, which outlines the mixed-methods approach used in this study, including textual analysis, an online questionnaire survey, and semi-structured interviews. According to the project's research design and conduct sequence, I explain the reasons for the choice of

methodology and describe the research design and data collection of textual analysis, online surveys, and semi-structured interviews. I also explain how I analyse quantitative and qualitative data collected from the survey. Following this, I discuss the validity, reliability, and ethical considerations, particularly in relation to the study's focus on mental health as a sensitive topic.

Chapter 4 is the first findings chapter, which aims to answer the first research question: how are characters with mental health portrayed in Anglophone TV series? In this chapter, I apply textual analysis to two case studies: The *End of the f**king world* (2017) and *The Queen's Gambit* (2020). I chose two protagonists, James and Beth, as my research subjects, applying classic character tropes (‘madmen are villains’, ‘madmen are geniuses’) and attachment theory to understand their psychological construction in detail, to explore common patterns and themes in these two dramas. Furthermore, I explore how screen aesthetics present the above psychological construction to the viewer in a more visual and nuanced way. Through Lury (2005), Cantrell and Hogg (2018), and Gorton (2009)'s frameworks, I explore how these series use visual, performative and narrative strategies to construct the psychological states of characters with mental health challenges and invite audiences to engage emotionally with their experiences. Building on the findings in this chapter, the chapters that follow will focus on how Chinese viewers engage with these portrayals.

Chapter 5 is the first chapter of audience analysis, aiming to answer the question: How do participants understand and interpret characters with mental health challenges in Anglophone TV Dramas? In the first section, I discuss how participants define a character with mental health challenges in Anglophone TV series. Then, I investigate how they interpret mental health portrayals using Stuart Hall’s encoding-decoding model and discuss how cultural dimensions influence their understanding of these characters. Finally, I discuss other moderating factors that influence participants' interpretation of these characters, such as the diversity of information sources, personal experiences with mental health challenges, and overseas experience. Participants define mental health challenges in fictional characters from various dimensions, influenced by popularised ideas about diagnosis, cultural norms, genre

conventions, and external opinions, showing the complexity and subjectivity of their understanding of these characters. Instead of fully accepting the portrayal, participants integrate or filter these portrayals according to their own backgrounds and experiences, thus performing dominant, negotiated, or opposite readings. This chapter demonstrates how meaning can be actively reconstructed in different cultural contexts and sets the foundation for the next chapter, which examines how the audience enjoys these characters based on their understanding of mental health.

Chapter 6 answers another sub-question of audience research through the framework of uses and gratifications theory: How do Chinese audiences enjoy characters with mental health challenges in Anglophone TV dramas? In the first section, I discuss their affective needs, including aesthetic appeal, enjoyment of novelty, and escapism. In the second, I explore their cognitive needs, including seeking information and understanding, different perspectives, and creative or professional inspiration. In the final section, I focus on viewers' personal integrative needs, which are self-reflection, self-understanding, self-validation, and psychological compensation. Most respondents believe that there are significant differences in how mental health challenges are portrayed in Chinese and Anglophone TV series, suggesting a strong awareness of cultural differences in narrative style, themes, and overall framing of mental health challenges. Therefore, this chapter shows how participants gain unique gratification from these characters and also reveals how Western portrayals of mental health can both bridge and reinforce cultural differences. After understanding the gratifications, I will discuss participants' emotional responses to these characters and the potential influences on their mental health perceptions in the next chapter.

Chapter 7 is the last findings chapter, which explores how Chinese audiences are emotionally engaged with and influenced by characters with mental health challenges in Anglophone TV dramas. In this chapter, I discuss the main emotional responses identified from the Chinese audience: identification, empathy, sympathy, fear or caution. Then I explore other moderating factors like similarities between characters and audiences, trauma description, aesthetic and narrative choices. The final section examines the impact of these

characters on Chinese audiences' perceptions. This chapter shows that participants' emotional responses to characters with mental health challenges are diverse and intertwined, revealing that they can deeply connect with these characters from different cultures through shared emotional and psychological experiences. Therefore, the complex portrayal of mental health challenges in Anglophone television dramas could influence participants' prevailing cultural attitudes towards mental health challenges through their emotional and cognitive engagement with these characters.

Chapter 8 concludes the thesis. In this chapter, I review the key findings and discuss the empirical research findings to the research questions in both character and audience analyses. I summarise the key patterns and shifts in mental health portrayal on Anglophone TV dramas, and Chinese audience engagement and cultural impact. My research validates and expands upon the existing academic perspective by proposing that attachment theory and trauma narratives operate as narrative tools for framing characters with mental health challenges. I further propose a positive paradigm shift regarding the characterisation of ‘madness and genius.’ Through the survey of Chinese audiences, I confirm the validity of this description and shift in a cross-cultural context. These findings contribute to a deeper understanding of how global reception of mental health portrayals is filtered through cultural frames, which is a relatively underexplored area in existing scholarship. This is an important implication for television studies, emphasising the importance of more culturally sensitive approaches to audience reception studies. Then I present the contributions of this thesis to television studies, audience studies, and cross-cultural communication. Finally, I further discuss the limitations of this study and suggest some potential directions for further research in this academic field and other related fields.

Chapter 2 Literature Review

Introduction

Since the mid-2010s, the number of characters with mental health challenges in Anglophone television series has notably increased. This rise coincides with shifts in the television industry brought about by the rise of streaming platforms and digital content creation. The rise of original network television has contributed to audience fragmentation and changes in profitability, which in turn have influenced television content. McMahon-Coleman (2021) indicates that online platforms such as Netflix are producing content for much smaller audiences than those of conventional television, thereby creating more programmes that address subjects previously considered too risky, including depictions of mental health conditions. This shift has enabled more diverse characterisation, including characters with mental health challenges who may not fit conventional broadcasting norms but resonate with specific audience groups. The emergence of these roles reflects the shifting boundary between what is considered normal and abnormal. As Rose (2003) argues, the spread of psychiatric and psychopharmacological language into everyday life in Western countries has reshaped how people understand their own mental states. In addition, the global reach of the internet and digital platforms has amplified cross-cultural communication and audience engagement, giving Anglophone television series a vast online audience, including the Chinese audience. Characters with mental health challenges often attract attention and resonance across cultural contexts, contributing to their growing popularity. Mental health challenges have received increasing attention in China, but influenced by prevailing cultural attitudes towards mental health, they are still rarely discussed in daily life and Chinese TV series. These characters in Anglophone TV series can attract and influence Chinese audiences by bringing portrayals from a different culture.

This thesis aims to find out the connection between characters with mental health challenges in Anglophone television series and audience reception in China during the streaming era. Therefore, this chapter will begin by reviewing the literature in three dimensions. The first part will review how these

characters have been portrayed on Western screens, particularly in television dramas. This is followed by a discussion of television's effects on viewers, including studies about the impact of Anglophone television dramas on Chinese viewers. The final section is about viewers' narrative engagement, character identification, and Chinese viewers' perceptions of mental health.

2.1 Characters with Mental Health Challenges in Anglophone TV Series

Onscreen ‘Madness’ in Western Culture

Characters with mental health challenges have long been portrayed as "mad" in film and television. "Madness" as a theme has always been of interest to western culture and art. Rohr (2015) examines how mental health conditions such as bipolar disorder, depression, autism and Alzheimer's disease have been culturally represented on screen, arguing that although these conditions have different causes and symptoms, they all profoundly affect how a person perceives and interacts with reality, making them rich subjects for cultural interpretation. Biochemical influences can be one of the many variables that affect human behaviour, cognition and experience (Casey & Long, 2003). Besides, psychoanalysts tend to be concerned about the relationship between family relations and mental health challenges. What is more, some scholars have identified the socio-cultural attributes of mental health challenges. People with mental health challenges often look to the dominant culture actively for explaining their distress, or the surrounding culture may impose meaning on behaviour identified as mad (Casey & Long, 2003). For instance, Foucault (2001) considered cultural discourse to understand madness:

> Language is the first and last structure of madness, its constituent form; on language are based all the cycles in which madness articulates its nature. That the essence of madness can be ultimately defined in the simple structure of a discourse does not reduce it to a purely psychological body; such discourse is both the silent language by which the mind speaks to itself in the truth proper to it, and the visible articulation in the movements of the body. (p. 94)

Although the concept of mental health challenges and the vocabulary used to discuss them is changing, it has some continuities, one of which is that people with mental health challenges, or "the mad", are often regarded as "different"

(Rohr, 2015). Link and Phelan (2001) argue that stigma exists through a process in which dominant cultural beliefs label human differences, link those labels to negative stereotypes, and enact separation between "us" and "them," resulting in status loss and discrimination. In other words, people decide what is normal and abnormal, setting boundaries between them. For instance, in 1973, the American Psychiatric Association (APA) removed the diagnosis of "homosexuality" from the second edition of its Diagnostic and Statistical Manual (DSM). On 17 May 1990, the World Health Organisation (WHO) removed homosexuality from the list of mental health challenges. Cultural attitudes towards homosexuality in Western countries have changed, with people considering homosexuality to be normalised (Drescher, 2015). People have moved from asking 'what causes homosexuality and 'how do we treat it to focusing on the rights and needs of the LGBT community (Graham et al., 2011).

The representation of madness uses various symbols to define 'different'. As Gilman (1988) writes, "Society, which defines itself as sane, must be able to localize and confine the mad, if only visually, in order to create a separation between the sane and the insane," (p. 48). Mental health challenges tend to be complicated and invisible to understand, which partly cause fear, stigma, and dehumanization (Parker et al., 2020). For example, depression makes people withdraw from the world (McMahon-Coleman, 2021), but when people cannot get out of bed because of depression, others may think they are just lazy or not trying hard enough (M. A. Johnson & Olson, 2021). Some recurring images and descriptions make mental abnormalities recognizable and perceivable on-screen. Visual presentation of madness usually involves a person's facial appearance, expressions, body structure and gestures (Rohr, 2015), such as wild eyes, unpredictable behavioural shifts, uninterrupted mumbling, or prolonged periods of hiding from people in dark caves (M. A. Johnson & Olson, 2021). While these visual cues serve dramatic purposes, they are not always grounded in mental health discourse and may reflect long-standing symbolic conventions.

Scholars have identified several recurring cultural paradigms used to describe these "mad" characters. According to Rohr (2015), there are three classic views of the depiction of madness in Western culture:

The mad as "wise fools": They are presented as benign, different from the norm, but embodying a certain profound knowledge or truth. For example, in the film *Forrest Gump* (1994), the protagonist Forrest is a simple man with a low IQ but good intentions.

The mad as "dangerous villains": they are portrayed as ruthless, violent, or possessed by evil spirits. These dangerous, uncontrollable mad villains create thrills, excitement and suspense in many artistic works, such as Hannibal Lecter, a serial killer in novels, films and TV series.

The mad as 'genius': they have certain unique intellectual gifts and are often depicted as brilliant mad scientists or mad artists, such as Sherlock Holmes, Carrie Mathison in *Homeland*, Will Graham in *Hannibal*, Catherine Black in *Black Box*, and Daniel Pierce in *Perception*.

Rohr (2015) identifies a fourth paradigm in contemporary on-screen representations of madness: the mad as normal. M. A. Johnson and Olson (2021) develop this category further, noticing that recent films and television increasingly present characters with mental health challenges who often talk openly about the struggles of living with depression, panic attacks, or autism, offering viewers representations grounded in lived experience. Rohr (2015) discusses the emergence of this shift from the perspective of the historical evolution of cultural paradigms, while M. A. Johnson and Olson (2021) examine its representation across various contemporary entertainment media, noting that these portrayals contribute to normalising mental illness and neurodiversity. For example, in movies, there are Temple Grandin with autism in *Temple Grandin (2010)*, Adam as a toy designer with social phobia in *Adam (2009)*, and in TV dramas, James in *The end of the f**king world* (antisocial personality), Melrose in *Patrick Melrose* (drug addiction), Bojack in *Bojack Horseman* (depression), Ian Gallagher in *Shameless* (bipolar disorder).

As the profile of mental health challenges characters becomes complicated, scholars have examined more framing of the representation of mental health challenges, including stereotypes. Signorielli's (1989) content analysis of 17 annual samples of US primetime programming found that characters labelled as mentally ill were disproportionately portrayed as violent, criminal, and

unsuccessful, and were far more likely than other characters to be cast in villainous roles. Besides, movie stereotypes about mental health challenges have impact on public's stigmatisation, as patients are often presented as "rebellious free spirit", "homicidal maniac", "seductress, enlightened member of society", "narcissistic parasite", and "zoo specimen" (Hyler et al., 1991, p. 1044), such as *Silence of the Lambs (1991)*, *One Flew Over the Cuckoo's Nest (1975)*, *Dark Knight (2008)*. These portrayals were also found in media aimed at younger audiences. Wahl (2003) reviewed existing studies of children's television, film, and cartoons and concluded that references to mental illness were common in children's media and predominantly negative, with characters reduced to objects of ridicule or fear through derogatory slang such as 'crazy' and 'psycho,' while positive attributes were largely absent. Similarly, Disney cartoons have a higher prevalence of mental health challenges than children's television programmes and have similar negative and stereotypical portrayals (Lawson & Fouts, 2004).

Anti-stigma studies have been developed to examine the accuracy of on-screen representations of mental health challenges mainly based on content analysis, aiming to combat stigmas placed on people with mental health challenges. Early works tended to suggest that media portrayals of mental health challenges were generally negative (Signorielli, 1989; Wahl, 1995). Not only films but some television studies have similarly reported false, violent, and hostile representations of mental health challenges (Day & Page, 1986; Shain & Phillips, 1991). Stigmatisation of mental health challenges may cause them as tainted and discounted compared to healthy people (Issakainen, 2014). Goffman (1963) defines stigma as a discrediting attribute that marks an individual as different from others in their social category, reducing them in the perception of others from a whole and usual person to someone who is tainted and devalued, whether as bad, dangerous, or weak. In recent years, however, television has provided more positive images of psychopathic characters, such as them being highly successful, intelligent, attractive, and well-loved, rather than just dirty, unattractive, and of low social status (Parrott & Parrott, 2015). Cross (2010) argues that stigmatising terms and descriptions of madness in the media are part of what constitutes language and culture. However, Harper (2009) argues that anti-stigma studies of madness often lack context and ignore the social power, ideology and difference involved in constructing madness (p. 57). Harper's (2009)

Madness, Power and the Media examines how, and to what extent, dominant discourses about madness in capitalist cultures, particularly in the UK and the US, have permeated popular media. While Harper discusses a broad range of media, including news coverage, film, and television, this thesis focuses specifically on how such discourses manifest in television drama. Its long-term narrative development and complex characterisation make it an ideal medium for exploring the portrayal of mental health.

Subsequently, scholars have increasingly adopted cultural studies frameworks to analyse representations of mental health challenges, linking portrayals of madness to discourses of race, class, and gender (Harper, 2009; Cross, 2010). For example, while some film and television texts may have perceptive representations of anxiety, depression and schizophrenia, they tend to come through the lens of white male or middle-class privilege. For example, Bojack Horseman is a famous Hollywood actor in *Bojack Horseman*; Gretchen Cutler is a publicist for a singer in *You're the Worst*; Rebecca Bunch was a successful lawyer in *Crazy Ex-Girlfriend* (Brayton, 2017). Regarding gender, Harper (2009) argues that male and female images of madness often differ markedly, meaning that men with mental health challenges are traditionally marked as tough or aggressive, even heroic, while women are often portrayed as vulnerable and helpless (p186). Madness is associated with female 'weaknesses, dreams and illusions' and is restricted to culturally acceptable femininity displays (Foucault, 2001, p. 23). However, contemporary onscreen portrayals of women with mental health challenges may challenge this tradition. For example, as a homosexual psychopath and a killer for a post-Soviet criminal organisation in *Killing Eve*, Villanelle challenges the dichotomies of male/female, heterosexual/gay, Eastern/Western and victim/perpetrator (Black, 2020). Although Villanelle presents female power as anomalous and disordered, she still makes an important contribution to feminist culture by challenging the image of women as passive, submissive and docile (Riles et al., 2021), while showing her ability to adapt to, and even manipulate, social norms when necessary. In addition, some scholars have focused on mental health challenges and class narratives, some arguing that mental health challenges are romanticised and disconnected from socio-economic conditions (Brayton, 2017). Others argue that although some characters with mental health challenges have positive narratives, however, this

depends on whether their mental health challenges adhere to existing productive relations and national interests (Beirne, 2019; Brayton, 2017; D. A. Johnson, 2008). For example, in *Bones*, *Homeland*, *Perception*, *Elementary* and *Limitless*, characters' mental health challenges tend to be customised and dramatised for the national interest, like working for the CIA or FBI illegally (Brayton, 2017).

Characters with Mental Health Challenges in Anglophone TV Series

TV dramas containing protagonists with mental health challenges are popular both in Western countries and in China. Take *Bojack Horseman* (USA, 2014-2018), an American adult animated sitcom, as an example: the story is about the life of BoJack Horseman, a washed-up TV star full of depression and failure. *Bojack Horseman* was one of the most viewed shows on Netflix in 2018, and it was also nominated for two Primetime Emmy Awards. Besides, on the review aggregator website Rotten Tomatoes, IMDB, it is given high scores by film and television fans. These shows also have many fans in China. Douban (www.douban.com) is a commercial online database in China containing books, movies, and TV dramas that users can mark, rate, and comment on them. According to Douban, *Sherlock* (UK, 2010) is marked by 421k users, the second most popular show under the category 'Western TV series' in the 2020s. Similarly, *The Queen's Gambit* (USA, 2020), 342k; *Killing Eve* (UK&USA, 2018-), 166.4k; *Hannibal* (USA, 2013–2015), 164k; *Homeland* (USA, 2011-), 59k.

In these TV dramas, mental health challenges can be the defining character feature in characterisation and driving plots, which is no longer a simple symbol or a short-term setting but a complicated and long-term character trait (McMahon-Coleman, 2021). Johnson's study (2008) focused on Monk in *Monk* (USA, 2002-2009), a detective with obsessive-compulsive disorder (OCD), which is the core factor of the plot. According to Johnson (2008), his profession emerges from the essence of who he is, as being a detective is not just a job for Monk but a fundamental part of his personality. The activities and conflicts in the detection process express different aspects of Monk's personality. In other words, the plot is subordinated to the development of the character's personality and becomes an expression of who Monk is (Johnson, 2008). Johnson

(2008) argues that in *Monk*, Monk's OCD functions as a mechanism of the "control society". While advocacy organisations have celebrated such representations as progressive, in which madness is reframed as an identity to be managed and channelled into productive social roles. Johnson reads them critically as subtle techniques of governance through the language of identity and self-realisation. Besides, in McMahon-Coleman's study (2021), protagonist Gretchen's depression can become a crucial factor when the narrative focuses on the relationship. According to McMahon-Coleman (2021), *You're the Worst* (USA, 2014 -2019) is one of the very few series to openly diagnose two of its four main characters with clinical mental health challenges and present their interplay living in one household. McMahon-Coleman (2021) argues that Gretchen's clinical depression is portrayed as episodic rather than omnipresent, making her closer to the lived experience of most individuals with mental health diagnoses. Also, the series presents medication, counselling, relationships, and independence as equally partial therapeutic solutions to mental health problems. This more nuanced and accurate representation may reduce the stigmatising perceptions.

The appeal of characters with mental health challenges may come from characterisation and television narrative techniques. Scholars have focused on the appeal of anti-hero narratives in which protagonists' actions are often morally ambiguous, questionable, or even irrational (Janicke & Raney, 2015). According to Shafer & Raney (2012), although they usually act in questionable ways, the narrative may provide reasons to justify their behaviour through different forms of dialogue, innuendo, etc. They can be flawed but good-intended, lone wolves who defy authority, criminals but redeemable, or bad guys with a noble goal (Shafer & Raney, 2012). For example, characters with mental health challenges in Anglophone TV series can be portrayed as productive and beneficial, as heroes or icons with flaws. Beirne (2019) examines five major characters from different television dramas who serve as investigators tackling threats such as terrorism, crime, or serial murder: Sherlock in *Sherlock Holmes* (antisocial personality), Carrie Mathison in *Homeland* (bipolar disorder), Will Graham in *Hannibal* (empathy disorder), Catherine Black in *Black Box* (bipolar disorder), and Daniel Pierce in *Perception* (schizophrenia). In each case, the characters' extraordinary abilities are closely tied to their mental health challenges, but these abilities often come at a personal cost, disrupting their

emotional stability, relationships, or sense of self. Although Hannibal in *Hannibal*, as a psychopathic serial killer, is closer to a villain than other anti-heroes, he is portrayed as extremely talented and fascinatingly gifted (Vaage, 2015). Importantly, these psychological traits are also essential to the narrative, enabling them to perform investigative or intellectual functions that drive the plot forward.

Moreover, television narrative techniques reinforce characters' appeal, which can also be found in studies on *Hannibal*. Stadler (2017) explores *Hannibal*'s characterisation and aesthetic techniques regarding empathy, arguing for the importance of television in narrative art, as the aesthetic techniques and audio-visual strategies of screen representation can reproduce the protagonist's perceptual experience and stimulate imagination and emotional resonance. According to Stadler (2017), it engages the viewer in the character's subjective experience through television's close-ups, acting techniques, and sound design while consistently enhancing the viewer's identification with the character through long screen time and narrative immersion. Furthermore, the television series *Hannibal* richly recreates texts from literature and film versions, building its own television narrative by integrating existing textual, narrative and aesthetic elements (Abbott, 2018). Compared to literature and film, its serialised narrative unfolds on a multi-layered aesthetic level, through which the viewer can engage and reflect on the story in the interplay of texts (Abbott, 2018).

2.2 Television and Audience

The Television's Effect on Viewers

The mass media can be an important source of mental health information for viewers and can give meaning to mental health challenges and respond to them (Issakainen, 2014). Thus, how the media construct, organise, present and interpret mental health challenges decisively influences public perceptions (Sieff, 2003). Several studies have argued that television dramas can be a major source of information about mental health challenges for the public (Coverdale et al., 2002), and they may also have greater potential to change public bias and stigma than other entertainment media. Pirkis et al. (2006) argue that

entertainment television can be more effective than news media in shaping viewers' attitudes towards mental health challenges because entertainment television programmes may be more emotionally resonant with viewers. In addition, television series usually have many episodes and seasons, so viewers are exposed to relevant information for longer and more frequently than other forms of entertainment, such as documentaries. As a result, characters and plots in fictional television series provide viewers with a more compelling narrative to convey a specific message (Henderson, 2017). As one interviewee in Henderson's (2017) study stated:

> "You're not there to educate, but you are there to put it on the table […] Once you watch that documentary you turn over, and it's forgotten but with (soaps) you have got that issue two hours a week for three or four months so how can you not learn or think about it? (Scriptwriter, Soap Opera)" (p.112)

Therefore, how Anglophone television series present psychological issues is crucial to the audience, as they may be influenced or changed by the media content or characters. According to Bandura's (1986) social cognitive theory, people tend to learn from and imitate others, which is valid both in real life and in media environments. Audiences are more likely to engage in social learning when: 1. the persona demonstrates attitudes and behaviours that are relevant to them, 2. the persona has high status and appeal. 3. The characters appear to benefit from displaying these behaviours and attitudes. Considering the largely Chinese audience for Anglophone TV dramas, how they depict characters with mental health challenges is often influential. Media effects theory points to how mass media influence the thinking and behaviour of audiences.

Scholars often use cultivation theory to explain the relationship between television content and viewers, examining TV's long-term impact. According to Cohen and Weimann (2000), the basic claim of cultivation theory is that the more time people spend on television content, the more likely they are to be persuaded by it and to accept the images, values and ideologies they see on television. The cultivation effect size tends to be small, generated continually and dynamically rather than a unidirectional process from television to viewers (Morgan et al., 2014). Television cultivates viewers' ideas through the content it presents, rather than changing viewers' ideas through direct persuasion

(Shanahan & Morgan, 1999). So, cultivation studies typically begin by identifying and evaluating the most frequently occurring patterns in television content across most program genres in search of images and values (Morgan et al., 2014). Cultivation effects can be recognised as first-order and second-order effects. First-order effects tend to be perceptions of reality, while second-order effects are reflected in judgements, attitudes, or values of reality (Gerbner et al., 1986). Second-order effects are related to First-order effects, as judgments formed by second-order effects can be based on perceptions formed by first-order judgments (Shrum et al., 2011). Some studies proved that the impact of television on viewers' attitudes towards mental health challenges. For example, Morgan et al. (2014) demonstrated the cultivation effect between prime-time TV program viewing and attitudes towards mental health challenges in America. He found that Television portrayals of mental health challenges are violent, false and negative. As television ratings increase, viewers have a negative perception of people with mental health challenges. Cultivation theory is commonly explored through quantitative content analysis, as seen in Morgan et al. (2014). However, I adopt a textual analysis approach to examine character portrayals and their potential meanings, focusing on how mental health challenges are represented rather than measuring frequency or correlation.

With the expansion of global media consumption, the effects of cultivation are discussed in an international context. As Lotz (2014) argues, the shift to the post-network era, characterised by on-demand streaming platforms and digital distribution, has given viewers unprecedented choice and control over what they watch. Viewers can choose programmes online based mainly on their own preferences. They tend to spend more time on the specific themes or genres that interest them than on other programmes. This shift in viewing behaviour has important implications for cultivation research. Cohen and Weimann (2000) point out that different genres or themes of programmes present varying views of the world. The same topic is portrayed differently in different genres of programmes, which can lead to different effects. As an example, Segrin and Nabi (2002) ‘s study examined the effect of viewing specific types on viewers' particular perceptions, showing the differences with overall viewing. In a sample of university students, they found that both idealised views (such as 'marriage is forever') and expressed intentions to marry soon were positively associated with

viewing styles favouring soap operas, romantic comedies, and wedding-related programmes. However, there was a negative correlation with overall viewing. These findings suggest that it is not just how much people watch, but what they watch that matters. Therefore, when Anglophone television dramas describe the portrayal of characters with mental health challenges in complexity, they may uniquely influence viewers' perceptions of mental health.

Anglophone TV Series' Effects on Chinese Audiences

Anglophone TV dramas can influence Chinese audiences in various aspects. Television plays a crucial role in cultivating a virtual cultural public sphere and can shape viewers' perspectives, whether positively or negatively (Hyler et al., 1991). Scholars have proposed that watching American television can influence Chinese audiences' attitudes on both sides (Gao, 2016; Huang et al., 2019; Wu, 2015; Xu, 2018; Y. B. Zhang & Harwood, 2002). On the one hand, Chinese audiences who watch American dramas may more positively accept and identify with American values (Xu, 2018). For example, American television drama consumption can shape Chinese audiences' perception of gender roles (X. Zhang & Su, 2021). Anglophone TV dramas show different values of gender roles from Asian dramas by describing more independence for women. Viewers' identification of sexism and gender-role norms in marriage is weakened when they consume more American dramas than Chinese domestic dramas, but their identification is improved when they consume more Korean dramas than Chinese dramas (Zhang & Su, 2021). On the other hand, the effect of Anglophone TV programs may also be considered as an erosion of Chinese values. For example, Zhang & Harwood's (2002) research examined the cultivation effects of television on Chinese college students and found that the more imported programmes they watched, the less they recognised the part of Confucian morality that maintains interpersonal harmony.

The effect of Anglophone TV dramas on Chinese audiences can be limited or reinforced by reality. American TV dramas can be foreign symbolic materials for Chinese audiences to reflect their own identity and life (Gao, 2016). Chinese viewers actively engage with television content rather than passively accepting it. They interpret overt and hidden meanings, reconstructing the understanding of series based on their personal experiences (Schneider, 2012, cited in Xu,

2018). Viewers' perceptions of prevailing cultural values are not completely undermined (Xu, 2018), as they can integrate part of American values into the Chinese cultural context without changing their cultural identity (Xu, 2018). So, they can obtain information and perspective from American TV dramas to reflect their minds or lives while keeping Chinese identification (Gao, 2016). On the other hand, American television's effect can be stronger and more complex on Chinese viewers than Chinese television (Tang et al., 2018). Tang et al. (2018) 's study explored the effect of Chinese and US television content on the cultivation of Chinese university students' perceptions of crime rates in China and the US. The results of the study showed that the cultivation effect of American television content appeared to be much more pronounced than the cultivation effect of Chinese television programmes. Watching Chinese television may predict a perception that people in China are friendlier and more helpful, while watching American programmes is related to a heightened awareness of the level of crime in China and the United States. The lessened effect of domestic television may be due to the correction of real-life experiences, while the reinforced influence of American television may be due to a lack of relevant knowledge and direct experience. College students' awareness of Chinese television content regulation may also reduce their trust in Chinese television content (Tang et al., 2018).

Although scholars have assessed the various impacts of American dramas on Chinese viewers, the scope tends to be limited. There is a lack of studies that focus on Anglophone TV dramas' effects on Chinese viewers' perception of mental health challenges. As concern for mental health challenges grows in China, people's perceptions of mental health challenges can be explored. This research aims to fill this gap and expand our understanding of the impact of Anglophone TV series on Chinese audiences. While considering cultural context as one lens for understanding characters and participants, I do not treat culture as a singular or deterministic explanation. Participants' engagement with these characters can be shaped by multiple intersecting factors, including but not limited to personal experience, educational background, media consumption habits, and individual viewing history. The survey and interview data also showed that Chinese participants gave different or contradictory responses to the same character or narrative, demonstrating that cultural context alone

cannot explain the differences in audience engagement. Therefore, when cultural factors are mentioned in this thesis, they are one possible influence, not a definitive cause.

Television, Emotion and Empathy

Television drama has long been recognised for its capacity to generate emotional engagement in the audience. As Ang (1985) argued in her study of the audience for the American soap opera *Dallas*, emotional engagement does not depend on empiricist realism and classical realism. Ang proposed the concept of ‘emotional realism’ to explain why audiences can still resonate deeply with the characters’ emotional experiences, even though their own lives bear no resemblance to the world on screen. Viewers' experience is at the emotional level: "what is recognised as real is not knowledge of the world, but a subjective experience of the world: a 'structure of feeling'" (Ang, 1985, p. 45). Furthermore, Liebes and Katz (1993) addressed how emotional engagement operates across cultural boundaries. Their study of audiences from six cultural groups watching *Dallas* demonstrated that viewers from different backgrounds negotiate it in different ways, including "different types of readings, different forms of involvement, different mechanisms of self-defence, each with its own kind of vulnerability" (p. xi). Liebes and Katz (1993) also distinguish between referential readings, in which viewers relate characters, problems, or situations to their own real-life situations, and critical readings, in which viewers treat the program as a dramatic construction. Audiences often move between these two approaches, but some are more specialised in the referential readings (Liebes and Katz, 1993). For understanding the cross-cultural reception of characters with mental health challenges, although the specific mental conditions or cultural contexts depicted in the drama may be unfamiliar, the emotional experiences they convey could resonate deeply with viewers. Chinese viewers could also negotiate these mental health portrayals to reflect their own identities and lives.

Television’s aesthetic and technical features are also important to convey meanings and emotions. Lury (2005) proposes that television form, including time, space, image, and sound, is a mechanism of meaning. For example, close-ups, editing pace, lighting and music cues are consciously designed to cue viewers’ feelings. Besides, Cantrell and Hogg (2018) argue that the actor's acting

is constitutive of television's meaning, distinguishing between television acting and television performance to emphasise the importance of actors. Television acting refers specifically to "the actor's portrayal of a character within a dramatic context"(p. 4), whereas television performance has a broader scope, including other elements such as costume, lighting, framing and editing (Cantrell and Hogg, 2018). In representations of mental health challenges, through the choice of visuals and sound, the serialised narrative structure, and the actors' portrayal of the characters' psychological states, television dramas can create intimacy that becomes central to how audiences form emotional connections with characters with mental health challenges.

Furthermore, Gorton (2009) argues that emotion in television is actively constructed through these formal and aesthetic choices. Her book places emotion at the centre of understanding television audiences. Drawing on both cognitive film theory and feminist affect theory, Gorton proposes that techniques such as camera framing, music, voice-over and performance work together to cultivate emotional engagement in viewers and sustain their attention. Otherwise, audiences might be distracted by television's domestic viewing environment. More recently, Samuel and Trimmel's (2025) edited collection examines both how contemporary television represents empathy on screen and how its discursive networks foster the audience's empathy. Television expands our worldview through different narratives, while digital, interactive tools make our viewing experiences and social connections more deeply personal and collectively shared (Samuel & Trimmel, 2025). In summary, the literature shows that TV form and content are deeply entwined with emotion and empathy. Television amplifies emotional involvement through its extended serialised format, images and sounds, and engaging acting, giving audiences prolonged, intimate access to characters' minds and worlds. In the next section, I will discuss audience engagement and cultural influences on perceptions of mental health.

2.3 Chinese Audience and Cultural Influence

While media content shapes the media effect, Perse & Lambe (2017) emphasise that media effects are highly conditional and mediated by individual audience characteristics. For example, a story about a person with a mental health

challenge might prime thoughts of a dangerous monster (e.g., Hannibal) for some audiences or ideas of an attractive genius for others. Therefore, a comprehensive understanding of media effects should consider both textual features and the conditional nature of audience reception (Perse & Lambe, 2017).

How do Audiences Engage with the Characters?

The audience's engagement with the characters tends to be an effective way by which people participate in the narrative (Dill-Shackleford et al., 2016). In the studies of narrative engagement, audiences' connection to fictional characters can be understood in various ways, such as identification, para-social interaction or empathy. Identification means psychologically integrating with the character, bringing oneself into the role's experience (Cohen, 2001), while para-social interaction implies viewing media characters in a similar way to friends or interaction partners (Tian & Hoffner, 2010). Although they represent different modes of responding, they all imply that viewers are able and willing to step into the shoes of the figures during viewing (Tian & Hoffner, 2010). Empathy can be a dual process in which audiences regard characters as self-extension while at the same time bringing characters into the self, which means that they engage in both personal feelings and characters' feelings (Dill-Shackleford et al., 2016).

Nevertheless, there can be limitations in these hypotheses to explain complex responses and mixed emotions to fictional characters, such as the attraction to negative experiences and evil, loving and hating a character simultaneously (Hoorn & Konijn, 2003). So, Hoorn & Konijn (2003) integrate the factors from different findings and studies into a model, describing the process of audiences engaging fictional characters. It involves audiences' subjective evaluation of ethics (the character is morally good or bad), aesthetics (the character is beautiful or ugly), and epistemic (the character is realistic or unrealistic), as well as the similarity and relevance to themself, positive or negative experiences. For example, negative experiences like feeling sorry for characters may give greater involvement to audiences than positive; ugly or weird characters can be so unrealistic that they become unique aesthetic symbols; fascination for an evil character tends to relate to moral interaction (Hoorn & Konijn, 2003).

Characters with mental health challenges are often portrayed as morally ambiguous figures, such as psychopathic killers, and their complex appeal can be understood through antihero studies. According to Janicke & Raney (2018), identification and moral disengagement can be significant factors for antihero enjoyment. When viewers identify with morally ambiguous figures, their moral judgments can soften, allowing them to like these characters and reduce cognitive dissonance (Shafer & Raney, 2012). In addition to these mechanisms, these characters tend to break conventional expectations and challenge social norms. As explained in research on the psychology of aesthetic pleasure, which provides a sense of novelty and uniqueness that satisfies aesthetic needs (Baek & Kim, 2016; Silvia, 2006). When identifying with morally ambiguous figures, audiences' moral judgments can become more flexible, allowing them to justify bad behaviour when it's framed with noble intentions (Shafer & Raney, 2012). These narratives often provide reasons that soften viewers' evaluations, such as portraying immoral acts as serving a greater good, so that audiences can emotionally connect with antiheroes without harsh moral scrutiny (Shafer & Raney, 2012). Mental health challenges can also serve as a narrative explanation that makes these characters' unconventional behaviours more comprehensible or forgivable. In long-running TV series, viewers may spend so much time with these characters that they begin to align with their perspectives and grow increasingly sympathetic toward their actions (Vaage, 2015). Shafer & Raney (2012) suggest that part of the appeal of morally complex characters lies in the fantasy they offer. Some antiheroes pursue justice in ways that feel satisfying, while others break social norms in ways that let audiences safely explore otherwise suppressed impulses.

Similarity and Influences

The way audiences respond to roles with mental health challenges may predict some similarity or homophily between them. Homophily could be objective or subjective, which means that people who interact with each other have similar levels of belief, education, and social status (Eyal & Rubin, 2003). This is supported by Eyal and Rubin's (2003) study, which examined viewers' engagement with aggressive television characters and found that perceived similarity to the characters significantly predicted identification with them. Possible similarities or homogeneities tend to influence how people understand

and respond to media characters with mental health challenges. In addition, personal experiences of mental health challenges regarding self or family may significantly influence people's reactions to media images of mental health challenges (Klin & Lemish, 2008). For example, (Hoffner & Cohen, 2012) found that viewers' personal experiences with mental health challenges influenced their reactions to *Monk* (USA, 2002–2009), a series featuring a detective with obsessive-compulsive disorder (OCD). Their study shows that audiences with varying degrees of lived experience responded differently to the character, suggesting that personal context shapes audience engagement. Specifically, viewers with personal experience of mental health challenges had a stronger parasocial relationship with Monk than those with no experience of mental health challenges.

The way audiences respond to characters with mental health challenges can also be associated with their thinking or behaviour change. Recent work on recreational persuasion suggests that parasocial relationships may weaken resistance to influence and alter perceived norms for describing behaviour (Moyer-Gusé, 2008). Also, if viewers develop an affective bond with a character who disconfirms generally held stereotypes of a stigmatised group, their beliefs, attitudes, and behaviours may change (Schiappa et al., 2005). In Hoffner and Buchanan's (2005) research, 208 young people completed questionnaires to measure their perceptions and reactions to their favourite fictional television characters. It proves that both similarities in personal characteristics and attitudes were positive predictors of the desire to act or behave like media characters. Other evidence suggests that higher levels of para-social interaction generate stronger support for advocacy positions and increase the likelihood of attitude and behaviour change (Stuart, 2006).

Nevertheless, research has shown that people tend to reject new information, which stories may overcome but sometimes fail to do so, because pre-existing beliefs, assumptions and stereotypes can affect audiences' involvement, including their willingness to immerse themselves in a story, their empathy with the characters and their recognition of the story's meaning (Polletta & Redman, 2020). As a result, the Chinese prevailing cultural attitudes towards mental

health challenges can be an important factor influencing Chinese audiences' interaction with these characters in Western TV series.

Chinese Audiences' Perception of Mental Health Challenges

Chinese viewers of Anglophone TV dramas can be a specific demographic group who tend to be considered more urban and well-educated compared to mainstream Chinese audiences. American dramas are mainly popular in large and medium-sized cities in China (Wen, 2017, as cited in Xu, 2018). American series viewers are still limited compared to the total number of Chinese audiences. In Tan's research (2011), he found that his 80 respondents, the Chinese audiences of Friends, turned out to have homogenising characteristics: young (19-32 years old), urban, computer-savvy, English-literate, university-educated students or white-collar workers. Although it is a small sample size, a connection between skills and audiences tends to be indicated. Research by Li et al. (2018) assessed the knowledge and attitudes toward mental health challenges in a sample of the Chinese population. They report that overall mental health knowledge has improved over the years, but most people still have negative attitudes towards mental health challenges, and this is a more significant tendency in urban areas. Besides, there is no direct relationship between education level and discrimination in different areas. In China, Li et al.'s (2018) study also shows that higher educated participants may have more mental health knowledge while still having discriminatory attitudes, such as associating people with mental health challenges with lower responsibility and functioning.

Cultural background can significantly influence people's perception of mental health challenges. According to Pescosolido et al. (2013), negative perceptions of people with schizophrenia and depression are prevalent in 16 countries in Europe, South America, Asia, Australia and Africa. Adolescents with mental health challenges may have difficulty understanding the mental distress they are experiencing, tend not to face trouble and see it as a normal experience until it reaches a dangerous situation (Wisdom & Green, 2004). The stigma associated with mental health challenges is widespread in Asia, having more similarities than differences with Western countries regarding awareness of causes, attitudes, and help-seeking (Lauber & Rössler, 2007). Although there are similar barriers in China and the West, the Chinese have stronger barriers in most areas,

including a lack of awareness, stigma attached to mental health challenges, concerns about taking medication, uncertainty about the role, competence and legitimacy of health practitioners, and short consultation times (Sun et al., 2018). In the traditional Chinese cultural context, mental illness is widely perceived as evidence of weakness of character and a cause of family shame, contributing to what Parker et al. (2001) describe as a "collective loss of face" for the extended family. Rather than seeking professional treatment, individuals are more likely to manage emotional distress privately. Notably, the Report on National Mental Health Development in China (2019–2020) (中国国民心理健康发展报告 2019–2020) found that the most commonly expressed psychological need among respondents was "self-regulation" which means understanding and managing one's own mental health, while 74% reported that accessing psychological counselling services was inconvenient (Fu, et al., 2021). So, in many Chinese communities, there is a tendency to address mental health challenges privately rather than seeking professional treatment and individuals are often reluctant to expose their negative feelings to others (Shi et al., 2020). In this context, watching television dramas that depict characters with mental health challenges may serve as a subtle form of self-treatment and self-understanding, offering Chinese viewers emotional resonance and reflection without the stigma of direct confrontation.

Conclusion

It is meaningful to make connections between the two areas of study, character analysis and audience experience. Viewers of television serials are repeatedly exposed to fictional characters and narratives, and over time, this ongoing interaction with the narrative deepens memories about the story while increasing understanding and reflection on the characters (Dill-Shackleford et al., 2016). The value of television narratives both to the individual and to society can be better understood by combining the analysis of the characters and their impact on the audience. Besides, although the various effects of Anglophone drama on Chinese viewers have been studied, there is a lack of research on perceptions of the mental health of Chinese viewers. This study expects to fill this gap and expand the understanding of cross-cultural communication between Anglophone television series and Chinese audiences.

Characters with mental health challenges have long been portrayed in Anglophone television. Their mental health challenges can be the defining feature in characterisation and driving plots, and scholars have identified several recurring cultural paradigms used to describe these characters. Alongside anti-stigma approaches, scholars have increasingly drawn on cultural studies frameworks to analyse representations of mental health challenges, linking portrayals of madness to discourses of race, class and gender (Harper, 2009; Cross, 2010). When it comes to audience research, cultivation theory is often used by scholars to explain the relationship between television content and viewers, examining TV's long-term impact. On the other hand, viewers' emotional connections to fictional characters can influence how they perceive and interpret the characters' experiences, potentially leading to shifts in understanding or attitude. However, audiences' pre-existing beliefs, assumptions and stereotypes can affect their level of involvement (Polletta & Redman, 2020). As a result, how Chinese audiences perceive mental health challenges in Anglophone TV dramas is not only influenced by the content itself but also by their individual psychological and cultural contexts. The next chapter will introduce the research methodology applied to connect characters and viewers in this study.

Chapter 3 Methodology

Introduction

In this chapter, I describe the mixed methods I used to address the research questions outlined in Chapter 1. These explore the representation of characters with mental health challenges in Anglophone television dramas, Chinese audience engagement with such portrayals, and the influence of cultural context on interpretation and emotional resonance. No research method is perfect and combining quantitative and qualitative data helps to overcome the shortcomings of each method (Creswell, 2014). Thus, in this research, I adopt a mixed-methods approach, combining qualitative textual analysis, quantitative questionnaires, and qualitative semi-structured interviews. This combination is selected as the most suitable methodology due to the multi-dimensional nature of the research objectives, which focus on the interactions between mental health characters in Anglophone TV dramas, Chinese audience engagement, and cross-cultural interpretations.

Firstly, I use textual analysis to understand how characters with mental health challenges are portrayed in selected Anglophone TV dramas. When performing textual analysis, researchers make educated guesses and interpretations that might be made of that text, trying to understand the ways in which people make sense of the world around them, in particular cultures at particular times (McKee, 2003). This method can explore characters' psychological narratives and aesthetic representations in depth. Through this qualitative approach, I provide a detailed interpretation of how these characters are constructed through narrative structures, dialogues, and visual and audio elements.

Secondly, I apply an online survey as the first step of audience research. Quantitative research methods aim to examine the current status of people or events in terms of quantity and frequency (Thomas, 2003). Quantitative questionnaire complements textual analysis by providing generalizable insights into audience responses, perceptions, and attitudes. By collecting quantitative data, I identify patterns and trends among Chinese viewers' emotional and

perceptual responses to mental health portrayals in Anglophone TV dramas. It also provides a general context for the following qualitative interviews.

Lastly, I adopt semi-structured interviews to explore a deeper understanding of Chinese audience experiences and interpretive processes. Unlike quantitative research, qualitative research focuses on small samples and often uses non-standardised methods to generate rich, detailed and complex data (Silverman, 2017). Qualitative data from interviews provides insight into the subjective nuances of the Chinese audience engagement with such characters.

As a result, I adopt this mixed-method approach to address the complexity of the research questions and overcome the potential limitations of each method. Through textual analyses, I explore an in-depth understanding of the patterns, themes and aesthetic choices of characters with mental health challenges in Anglophone TV dramas. Then I use an online questionnaire to gain general insight into Chinese viewers' engagement with these characters, and to invite potential interviewees. Finally, I adopt semi-structured interviews to explore respondents' personal experiences, perspectives and motivations in detail. By integrating the findings from the different methods, I aim to discuss an in-depth understanding of both these characters and the Chinese audience, making a valuable contribution to the existing knowledge.

Next, I will first discuss each of the research methods used in this study, including the design phase, data collection, and analysis procedures. Then, I will show the validity and usability of these research methods. Finally, I will discuss the ethical considerations regarding human participants, particularly in relation to the sensitive topic of mental health challenges in this study.

3.1 Textual Analysis

When performing textual analysis, researchers make educated guesses and interpretations that might be made of that text, trying to understand the ways in which people make sense of the world around them, in particular cultures at particular times (McKee, 2003). Text analysis is a data-gathering process (McKee, 2003), typically strategically selecting and presenting the analysed text, as the evidence for the overall argument (Fürsich, 2009). About the definition of text,

it is understood in the broader, post-structural sense as any cultural practice or object that can be “read” (Fürsich, 2009). That is, a text is something that people make meaning from: "Whenever we produce an interpretation of something’s meaning, a book, television programme, film, magazine, T-shirt or kilt, piece of furniture or ornament – we treat it as a text" (McKee, 2003). Text analysis is a method for researchers who want to understand how members of various cultures and subcultures make sense of who they are and how they fit into the world where they live. By seeing the various possible ways to interpret reality, we also understand our own cultures better because we can realise the limitations and advantages of our own sense-making practices (McKee, 2003). When television is the text, researchers may be interested in questions of aesthetics, ideology, discourse, narrative, genre, representation, camera work, music, casting, editing, script, authorship, and so on (Creeber, 2006). In this study, Anglophone television series will be the texts that explore the ways in which they give meaning to characters with mental health challenges. By focusing on characterisation, visual technology, and psychological construction, I will attempt to understand how characters' mental conditions are understood and interpreted in Anglophone popular TV series.

Western and Chinese cultures have quite different understandings of mental health challenges, which may lead to different interpretations of the same text. Members of different cultures make sense of the world in very different ways, just as they will probably interpret each text differently, and these differences operate at a variety of levels, from the superficial to those that challenge our very foundations for thinking about what reality is and how it works (McKee, 2003). Some cultural studies focus on and tend to theorise the relations between text and audience (spectator, subject, or reader) in two ways (Deming, 1986). On the one hand, ideological discourses mediate the relationship between text and reader, reflecting or influencing the way readers receive texts, constructing meaning and pleasure or resistance and contradiction for them (Deming, 1986). On the other hand, audiences are already in a certain discourse, such as class, gender, race, nation, etc., and they are shaped by this discourse as well as shaping it, which also influences their engagement with the text (Bennett, 1983, p. 221, cited in Deming, 1986). So, an important point is that researchers must establish its context; otherwise, they can’t do anything with a text, even simply

describe it, as even within nations, various identity subcultures can also have distinct enough sensemaking strategies to produce quite different definitions of a text (McKee, 2003). Therefore, a textual analysis to identify how characters with mental health challenges are portrayed in a Western cultural context is an important start in the study.

According to Fürsich (2009), the standard of a solid textual analysis should not be how close it is to the intentions of the producer or how close it is to the interpretation of the text by the relevant audience. Rather, textual analysis is about establishing the ideological possibilities between the production and consumption of a text. To be specific, the text analysis reflects not how accurately the text represents reality, but what version of reality is normalized in the text, which consequently implies the emancipatory or hegemonic (Fürsich, 2009). Therefore, it can also overcome the limitations of quantitative content analysis. While content analysis as a standardized quantitative method has common limitations, such as only working on obvious content and quantifiable categories, text analysis as a qualitative method overcomes these limitations. Beyond the manifest content, the textual analysis focuses on the text's underlying ideological and cultural assumptions, exploring meaning, implicit patterns, and omissions (Fürsich, 2009). The interdisciplinary nature of textual analysis has been accepted and used in combination with other research methods. When it combines with the wider contextual or 'extra-textual' nature of the subject, it can offer insight and inspiration to the complex array of themes, issues, debates, contexts, and concerns that are involved in a discussion of television work (Creeber, 2006).

In this thesis, textual analysis is the primary interpretive method. My readings are guided by the research questions and by scholarship on mental health representation, television narrative, and audience engagement, treating characters as carefully constructed texts rather than neutral reflections of reality. I focus on how characterisation, dialogue, visual style, and narrative construct mental health challenges on screen and evoke emotional responses from viewers. The specific analytical lenses used in the analysis include "madness" archetypes, attachment theory, and television aesthetics. I also focus

on moments where the series invites the audience's emotional engagement, which will be connected to the audience research that follows.

Data Selection

I chose two TV dramas as case studies, *The End of the f***king World* Season 1 (UK, 2017) and *The Queen's Gambit* (USA, 2020), which are part of the general shift in this pattern of representation. The British TV series *The End of the F***ing World* quickly gained worldwide popularity and received high ratings after broadcasting. E4 gained 1.1 million viewers in its first season and successfully attracted 1.4 million viewers in its second season. The series also gained praise for its aesthetic style and breaking with the conventions of earlier crime, drama, and horror shows, as well as for the implications that youth depictions can have on audiences and sufferers (Lopera-Mármol et al., 2022). *The Queen's Gambit* (2020, USA) premiered on Netflix in October 2020 and quickly became a hit, becoming popular in China. The drama is based on a 1983 novel by Walter Tevis and takes place during the Cold War era in the 1960s USA. The main character, Beth Harmon, is an orphaned chess prodigy who learns and masters the game of chess but struggles with addiction while trying to become the world's most outstanding player.

These two dramas portrayed charismatic psychotic protagonists who gained the attention of large audiences and followed a classic Western narrative model of mental disorder. They discuss a common psychological logic of reality despite having different stories, settings, illnesses, and symptoms. These two shows provide a unique portrayal of the psychological complexity of their protagonists, making them charismatic and providing a significant amount of information about their mental health challenges. This allowed me to select episodes and scenes that provided a clear and detailed presentation of the character's mental state and narrative progression. I obtained a focused and detailed sample of textual data, including key dialogue, narrative elements, visual screenshots, and significant scenes, providing a comprehensive understanding of characters' mental states.

Besides, both dramas construct the protagonists’ inner worlds in detail, including their childhood memories, family histories, and evolving “mental maps” over

time. James and Beth are not presented only as "the mad villain" or "the mad genius," but as people whose mental struggles appear in ordinary, everyday situations such as school, work, relationships, and leisure. Importantly, both series also present their processes of healing, so that audiences can see how James and Beth cope, grow, and finally find ways to live with or overcome their mental struggles. In contrast to other well-known "mad villain" or “mad genius” figures in contemporary Anglophone television, such as Hannibal or Sherlock, these two characters show vulnerability and recovery. As a result, they are suitable for my focus on the trauma, attachment, and everyday experiences of mental health challenges in this research.

Below is information on both samples:

Table 3.1 Information on selected TV Dramas for Textual Analysis

	*The End of the f***king World (Season 1)*	*The Queen's Gambit*
Country of Origin	United Kingdom	United States
Year of Release	2017	2020
Production Company	Clerkenwell Films, Channel 4, Netflix	Netflix
Genre	Dark comedy, Coming-of-age	Psychological drama, Coming-of-age
Number of Episodes	8	7
Episode Length	Approx. 20-25 minutes	Approx. 45-60 minutes
Protagonists	James	Beth Harmon
Mental Health Theme	Antisocial behaviors, psychopathic tendencies,	Addiction, trauma, substance abuse

	trauma, emotional detachment	
Narrative Approach	Voiceover narration, dual perspectives, dark humor	Linear narrative, internal monologue, psychological realism, symbolic visualization

Data Analysis

In the textual analysis process, I combined the classical framework of mental health challenges with contemporary psychological theories. First, I used the classic framework proposed by Rohr (2015), to categorise characters into the classic portrayal categories of “the mad as villain,” “the mad as genius,” and “the mad normal” to examine how mental health challenges are dramatized and portrayed in TV dramas, to examine the validity of this framework in portraying mental health challenges. Secondly, during my first viewing of these two selected series, I realised that the portrayals of the characters' mental health challenges had a common logical construction, which can be explained by attachment theory. The theory provides a consistent psychological structure and enhances the authenticity of the characters' psychological portrayals. Therefore, I adopted this theory to explain how early interpersonal experiences shape James and Beth's emotional and behavioural patterns. Finally, I explore the aesthetic techniques used in these dramas, such as dialogues, visual style, and audio elements, and discuss how these elements amplify the portrayal of mental health challenges to enhance audience engagement. Based on these theories and frameworks, I analyse how these two television series describe the complex, multidimensional mental health of the characters, exploring the interconnections between mental health portrayals, character psychological development, dialogue, and audiovisual elements.

I conducted repeated viewings of the selected television series, *The End of the F**ing World* (2017) * and *The Queen’s Gambit (2020)*. Initially, I identified specific episodes and scenes that were relevant to the research topic, including

the portrayal of the characters' mental health and key turning points of their mental development. I labelled these episodes and discovered the applicability of attachment theory at this stage. Then I returned to these episodes and scenes to narrow down, selecting and labelling the most representative scenes. I collected screenshots and line transcripts to support detailed analysis. After this, I analysed these scenes using an established analytical framework, applying classic portrayal categories, attachment theory for psychological realism, and aesthetic analysis of audiovisual elements. In this stage, I identified, categorised, and interpreted patterns, themes, and significant textual features to analyse how these dramas construct and present James and Beth's mental health challenges in detail. I observed and recorded character behaviours, dialogues, narrative contexts, visual aesthetics and audio elements, applying them to the analysis. To ensure consistency and accuracy in textual analysis, I repeatedly watched selected episodes and examined selected scenes. After the analysis, I revisited the relevant clips to ensure that relevant themes were identified, interpretations remained consistent and were supported by sufficient textual evidence, to ensure the reliability and validity of the analysed results.

To illustrate the application of visual analysis, I take the screenshot in Figure 4.2 as an example. In addition to the mise-en-scène, the series often frames James in frontal shots, which further emphasises his difficulty connecting with others, even in familiar settings. By positioning James squarely in the centre of the frame and facing directly towards the camera, it creates a sense of detachment and isolation, as though he is disconnected from the events unfolding around him and feels like a stranger in his own home. Furthermore, by breaking the fourth wall and directly addressing the audience, James exposes his innermost thoughts and emotions, creating an intimate yet unsettling connection between the viewer and the character. This approach of analysing visual components will be applied to key scenes throughout the text analysis chapters to decode their meanings.

Figure 4.2 Dark tones, grim expression, knife in hand when waiting for Alyssa (Ep1)

3.2 Online Survey

For the audience study, I adopt the online survey as the first step in exploring Chinese viewers' engagement with characters with mental health challenges in Anglophone TV dramas. The results obtained from the questionnaire helped me establish a general understanding of Chinese audiences' involvement and provided insights to refine and update the questions for the following interview, as well as help me select interviewees. Qualtrics (www.qualtrics.com), a platform that simplifies survey creation, distribution, and data analysis, is employed to conduct the entire survey. Qualtrics makes it easy to monitor the survey's progress by creating the questionnaire online, producing the link and QR code to distribute, automatically tracking responses and updating data in real time. It provides secure information protection and offers tools to analyse survey results and create visual data representation.

Questionnaire Design

The questionnaire encompassed a balanced mix of closed-ended and open-ended questions, designed to capture the audience's involvement, perception, and demographics relevant to the research topic. It contains 24 multiple-choice

questions and 7 optional open-ended questions that take approximately 7-15 minutes to complete based on the respondent's preference. All open-ended questions with text entries are optional and can be skipped easily so that respondents can choose to complete the survey quickly or give detailed answers if they wish. Several survey items were adapted from Kubicka's (2021) study on identification with television characters, with modifications to address the Chinese audience engagement with characters with mental health challenges in this research. The questionnaire comprised four parts (Appendix A: Questionnaire Sample): viewing preferences of Anglophone TV dramas, characters with mental health challenges in Anglophone TV series, perception of mental health challenges, and demographic information, which could also be considered as a mini interview to allow participants to share as much as they wanted. I initially created the questionnaire in English and then translated it into Chinese to enable more people to participate in the survey. The English language option was also maintained, and respondents were given the option to view the original version.

Issuing Questionnaire

For the validation of the questionnaire, I first conducted a pilot test with a small sample of Chinese participants to collect their feedback on the clarity, relevance, and Chinese translation of the questionnaire items. This group is non-random but selected from people I know, including academics, students in relevant majors, writers, and fans of Anglophone TV dramas. I collected any potential issues or confusion they encountered when completing the questionnaire and then modified them, such as inappropriate words in Chinese.

After that, I began by inviting friends who expressed interest in Anglophone TV dramas to participate in the survey. Subsequently, I sent out the recruitment poster to several WeChat groups, which are a source of potential respondents given the high popularity of WeChat as an instant messaging app in China. I also targeted specific groups on Douban, a Chinese website well-known for its concentrated communities of media enthusiasts, such as the respective fan groups of *The Queen's Gambit*, *Shameless*, *The End of the f***king World*, *Killing Eve*, and different groups of Media professionals or academics. Finally, I got 147

respondents who completed the questionnaire, and some of them gave detailed texts to open-ended questions.

Quantitative Data Analysis

Both quantitative and qualitative data were collected from the online survey, but only the quantitative part will be addressed here. All qualitative data is analysed together, including the text answers to open-ended questions in the questionnaire and interview scripts, which will be discussed in the Qualitative Data Analysis section. As I primarily focus on qualitative data, quantitative data collected through the online questionnaire were analysed using the basic analytical tools provided by Qualtrics.

In addition to the design and distribution of the questionnaire, Qualtrics (www.qualtrics.com) also provides professional questionnaire analysis assistance, including data filtering tools to check the validity of each answer and filter out the invalid ones. Besides, it automatically creates questionnaire distribution status and questionnaire answer statistics and also visualises the results by generating statistical tables or charts based on the survey results. Based on that, I conducted a descriptive analysis with quantitative data, which refers to the process of summarising and organising the characteristics of a set of data, providing a simple summary of the sample and the measures, to describe the main features of data quantitatively. The descriptive analysis was divided into three steps: describing the profile of the survey results, exploring correlations and associations among different parts of the data, and generalising the key findings (Denscombe, 2017). After the data collection phase, Qualtrics performed preliminary data checking, automatically screening responses for completeness and validity, and then generated straightforward statistical summaries, primarily focusing on descriptive statistics. There are tables and charts presenting frequency distributions, percentages, and basic graphical representations to illustrate response patterns or general trends in the survey data, which are used in the following analysis chapters to complement and support the qualitative findings. The analyses did not conduct advanced statistical tests but rather aimed at simple categorisation and presenting trends in the data to provide context for the qualitative responses.

Descriptive analysis is often the first step in data analysis, providing a way to present data in a clear and understandable form. It helps in identifying patterns, trends, or anomalies that may warrant further investigation or analysis through inferential statistics. I used the analysed results of the questionnaire as a reference for the semi-structured interview, to select potential interviewees by their responses and to adjust the questions for interviews with them. The qualitative data were used in conjunction with quantitative data to jointly illustrate different themes to answer the research questions.

For example, as shown in Figure 5.1, I use percentages to summarise the respondents' tendency to define the mental health problems of these characters, providing an important basis for subsequent qualitative analyses.

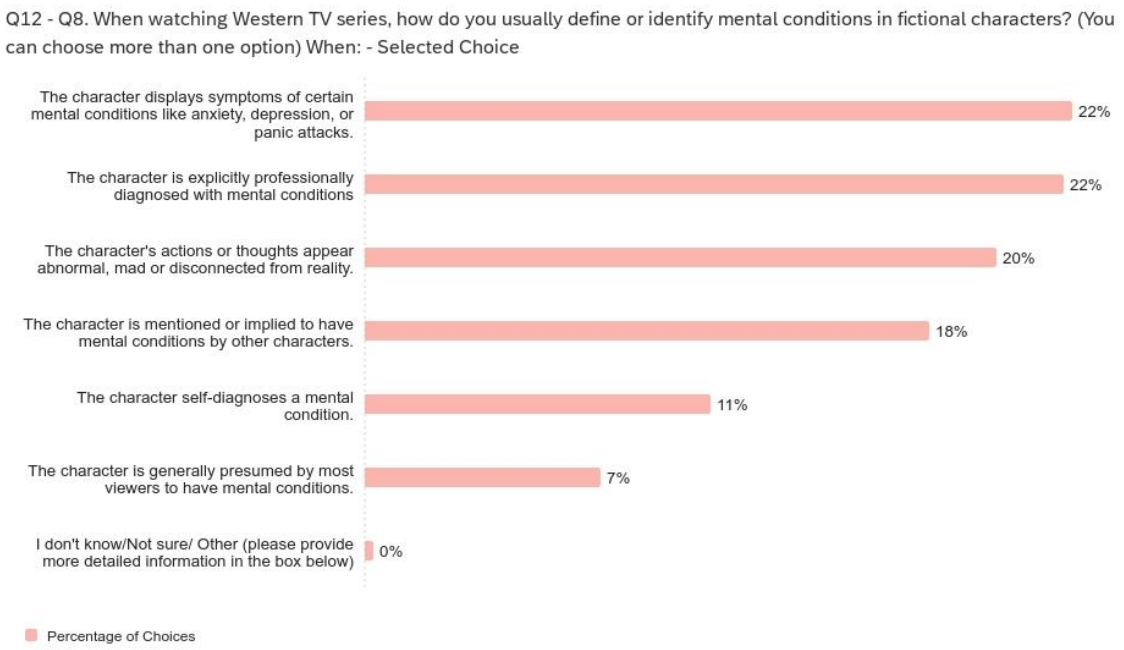

Figure 5.1 Definition of mental health challenges

3.3 Semi-Structured Interview

I conducted semi-structured interviews with 6 Chinese participants to gather qualitative data on their experiences with characters in Anglophone TV series and their perceptions of mental health challenges. In *Talking with Television (2009)*, Wood's argument is the notion of "text-in-action," which shifts the focus from the television program as a fixed text to an ongoing, dialogical process

where viewers negotiate meaning within the rhythms of their everyday lives. From this perspective, viewing experiences are understood as "pragmatically negotiated discursive encounters" (p. 147). Thus, the meaning of television exists not solely within the text but originates from the dynamic interaction between the text and the viewer. In this study, while textual analysis identifies how television dramas construct characters with mental health challenges, and survey responses reveal broader patterns of audience interpretation, interviews provide a richer space for exploring how Chinese participants reflect on and connect these elements to their own lives. Consequently, interviews are essential for capturing audience engagement as they "seeing 'text in action' enable us to build a much more precise account of the mechanical relations between textuality and subjectivity in particular contexts" (Wood, 2009, p. 196). Specifically, it allows for a close examination of how Chinese participants interact with the representation of these characters, revealing how they negotiate these complex characters within their own lived realities.

Design, Sample, and Data Collection

Since February 2024, I have sent invitation emails in batches to those who gave email addresses in the questionnaire showing their interest in the following interview, and I also invited those whom I know are fans of Anglophone TV series. In the end, 6 interviewees were confirmed, both female and male, in the 19–34 age group, living in China or overseas, with a variety of educational and professional backgrounds. Then, because of the richness of the interview data and the text obtained from the questionnaire, I did not continue to send invitations to the rest of the respondents who had left their email addresses. “Richness” refers both to the volume and the complexity of the material generated from open-ended survey questions and interviews. By the time data collection closed, the length and detail of responses were already large, and participants’ answers repeatedly returned to common themes around perceptions and feelings towards these characters, instead of producing completely new categories. Further recruitment might not significantly expand the emerging patterns and might be beyond the scope of what I can analyse in depth within this thesis. Therefore, after discussion with my supervisors, I believe that the existing material was sufficient to answer the research questions.

When I chose interviewees, I referred to the information that they provided in the questionnaire, firstly selecting respondents who had relatively extensive experience in watching Anglophone TV series, then taking into consideration the diversity of their backgrounds, and those who had not fully explained their options. It is worth mentioning that, given their background, they all have a wide knowledge of foreign cultures, film and television, or mental health, and they all possess at least one college degree. I sent the Participant Information Form (see Appendix C) and Participant Agreement Form (see Appendix D) to them in advance, informing them of audio recording, mental health challenges as a sensitive topic, and data management, and then received all their signed consent.

From February to March 2024, I conducted semi-structured interviews with these 6 interviewees through the audio chat of WeChat, a popular instant messaging app in China, for 30–45 minutes per interview, to collect qualitative data. All interviews were conducted in a semi-structured way where I encouraged the interviewees to talk about (1) their general preferences in viewing Anglophone TV dramas, (2) their involvement with the characters with mental health challenges, (3) if/how this type of characters had influenced their perceptions, and (4) cultural differences about mental health challenges (see Appendix B: semi-structured interview questions list) Additionally, based on the information they provided in the survey, I also asked various personalized questions to have them elaborate on their choices in the questionnaire. Here is the basic information of the interviewees:

Table 3.2 Information about participants of interviews

Assumed Name	Gender	Age	Current Location	Notes	Interview Date
Interviewee 1	Female	25-34	Overseas	Work in London; major in Film; lived in US.	10 Feb 2024
Interviewee 2	Male	19-24	China	Work in international	21 Feb 2024

				business industry as a freelancer.	
Interviewee 3	Female	25-34	China	Study in Netherlands this year, major in computer science.	22 Feb 2024
Interviewee 4	Male	25-34	China	Chinese writer mainly writing novels.	7 Mar 2024
Interviewee 5	Female	19-24	Overseas	Student in London, major in play writing	8 Mar 2024
Interviewee 6	Female	25-34	China	English Teacher focused on TOEFL teaching.	13 Mar 2024

Qualitative Data Analysis

All qualitative data was analysed together in this study, including interview data and responses to open-ended questions in the questionnaire. In this thesis, “interviewees” refer to the six participants who took part in semi-structured interviews and are numbered Interviewee 1 to Interviewee 6. “Respondents” refer to those who completed the online questionnaire. As the questionnaire was anonymous and included a larger sample, respondents are not individually numbered.

Since the data is abundant, I used the professional qualitative data analysis software NVivo for data coding during the process of analysis. In this research, the raw data was in the Chinese version as the online survey and interview were both conducted in Mandarin Chinese. Thus, I transcribed all the recordings to

Chinese-language texts and then imported all texts from both interviews and questionnaires into NVivo. Then, I translate quotes that I would use in my thesis into English in the final stage. I extracted participants' opinions and coded data into topics within NVivo to do an in-depth analysis.

In the first round of analysis, I conducted preliminary coding in NVivo, carefully reading through each response and interview transcript. Participants' statements and opinions were extracted and labelled according to emerging topics and concepts. NVivo's coding tools helped me identify recurring themes and patterns, as well as contradictions and contrasts in participants' responses. In this round, I categorised the themes that emerged mainly according to the design framework of the questionnaire and interview questions:

Participants' preferences for Anglophone TV dramas.

Participants' engagement with characters with mental problems in Anglophone TV series.

Participants' perception of mental health challenges and cultural differences.

Participants' demographic information.

Subsequently, I conducted a second round of analysis outside NVivo to further refine the thematic structure and deepen the analytical insights. For this stage, I exported key-coded data segments from NVivo into Word documents to systematically re-examine, reorganise, and categorise the data. During this process, I identified the themes of different analytical chapters to integrate and categorise all emerging sub-themes.

In the third and final stage of analysis, I conducted a critical rereading of the analysis draft to refine the themes, verify their relevance, and assess their alignment with each chapter's theme. I carefully revised and edited the thematic structure of different chapters, removing redundant, irrelevant, or less significant information to ensure clarity, coherence, and focused analytical depth. So, in the end, the data is categorised as follows:

Table 3.3 Coding tree of audience analysis

Main Theme	Sub-theme	Code Example

1. Chinese Audiences Understanding and Interpretation of Characters with Mental Health Challenges in Anglophone TV Dramas	Define a Character with Mental Health Challenges	Criteria for Defining Mental Health in Fictional Characters Subjectivity and Complexity
	Chinese Audience Interpretation through the Encoding/Decoding Model	Dominant Reading Negotiated Reading Oppositional Reading
	Other Influencing Factors	Diversity of Information Sources Personal or Observed Experiences with Mental Health Challenges Overseas Experiences
2. Chinese audiences' gratification of characters with mental health challenges in Anglophone TV dramas.	Affective needs: Aesthetic enjoyment, Emotional experiences	Extraordinary Traits, Moral Ambiguity, and Aesthetic Appeal Enjoyment of Novelty Escapism
	Cognitive Needs: Seeking Information and Understanding	Information on Mental Health

		Learning Through Fiction and Character Role Models Gaining Different Perspectives Creative or Professional Inspiration
	Personal Integrative Needs: Self-understanding and Personal Identity	Self-Reflection Self-Understanding Self-Validation Psychological Compensation Cultural Impact: Character Complexity and Cultural Attitudes
3. Chinese audiences' emotional response to characters with mental health challenges in Anglophone TV dramas.	Emotional Response	Identification and empathy Sympathy Caution and Fear
	Influencing factors	Similarity Trauma description Aesthetic and Narrative Choices

4.Effects on audiences' perception	Effects on perception of mental health	Influence on perception rather than behaviour Moderated by cultural factors
	Limited concern on mental health themes	Not main focus Consider ratings, plot, and other factors
	Television and Film	The blurred boundary The differences

Building on this analytical framework, the audience analysis chapters will provide a detailed discussion of the findings, exploring the differences and meanings of the sub-themes. I use illustrative quotes from the survey and interviews to provide a rich and in-depth understanding of the audience experience.

It is important to note that this research does not measure participants' formal clinical knowledge. When respondents describe characters in terms of "depression", "anxiety", or other diagnoses, I treat these as everyday, cultural understandings of mental health rather than clinical assessments. Several participants show relatively high mental health literacy, but I still treat their accounts as medicalised language and popularised ideas about diagnosis, not professional expertise.

In addition, this survey primarily focuses on participants' perceptions, interpretations and self-reported reflections, rather than direct, observable behaviour. Only one question invited respondents to mention possible behavioural changes, and items were brief and nonspecific. As a result, I treat the data as evidence of how participants understand and talk about the

perceptual influence of these characters and dramas, rather than as a measure of concrete behavioural changes. The discussion of effects in Chapter 7, therefore, focuses on perceived and interpretive influence and is cautious about making claims about behaviours.

3.4 Validity and Reliability

Throughout this study, I ensured the validity and reliability of the adopted methodology, including textual analyses, qualitative analyses based on quantitative questionnaires and qualitative analyses conducted through semi-structured interviews. For the textual analysis, I established a clear analytical framework to ensure validity, including classical frameworks of mental health portrayals in Western culture, attachment theory, and audiovisual elements. To maintain the reliability and consistency of the textual analysis, I performed multiple viewings of selected episodes and cross-checked notes and interpretations. Then, the questionnaire was designed and distributed using Qualtrics, which provides data validation tools to guarantee the reliability of the quantitative data. These tools automatically filter out incomplete or invalid responses to improve the accuracy of the data. I used straightforward descriptive statistics to minimise interpretation bias, thus further improving reliability. Regarding the semi-structured interviews and qualitative questionnaire responses, validity was supported by developing open-ended. Yet, focused questions directly linked to the research aims, allowing participants to clearly and freely express their perspectives. In the analysis process, data reliability was ensured by using NVivo software to code systematically, supplemented by detailed manual analysis. Also, I conducted multiple rounds of coding and thematic refinement, constantly revisiting and critically assessing the results. In summary, these methods ensure the reliability and validity of qualitative findings.

3.5 Ethical Issues

This research was approved by the Ethical Committee in the College of Arts at the University of Glasgow on 16 August 2022 (see Appendix E), and the main ethical issues in this research have been clarified in the ethical application form. This section primarily addresses the protection of anonymity and privacy for all

participants and the consideration of mental health challenges as a sensitive topic, followed by a separate discussion on data management at the end.

Online Survey

For the online questionnaire, I gave an introduction at the beginning, informing participants of the purpose of the research, the questions they would encounter, the importance of anonymity and data security. I have discussed the topic of mental health and stressed that their participation is entirely voluntary, and they can withdraw at any time. The survey would only proceed to the next page if they clicked 'Agree' at the end of the introduction to indicate their approval; otherwise, it would close automatically. I did not ask for identifiable personal information in any questions, so all data obtained from individuals is anonymous and confidential. Only email addresses were requested as contact methods when they chose to take part in the follow-up interview. The online questionnaire created by Qualtrics does not record respondents' IP Addresses, location data, or contact info.

When it comes to mental health, multiple-choice questions are simple, so participants can just check yes or no. In contrast, open-ended questions can be skipped to avoid evoking difficult emotions. Participants can end the questionnaire at any time, as a reminder at the beginning. I also asked for the help of my supervisor for a review when the questions were finalised and paid more attention to the terminology used for the public when translated into the Chinese version. After that, I tested it with some Chinese readers, getting feedback and suggestions before applying it officially.

Semi-Structured Interview

For the semi-structured interviews, explicit consent was obtained from all participants before the commencement of each session. The consent form (see Appendix D) clearly outlined the nature of the study and the type of questions to be asked and reiterated the voluntary nature of their participation. I did not ask for identifiable personal information in the interview and carefully redacted any identifying information in the transcription process. I informed them of the risk

of mental health challenges as a sensitive topic in the Participant Agreement Form (see Appendix D) and stressed that again before the interview started.

To lower the emotional risk, the interview questions were not directly related to the interviewees' personal experiences. Instead, they focused on their thoughts about the characters in TV dramas and general attitudes toward mental health. Participants were made aware of the potential sensitivity of discussing mental health challenges. To address this, I ensured a supportive environment during interviews, allowing participants to skip questions or the session if they felt distressed. Also, I paid close attention to the emotional reactions of the interviewees, avoiding topics that evoked discomfort in both the researcher and participants and taking the time to stop or move on when necessary. Fortunately, no related problems were encountered during the interviews.

Data Storage

All collected data, including survey responses and interview transcripts, are stored on OneDrive, a secure, password-protected server with access limited to the researcher. Data is retained for a period as specified by the university's guidelines, after which it will be securely destroyed. The handling and storage of data comply with the General Data Protection Regulation (GDPR) and the university's data protection policies. The distribution method created by Qualtrics guarantees information security, as the anonymous survey link and the QR code cannot be tracked and used to identify participants, and all results are stored on its server.

In summary, this research prioritised participant anonymity and privacy, particularly given the sensitivity of the topic concerning mental health. The methodological approach was designed to minimise emotional risk to participants, with careful attention to the language used in questionnaires and during interviews. All data collected has been securely stored and managed in compliance with GDPR and institutional guidelines.

Conclusion

In this chapter, I describe the methodological framework designed to answer the research questions effectively. In this study, I used a mixed research method, combining text analysis, quantitative questionnaire data, and qualitative semi-structured interviews to comprehensively examine the presentation of mental health challenges in Anglophone TV series and their reception by Chinese audiences. In the text analysis, I conducted in-depth discussions on selected case studies, *The End of the F**ing World (2017, UK)* and *The Queen's Gambit (2020, USA)*, revealing representational patterns that describe the mental health challenges of characters through classical frameworks, attachment theory, and audio-visual aesthetics. Then, for audience analysis, 147 respondents of the online questionnaire survey presented overall trends and audience perceptions through descriptive statistics. Meanwhile, open-ended questionnaire responses and semi-structured interviews with six interviewees provided more detailed qualitative data to explore the audience's interpretation and engagement with these characters, further deepening the research results.

To ensure research validity and reliability, I conducted repeated viewing, cross-checking, and multiple analysis procedures. Throughout the data collection and analysis process, I always paid attention to and maintained ethical considerations, such as informed consent, confidentiality, and respect for participants. This comprehensive methodological design laid a solid foundation for addressing the research questions and significantly enhanced the analytical depth of this study. In the following chapters, I will present and discuss the findings based on these methods and link the empirical results to the theoretical framework and the broader academic context.

Chapter 4 How are Characters with Mental Health Challenges Portrayed in Anglophone TV Dramas?

Introduction

This chapter explores how recent Western dramas have represented mental states and psychological issues. Through choices in characterisation and through visual and aural framing techniques, television dramas can effectively depict disordered personalities and the way they construct reality, providing a dramatic and complex portrayal of the human mind. There is a deep connection between psychology and television dramas and films, and characters on screen are often the subject of analysis by scholars from both psychology and Film and Television studies. In dramas featuring psychopaths, although the settings, stories, characters and presentation differ, they generally present various types of real psychological problems that people may encounter in reality. These episodes provide a delicate psychological construction of the characters, dealing with defining their mental health challenges, exploring their causes and delving into the psychological world of the characters. Furthermore, as mentioned in Chapter 2, with the emergence of contemporary anti-stigma and anti-stereotype discourses, negative images of characters with mental health challenges are being replaced by heroes, celebrities, and ordinary people, giving them greater cultural significance. I have chosen two TV dramas as case studies, *The End of the f***king World Season 1 (UK, 2017)* and *The Queen's Gambit (USA, 2020)*, which are part of the general shift in this pattern of representation.

These two dramas portrayed charismatic psychotic protagonists who gained the attention of large audiences and followed a classic Western narrative model of mental disorder. Drawing on Rohr's (2015) four cultural paradigms for the representation of madness: the mad as "wise fools", the mad as "dangerous villains", the mad as 'genius', and the mad as normal, this chapter examines how the selected television dramas construct their characters with mental health challenges and how these constructions relate to the broader shift toward normalisation identified by M. A. Johnson and Olson (2021). In *The End of the f***king World Season 1 (UK, 2017)* and *The Queen's Gambit (USA, 2020)*, the two

protagonists initially echo the traditional archetypes of the "villain" and the "genius". Both series also present their everyday struggles with mental health, placing them within the fourth category: the mad as normal. Besides, as discussed in Chapter 3, both dramas present the processes of healing, so that audiences can see how James and Beth finally find ways to live with or overcome their mental struggles.

They discuss a common psychological logic of reality despite having different stories, settings, illnesses, and symptoms, which can be understood through attachment theory and trauma. The elements in these two dramas tend to identify the links between the insecure attachment pattern and twisted behaviours, involving unresolved childhood trauma, emotional detachment, violent offending behaviour, and substance abuse. Therefore, attachment theory is appropriate for the two main characters in this analysis. Attachment theory suggests that early experiences with primary caregivers shape many aspects of a person's interactions with the world. According to Bowlby (1982), children form attachment relationships with their primary caregivers, and childhood interactions with primary caregivers shape their interpersonal style, further shaping their perceptions of and responses to others and the environment throughout life. A person is greatly influenced by their attachment style, especially when their needs are not met by someone close to them. Bowlby (1980) proposed that children must form some kind of attachment, no matter how hostile the environment is. That is, even if the emotional response of the primary caregiver is not ideal, the child will self-adjust to the relationship in order to survive (Peluso et al., 2004). As a result, they may form insecure attachments that can lead to abnormal mental or behavioural conditions. Through attachment theory, both characters establish a 'psychological reality' proposed by Ang (1985): an emotional truthfulness that operates independently of external verisimilitude (P.47). It is not the surface details of their lives that viewers recognise as real, but the underlying emotional textures of trauma, attachment, and vulnerability, which enables viewers across different cultural and personal backgrounds to find these characters resonant.

As fictional characters are not psychological subjects, in this thesis, attachment theory is only used as one of the interpretive frameworks to explore how

attachment patterns are represented within the television narrative. I focus on emotional cues that construct characters' mental health states, not clinical diagnoses. Besides, I link attachment theory to audience engagement in the chapters that follow, exploring how these patterns influence participants' emotional engagement with these characters. Some respondents in this study emphasised that they were fully aware these characters were fictional, yet they still developed various emotional connections to them. Some participants explicitly connected the characters' feelings and experiences to their own. However, there are limits to applying attachment theory to fictional characters, which might stretch it beyond its intended scope or risk pathologising characters in a way the dramas themselves may not support. Therefore, my analysis is restricted to the textual and aesthetic level and avoids making strong claims about characters' psychological diagnoses.

Further, TV dramas not only interpret the characters' disorders and changes in a continuous narrative but also visually present the inner world and emotional intensity at the moment. Screen media narratives provide access to both cognitive-imaginative and affective forms of mental issues because audiences are able to perceptually share in the sights and sounds of protagonists' internal and external worlds and to mirror characters' emotional facial expressions and gestures (Stadler, 2017). Importantly, television drama has a long-term and continuous nature, which allows the viewer to be exposed to this issue repeatedly. As a result, characters and plots in television series provide viewers with a more compelling narrative to convey a specific message (Henderson, 2017), and their appeal is expressed and reinforced by screen techniques and the continuous nature of the serial form. Television's formal and aesthetic qualities actively construct meaning and emotion for viewers. Lury (2005)'s framework analyses how televisual elements such as image and space produce meaning, while Cantrell and Hogg (2018) explore how actors' performances contribute to the construction of character on screen. Gorton (2009) argues that television fashions and constructs emotions through aesthetic and narrative techniques to cultivate viewers' emotional engagement with characters. Together, these frameworks inform the analysis of how these series use visual, performative and narrative strategies to construct the psychological states of

characters with mental health challenges and invite audiences to engage emotionally with their experiences.

As mentioned in Chapter 2, scholars have identified the socio-cultural attributes of mental health challenges. People with mental health challenges often look to the dominant culture actively for explaining their distress, or the surrounding culture may impose meaning on behaviour identified as mad (Casey & Long, 2003). As popular television series are important cultural works, exploring how they present mental health challenges would be a valid start to understanding audiences' involvement with them. As a result, this chapter will begin with an analysis of James in *The End of the F***king World (UK, 2017)*, followed by Beth in *The Queen's Gambit (USA, 2020)*, and finally give an overall discussion based on the above analysis. The explorations in this chapter will focus on three aspects of characterisation, psychological construction, and visual representation, guided by three central questions: how can the classical framework be applied to dramatise the psychological issues of the characters? How can attachment theory be applied to give characters a psychological logic consistent with reality? How can the aesthetic choices and techniques of television be used to enhance and amplify these constructions of mental issues?

4.1 The Mad as "Villain": *The End of the F***ing World (Season 1, 2017)*

The British TV series *The End of the F***ing World* quickly gained worldwide popularity and received high ratings after broadcasting. E4 attracted 1.1 million viewers in its first season, and it successfully gathered 1.4 million in the second season. The series also garnered praise for its aesthetic style and its departure from the conventions of earlier crime, drama, and horror shows, as well as for its implications regarding how youth portrayals can influence audiences and those struggling with similar issues (Lopera-Mármol et al., 2022). The show is based on Charles Forsman's graphic novel, beginning with a 17-year-old named James who has self-diagnosed as a psychopath. James suffers from childhood trauma after seeing his mother commit suicide as a child. The TV series starts with his desire to kill a human, and he chooses his new classmate, Alyssa, as his victim. Alyssa is a rebellious 17-year-old from a dysfunctional family. Alyssa suggests they run away together to escape their dysfunctional families and

search for her biological father, who abandoned her. At first, James agrees, as he sees it as an opportunity to kill her. Alyssa and James are repeatedly depicted as criminals who commit theft, robbery, and blackmail. Nonetheless, after time and many inevitable misadventures, they begin to develop a somewhat loving relationship. Despite its popularity, *The End of the F***ing World* has attracted relatively little scholarship within television studies. The most sustained analysis comes from Lopera-Mármol, Jiménez-Morales and Jiménez-Morales (2022), who examine how the series's aesthetic choices shape the portrayal of James's self-described "psychopathy," which they argue more closely resembles antisocial personality disorder. Their analyses focus on diagnostic accuracy and representation, while my research reads James's "psychopathy" through attachment theory and his healing process through the relationship with Alyssa.

Psychopathy, Violence, and Emotional Detachment

James is a troubled teenager who exhibits psychopathic tendencies and displays violent behaviour at the beginning of the first season. He reveals a complex blend of psychological trauma, attachment issues, and sociopathic tendencies that drive his violent behaviour. He exhibits a lack of empathy and a disregard for the feelings of himself and others, as his violence is initially against himself, then against small animals, and finally upgrades to humans. As in many Western crime dramas, psychopaths are associated with dangerous villains who are described as ruthless or violent. These dangerous, uncontrollable mad villains create thrills, excitement and suspense in many artistic works, such as Hannibal Lecter, a classic serial killer in novels, films and TV series (Rohr, 2015). Voice-over monologues and visualisation of his imagination show the inner world of a psychopathic killer to viewers. James is always reticent, expressionless and hiding the truth so that he can blind the other characters, yet viewers who are given access to his thoughts deeply understand his intentions. In the story, only audiences know that he has plotted to kill Alyssa, a secret between the viewers and the protagonist. Besides, his changes occur mainly in the inner world, and this subtle transformation is fully revealed through extensive use of voice-over monologue, which is the main form of communication between James and the audience. Also, his thoughts and imagination are sometimes visualised and

interspersed quickly with ongoing dialogue and action, creating theatrical moments.

The story begins with James' voice-over inner monologue and flashbacks. In the first scene of Episode 1, James sits in a dimly lit room with an expressionless face and an unemotional voice-over: "I'm James. I'm 17. And I'm pretty sure I'm a psychopath." Then, a series of flashbacks accompanied by monologues demonstrate why he thinks this: he has no sense of things. As he said, "I was eight when I realised I didn't have a sense of humour", the scene shows that when his father tells him jokes, he just remains expressionless: "I'd always wanted to punch my dad in the face." Then, when he was nine, he put his hand in a working deep-fat fryer until his entire left hand was covered in scars, but he apparently did not feel the pain strongly. Then, after saying, "I wanted to make myself feel something", he begins his first killing at 15 years old. The scene starts with a close-up of his gruesome left hand, holding a cardboard box containing the neighbour's cat. As Lopera-Mármol et al. (2022) argue, by integrating sharp camera angles, rhythmic editing, and a natural soundscape punctuated by gunshots and animal noises, this daylight forest scene effectively externalizes James's psychopathic traits. The camera switches behind him, following him slowly and unstably into the forest until he stops in a grassy area, carefully kneels down and gently sets the box down. Cloudy skies, empty forests and shaky camera shots build a gloomy and tense atmosphere, which is consistent with his inner world: isolated from the world, grey and hiding the secret of killing. The camera then pans to the front at a low angle, his head bowed and his face unseen. His internal monologue is calm and steady, his movements gentle and slow, with soft natural sounds and cat meows. Suddenly, he kills the cat with a knife in a quick movement and then looks up slowly, revealing a cold expression (figure 4.1). The stylistic choices also reveal his PTSD as a manifestation of early childhood trauma (Lopera-Mármol et al. 2022). He wears a clean grey shirt, with neatly cut hair, a merciless eye and a terrifying left hand, suggesting his psychopathic features that he feels no fear or remorse; on the contrary, he calmly plans and carries out the murder. In the next scene, the animals he killed later are all displayed in a stop-motion effect, neatly arranged, accompanied by James' calm inner monologue: "I remember every single one." He pauses between words, deliberately emphasising "every, single,

one". All these elements gather to invite the audience directly into his unstable worldview, provoking a sense of unsettling dread while simultaneously eliciting pity for his underlying vulnerability.

Figure 4.1 James' first killing (Ep 1)

James's violent behaviour can be interpreted as a form of emotional dissociation or detachment, a common coping mechanism for individuals who have experienced severe emotional trauma. Various visual cues emphasise his disconnection from the world around him, particularly in the intimate and domestic environment of the home. Besides the internal monologue, the mise-en-scène also effectively illustrates his detachment and how James gradually transforms throughout the narrative. In Episode 1, James waits at home for Alyssa to arrive for a date, with the sole intention of killing her (figure 4.2). At that moment, while the outside appears vibrant through the window with bright sunlight and greenery, his house remains dimly lit, characterised by dark-toned walls and furniture, and sparsely decorated with only a few simple household items. The window occupies a small part of the scene, and the outside world looks far away, reflecting that his inner world is dark, restrained, and disconnected. James sits upright and stiff on the couch, wearing a neat dark shirt and holding his knife, which will be hidden under the cushions before Alyssa

arrives. He is expressionless, looking stern and cold, mirroring the same demeanour as when he killed the first kitten.

As Lury (2005) argues, the formal qualities of television, such as its use of image and space, actively produce meaning for viewers. The close-up can be one of television's defining features, effective and intimate on the small screen, drawing the viewer into the character's inner world. She also argues that the spatial arrangement of settings, the use of colour, lighting and the positioning of characters within the frame all contribute to a specifically televisual way of creating meaning. In this drama, these choices are important to present James' psychological state to viewers. The contrast between the dark, sparse interior of his home and the bright outside world visible through a small window, the careful placement of James alone and rigid in the centre of the frame, and the recurring use of close-ups on his expressionless face all work together to externalise his emotional detachment and isolation, even in familiar settings. Rather than relying only on dialogue or plot to convey his mental state, the scene uses the meaning-making capacity of television's image and space to make his inner world visible. Furthermore, the frequent use of frontal shots, combined with James's voice-over inner monologue, creates an intimate yet unsettling connection between the viewer and the character, as though viewers are given access to his innermost thoughts.

Figure 4.2 Dark tones, grim expression, knife in hand when waiting for Alyssa (Ep1)

Another way of describing James' psychosis is to visualise his real intention, using flashforwards to show his mental state, inviting audience to experience a chilling yet darkly humorous thrill. As Lopera-Mármol et al. (2022) mention, Alyssa is cast as the victim in a flash-forward that depicts James's "malicious" point of view, a cinematic method that also turns his desires into a "hallucination." These shots are only a few seconds long and are quickly intercut into their real lives, where they are usually dating, and Alyssa trusts him a lot. When James plans to murder someone, the heroine Alyssa enters his life and is chosen as the first target. He approaches her, pretending to like her but looking for a chance to kill her. James' imagination is presented in which Alyssa is usually bloody, looking at the camera with a terrified expression, and sometimes struggling or already dead (Figures 3 and 4). These flashforwards are also about his weapon, such as a close-up of his knife (Lopera-Mármol et al. 2022). The contrast between James's internal world and reality is both dramatic and paradoxical, inviting the audience to experience a sensation of horror while simultaneously provoking laughter. For instance, when Alyssa says, "I feel comfortable with him. Sort of safe", there is a cut to James, who is sharpening the knife that he will use to kill Alyssa. As the narrative develops, these visual techniques map out James's psychological evolution, allowing the audience's emotional response to shift alongside his inner transformation. When he no longer wants to kill Alyssa, these flashforwards no longer appear, implying a remission of his psychotic symptoms.

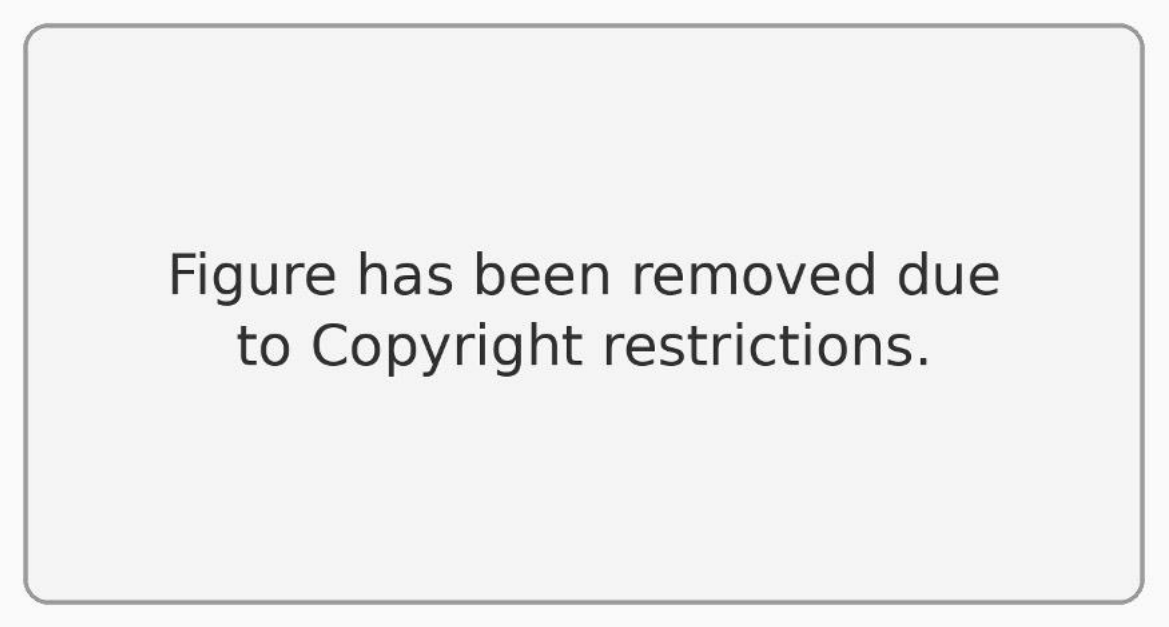

Figure 4.3 Alyssa in James' imagination

Figure 4.4 Alyssa in James' imagination

Childhood Trauma and Insecure Attachment

James's psychopathic character can be understood through attachment theory, which argues that young children require a secure emotional bond with at least one primary caregiver to develop normally in social and emotional domains (Bowlby, 1982). Relationships play a crucial role in shaping a child's psychological development. How children perceive themselves and others within

these relationships profoundly influences their perception of the world, gradually internalising into their cognitive framework as internal working models. If children experience insecure attachments with caregivers (e.g., through trauma or neglect), their ability to form healthy relationships and develop a positive self-concept is significantly impaired, often resulting in severe and long-lasting psychological consequences (Sroufe, 1988; Peluso et al., 2004). James's interactions with his parents profoundly shaped his interpersonal relationships and worldview, significantly contributing to his emotional dissociation and violent tendencies.

For James, his mother's suicide represents a profoundly traumatic event. At the beginning of Episode 5, the audience witnesses James' memory of his mother's suicide. On an ordinary day 11 years ago, James asks his mother to take him to feed the ducks, to which she initially responds, "No, James, I said. Not today", her demeanour listless and withdrawn. However, after James insists and his father encourages her, she eventually agrees to drive him to the lake. As young James cheerfully feeds the ducks, she drives the car directly into the lake, in full view of her son. Before doing so, she says to him tenderly and sadly, "I want to tell you something. I love you." The narrative strongly suggests James' mother suffered from depression, implying her mental and emotional struggle. The death of a primary caregiver as a result of a traumatic event is one of the most difficult traumas for young children to resolve (Zelenko& Benham, 2002). According to attachment theory, the primary caregiver is a source of comfort when the young child is exposed to a fear-inducing situation (Bowlby, 1969/1982, cited in Zelenko & Benham, 2002). Ideally, the primary caregiver provides the protection, comfort, and reassurance necessary to alleviate the young child's fear and anxiety, as the child would otherwise be unable to understand or resolve the situation. (Marmar & Horowitz, 1988, cited in Zelenko & Benham, 2002). At seven years old, James is developmentally unable to process the intense trauma and self-blame associated with his mother's suicide, particularly as he pressures her to go out despite her clear reluctance. Consequently, emotional dissociation functioned as a psychological defence mechanism, enabling James to suppress and detach from overwhelming feelings of guilt and pain.

Furthermore, James' father, the other primary caregiver, neglects James' attachment needs following the traumatic event. He never showed any genuine concern for his son's feelings or well-being. Instead, he consistently deflects serious issues through humour, watching TV, laughing loudly, and even giving James a knife as a thirteenth birthday present. In Episode 1, when James brings Alyssa home for the first time, his father bursts out laughing and exclaims: "What a relief! I tell you what. I've never been sure if he even, you know…I always thought there was something wrong with him! I thought probably, he was probably gay. Which is… That's fine. Like…" Alyssa aggressively responds to his father and then leaves the table. In the next scene, when James and Alyssa are alone, Alyssa says, "Your dad's a prick." James replies: "Yeah. I know. Sometimes, I feel like punching him in the face." This thought originally appears as an off-screen monologue in the first episode, but this is the first time James verbalises it to Alyssa. This recurring thought expresses James's anger toward his father, an anger he eventually acts upon by punching him and running away from home with Alyssa.

In this conversation scene, shot-reverse-shot sequences capture each character as they speak or as they are mentioned, visually emphasising their emotional detachment. Although the characters occupy the same physical space, each camera angle conveys a distinctly different mise-en-scène, showing how they are in separate emotional worlds. James sits motionless and expressionless at an empty table against a dark wooden wall devoid of decorations, wearing a black shirt, symbolising his repressed emotions and isolation (figure 4.5). He remains silent even when his father makes jokes that misrepresent or misunderstand him, and he only explains and responds internally through monologues and brief visual inserts. Conversely, when the camera focuses on Alyssa sitting opposite James, the background shifts to a brightly lit kitchen, dominated by white and blue and cluttered with household items. Alyssa wears a striking red jumper, eats half a slice of toast casually, and responds aggressively to James' father's jokes, indicating her strong engagement with the external world, in stark contrast to James (figure 4.6). The father sits between James and Alyssa, framed by half-dark wooden wall and half-bright household objects behind him, visually situating him between two worlds, partially involved in reality yet emotionally disconnected. The beer positioned along the visual dividing line

symbolically represents his transitional position between these two emotional states (figure 4.7). He wears a light-coloured shirt, drinks beer, and maintains an exaggeratedly cheerful behaviour, projecting superficial ease. However, his careless words reveal emotional detachment from James. He stops smiling after Alyssa responds aggressively, looking awkward. By positioning the characters directly in front of the camera, the scene creates a sense of confrontation and tension. For James, this visual strategy shows how uncomfortable and stressed he felt when talking to his father, indicating the deep emotional distance between them. For Alyssa, it creates an atmosphere of confrontation and awkwardness between her and James' father.

Figure 4.5 James in the conversation

Figure 4.6 Alyssa in the conversation

Figure 4.7 Father in the conversation

However, rather than simply being a terrible father, he is an overwhelmed, ordinary individual dealing with the profound consequences of mental health challenges. He appears incapable of effectively coping with his wife's depression, his son's emotional difficulties, or even managing his own feelings. In Episode 5, when the police arrive at James' house, James' father displays seriousness and sadness for the first time. He reports James's run away but tries

to protect him by hiding details that James robbed his car and assaulted him. In Episode 7, James' father, who is already aware that James committed murder, sadly shows the police a family photo from his wallet, stating, "She killed herself, his mum. She did it in front of him." He then lowers his head and cries. As James says in Ep4, his father was also trying to avoid feeling all the time: "That was the day I learned that silence is really loud. I think maybe my dad spent his whole life trying to avoid silence. When you have silence, it's hard to keep stuff out." This reveals that James' father is not as emotionally detached or indifferent toward his son as he initially appears. Instead, he actively represses and isolates his own grief, projecting an unrealistic image of cold-heartedness as a defence against his overwhelming emotional pain.

Consequently, emotional dissociation and violent behaviour become James's coping mechanisms for managing his pain and expressing anger. Bowlby (1980) proposed that children must form some kind of attachment, no matter how hostile the environment is. That is, even if the emotional response of the primary caregiver is not ideal, the child will self-adjust to the relationship to survive (Peluso et al., 2004). If children must live with parents who continually reject them, they might use some form of disconnection or avoidance as defence mechanisms (Bowlby, 1980; Sroufe, 1988). In James' case, he responds by completely suppressing his emotions and rejecting all interpersonal connections. The first episode explicitly demonstrates James' isolation at school, emphasising his lack of friends and absence of meaningful relationships outside his parents. James could neither prevent his mother's suicide nor cope effectively with his overwhelming grief nor influence his father's emotional detachment. However, he regulates his emotional reactions to adapt to his environment. Moreover, attachment relationships significantly influence adaptive responses throughout life. As children mature and attempt to develop new relationships, their early attachment styles tend to remain relatively consistent (Sroufe, 1988), and thus insecure attachments can become an adaptive problem for them (Peluso et al., 2004). James' internal working models, shaped by his insecure attachment style, consequently, cause him to repress direct emotional responses toward people and daily life events. Instead, he indirectly expresses his suppressed emotions through violent behaviour, an outlet that he can deliberately control.

Emotional expression, relationship and personality change

However, as the show progresses, James forms a deeper emotional connection with Alyssa, begins to express his emotions, confronts his traumatic past, and ultimately refrains from acting out in violent ways, casting doubt on his diagnosis as a psychopath. As Gorton (2009) argues, television actively constructs emotional responses in the viewer through its formal and aesthetic choices. Techniques such as camera framing, colour, lighting, music and voice-over work together to invite audiences to feel particular emotions toward characters. As James begins to change, this process of emotional construction becomes especially visible. The series uses a noticeable shift in its visual language to guide the audience from unease and distance toward empathy and warmth. A significant example of this shift in his emotional state occurs in another scene involving him waiting for Alyssa. In Episode 3, they have nowhere to stay, so they break into a stranger's house, cook and drink wine. After going through a series of events and experiencing moments of bonding, James' feelings begin to shift because of Alyssa. He feels happy when dancing with Alyssa and being kissed by her, but then he feels sorry when their sexual attempt fails and Alyssa leaves in anger. He struggles to understand and express his feelings because he has previously been numb and detached, so he prepared flowers to apologise and waits for her return (figure 4.8). In this scene, the house is well-decorated, warm and lived-in, featuring large floor-to-ceiling windows, yellow light, white walls, and decorations such as photographs of the owners, record players, and paintings. The windows occupy a significant portion of the frame, with trees positioned closely outside, blurring the boundary between the external and internal worlds. This visual setting symbolically suggests James has entered a new, different emotional space and is gradually becoming more open. His physical appearance also emphasises this implication: he sits on the sofa wearing a soft, light-colored jumper, restlessly rubbing his hands together, and quickly stands up to pick up the flowers when Alyssa returns. His expression is soft, and his eyes twinkle, showing his inner hesitation.

Figure 4.8 Warm tones, soft expression, flower in hand (Ep 3)

However, when Alyssa returns with another boy, James shifts quickly from feeling sorry to feeling angry, and once again determines to kill her. During this wait, he remains silent, but his inner monologue confirms the emotional changes occurring within him. He appears uncertain about how to handle these newly awakened emotions. These emotional fluctuations begin to undermine the validity of his initial diagnosis as a psychopath:

> James: I tended not to feel things. For a long time, I was good at it. Good at feeling absolutely nothing. I didn't even have to try. I just...didn't.
>
> James: Being with Alyssa had started to make me feel things. She made me feel things. And I didn't like it at all.

It is not until James finally kills someone that both the crime and their relationship reach a turning point. Although he had previously imagined killing Alyssa, in reality, he kills someone else to protect her: when a man attempts to assault Alyssa, James stabs and kills him with his knife. Alyssa suggests they run away together, but soon leaves James on the road, fearing him. Following this abandonment, James experiences his first significant emotional outburst, expressed through an off-screen monologue accompanied by a series of visual actions:

> [James] [thunder rumbles] When you have silence, it's hard to keep stuff out. It's all there. And you can't get rid of it. I used to be able to get rid of things, banish them. But I knew, after that day... it wouldn't be so easy anymore.
>
> [James] I was never Alyssa's protector...she was mine. Having finally murdered a human...I realised something quite important...I was pretty sure I wasn't a psychopath.

To avoid confronting his sadness, James initially attempts his familiar coping strategy, hurting himself by asking someone else to physically hit him. However, he can no longer suppress his feelings and ultimately bursts into tears. A top-down half-body shot clearly and directly conveys his grief to the audience. In contrast, the shot of James at the moment of killing is captured from below, creating the impression that viewers are looking up at a cold, emotionless psychopath. Yet now, viewers observe him directly, witnessing the emotional chaos and vulnerability of a normal, deeply affected young man in complete openness (Figure 4.9). The highly saturated hues of these images further emphasise the intensity of James' emotional state. The use of frontal shots in this scene continues to convey his isolation from the external world, but this time it highlights his immersion in his own intense feelings, creating intimacy and vulnerability. This approach invites the audience to closely experience James' emotional transformation, marking a clear contrast to his usual detachment and emotional distance seen in previous frontal shots. This visual strategy effectively emphasises the depth of his feelings for Alyssa and the internal struggle he is experiencing.

Figure 4.9 James bursts into tears (Ep 4)

To this point, James has to confront his feelings and reassess his diagnosis as a psychopath. Since it is the first time he has been able to express his pain in a normal way, James begins to understand that his lack of empathy is not the result of psychopathy, but rather a response to the trauma he experienced as a child. Although he remains involved in crime, he starts confronting the pain of his past. The series begins revealing key events that led to his current mental state: his mother's suicide.

Although James displays antisocial tendencies, insecure internal working patterns, and problematic attachment styles, these traits can be modified, according to attachment theory. Bowlby (1988) believes that the formation of internal working patterns of self and others is influenced by multiple relationships, rather than determined by a single relationship. Therefore, what matters most is the quality of social relationships a person chooses to surround themselves with. A supportive relationship may positively alter internal working patterns and alleviate insecure attachment issues (Sroufe, 1988). In the series, Alyssa provides such a supportive relationship. Unlike James' parents, she is mindful of his feelings, accepts him, and actively protects him. Additionally, because of their similarly difficult family backgrounds, they deeply understand each other despite their aggressive behaviours towards society and others. His

relationship with Alyssa provides a safe and supportive space for him to express his emotions and work through his trauma. In Episode 8, they lie on the beach at dusk, discussing their disappointing parents:

> Alyssa: I think I hate my dad more than I hate my mum.
>
> James: Me, too. I hate both of mine, but definitely hate my dad more.
>
> Alyssa: Why?
>
> James: 'Cause she died and he didn't. She killed herself. I was there. I didn't do anything.
>
> Alyssa: What was she like?
>
> James: Really kind. Really sad. She just always...found everything a bit much, I think.
>
> Alyssa: James?
>
> James: Yeah?
>
> Alyssa: It wasn't your fault.

Although James had not explicitly revealed his guilt, Alyssa immediately recognises it and responds supportively. James then smiles with relief, and at that moment, the sun rises over the sea, symbolising a rebirth of his emotional self within a gentle, hazily lit, natural atmosphere. James relaxes sideways on the beach, his body stretched out as he looks at Alyssa, openly expressing his feelings. In contrast, at home, James appears rigid and emotionally cold, frequently looking directly into the camera, both physically and mentally detached from his father.

Figure 4.10 James's relationship with Alyssa provides a safe and supportive space for him (Ep 8)

So, this supportive relationship with Alyssa eventually forms a secure attachment, changing James' internal working model. His feelings and interactions with others and the world gradually become healthier than before. Alyssa notices the change in him, shifting from her earlier observation "He'll never start anything" (S1, Ep 3) to "You've really come out of your shell, you know?" (S1, Ep 6). James consistently protects Alyssa throughout their escape. Two scenes in particular provide a clear contrast. In Episode 1, he kills animals easily, but by Episode 7, he can no longer do it which can be considered an intertextual reference. In this scene, James and Alyssa encounter a dog whose neck has been broken by a car, and decide to end its suffering:

> Alyssa: His neck's broken. We have to kill it.
>
> James: Yeah.
>
> [dog whines]
>
> James[sniffling]: I can't do it.
>
> Alyssa: Are you crying?
>
> James[sniffling]: No. (S1, Ep7)

Alyssa takes a stone, smashes the dog to end its suffering, and then hugs James as he cries. As James holds the stone with both hands, the camera quickly flashes back to the scene in Episode 1, where he kills the neighbour's cat. In that earlier scene, James, under a grey and overcast sky, wears a neatly buttoned grey shirt and has a cold, emotionless expression as he swiftly kills the cat with a knife (Figure 4.1). As Lopera-Mármol et al. (2022) mention , James's unkempt appearance coupled with sparse natural audio and his visible tears, marks a pivotal shift in his characterisation. Now he is portrayed as a typical, emotionally vulnerable young man, unable to cope with the emotions associated with killing (figure 4.11). The use of the same low angle shot reinforces the parallel between these two moments, but now James stands beneath a darker sky and is not alone (Lopera-Mármol et al., 2022). This stark contrast invites the audience to feel a profound sense of empathy, as the horrifying facade of a killer cracks to reveal a confused, traumatised teenager. His emotions are now clearly visible: he frowns, is tearful, and has shaking hands. He also looks directly at the animal rather than meeting Alyssa's gaze, illustrating how deeply he is immersed in sympathy and sadness, which ultimately renders him unable to kill the dog.

Figure 4.11 James' rich emotions come through now, frowning, tearful, with shaking hands (Ep 7).

More significantly, in Episode 1, James intends to kill Alyssa to understand how it would make him feel, while in the final episode of Season 1, he sacrifices himself to protect her. Pursued by armed police, they flee to the beach, where there is no escape:

> James: Say that I kidnapped you. Tell them that I did it all. Then you'll be OK. Nothing will happen to you.
>
> Alyssa: No. No way. We're going together. Come on! (S1, Ep8)

As the police gunfire sounds, James pushes Alyssa to the ground and continues running alone. Alyssa is quickly and safely restrained by the police, while James runs away from the camera towards the sea, breathing heavily (Figure 4.12). The audience hears his final internal monologue: "I've just turned 18. And I think I understand...what people mean to each other." After a flashback showing his shared experiences with Alyssa, the scene fades to black, followed by the sharp sound of a gunshot.

Figure 4.12 James runs away from the camera towards the sea (Ep 8)

As a result, this series uses shifts in mise-en-scène, camera angles, colour, and music to show James's psychological state and shape how viewers feel about him at each stage. As Gorton (2009) argues, television actively constructs emotion through its formal and aesthetic choices, inviting viewers to feel particular

things at particular moments. In James's case, the gradual shift from dark, cold and rigid visual elements to warmer tones, open spaces and visible emotional expression works alongside his voice-over to move the viewer from suspicion toward empathy, presenting his emotional transformation. It combines visual and narrative techniques to create a complex and nuanced portrayal of the "mad villain." Several common screen techniques are employed in this drama to represent the madness and danger associated with psychopathic characters, including specific camera shots, movements, and colour usage. Rose (1998) illustrates how film devices in English television introduce a sense of danger into scenes involving characters with mental health challenges, such as camera shots (close-ups, extreme close-ups, and aerial shots), camera movement (particularly tracking shots that move through the scene), and shot duration (the length of individual shots). In *The Dark Knight (2008)*, six film techniques are employed to convey the Joker's madness, ultimately constructing a character who "physically incarnates madness," including jump cuts, POV (point-of-view) shots, intercutting, and the use of colour (Camp et al., 2010).

Furthermore, James' performance exhibits a particular style of acting commonly seen in Wes Anderson's films, characterised by straightness, stiffness, minimalism, deadpan expression, and awkwardness (Peberdy, 2012). He lacks facial, vocal, and bodily expression, exemplifying the performance style of "doing nothing," which is frequently utilised in Anderson's films to illustrate a character's abnormality and incompatibility with the environment (Peberdy, 2012). Deadpan acting suggests dispassion and emotional disengagement but does not equate to complete emotional absence (Peberdy, 2012). Instead, monotone speech or an apparently lifeless physical presence can represent emotions the character struggles to outwardly express, but which are communicated to viewers through other narrative and visual elements (Peberdy, 2012). For example, inner monologues, flashbacks, mise-en-scène, and other narrative devices provide insights into James' motivations and experiences. These techniques help to humanise him and foster audience empathy, even when his actions might be morally questionable, resulting in a fully realised, multi-dimensional character rather than simply a stereotypical villain.

4.2 The Mad as "Genius": *The Queen's Gambit (Season 1, 2020)*

"The mad genius and gifted artist" is a recurrent motif in films and television, such as Ron Howard's celebrated biopic *A Beautiful Mind (2001)*. Classic television series also portray more nuanced representations of mental super skills resulting from mental health diagnoses, such as Sherlock Holmes (Benedict Cumberbatch) in *Sherlock (UK, BBC, 2010-),* and Carrie Mathison (Claire Danes) in *Homeland (USA, Showtime, 2011-)* A key trend with these new protagonists and major characters is the attribution of special talents or powers associated with mental health conditions (Beirne, 2019). This chapter examines the trend in the representation of this trope in popular Anglophone TV dramas, taking *The Queen's Gambit (2020, USA)* as an example. *The Queen's Gambit (2020, USA)* premiered on Netflix in October 2020 and quickly became a hit, also gaining popularity in China. The drama is based on a 1983 novel by Walter Tevis and set during the Cold War era in the 1960s in the United States. The main character, Beth Harmon, is an orphaned chess prodigy who learns and masters the game of chess but struggles with addiction while trying to become the world's most outstanding player.

The drama has also garnered considerable attention from scholars regarding its feminist representation, portrayal of chess, and Beth's mental health. Figueiredo & Diogo (2021) consider that Beth's outward appearance design reflects changes in the construction of her self and identity. By following the evolution of her projected image throughout the key moments of her journey, they explore how she shortens the gap between her actual and ideal selves, evolving from a fragile persona into an unquestionably powerful White Queen. Alternatively, Cheema and Wilkinson (2022) explore the factors that lead to Beth's substance use and subsequent sobriety, including shame, anxiety, and isolation. They believe that Beth's recovery is not unrealistic because the problems that led to Beth's substance abuse have been addressed. But Beth's addiction is less representative of those with more severe issues, and the merit of this presentation of substance use is that it may be relatable to more viewers. Also, through psychoanalysis, Brown (2022) focuses on the effects of post-traumatic stress disorder in this drama, exploring how *The Queen's Gambit* presents the impact that childhood trauma imposes on Beth and how she can overcome traumatic events, living with

her trauma. Combining attachment theory and television technology, this analysis explores the psychological constructs and aesthetic choices of the character.

This analysis examines the drama's various aesthetic choices to represent Beth's state of mind as a 'mad genius', using representative examples to illustrate how it portrays Beth's distinct mental conditions, thereby combining an interest in televisual aesthetics with psychological theory. Firstly, I describe the representation of the connection between her addiction, hallucinations, and giftedness. Next, I describe her uncontrolled substance abuse and social isolation. I then use attachment theory to explore the causes of addiction and her eventual recovery.

Sedatives, Hallucination, and Talent

The hallucination is used as a recurring symbol throughout the drama, linking Beth's addiction to her gift, and is also used to suggest the main changes in her mental state: in the first stage, she can control the addiction and seems to develop talents; in the second stage, she loses control of it and descends into darkness and chaos; in the third stage, she overcomes her demons and maximizes her talents to achieve ultimate victory. Her addiction to sedatives was provided by the orphanage, where she was also introduced to chess. Each child was given a daily sedative to stabilise them until the government no longer considered it legal, but Beth has become addicted to it. Throughout the drama, whenever she takes a sedative, a giant chessboard and chess pieces float to the ceiling, which she can manipulate. The hallucination is presented as controllable and consciously used by Beth to practice and deduce chess techniques, with the sedative being the switch. Whether Beth is in her cot at the orphanage, in her bedroom at the adopted mother's house, or on the field of play, she will look up and wait silently after taking the sedative. This dependence on the sedatives grows over time, as they do bring strength and benefits to Beth. They are used not just for producing hallucinations to do exercises, but also may enhance wishes to control, attack, or influence the self (Wieder&Kaplan, 1969, cited in Brown, 2022). Beth's addiction is elevated to a new level after she realises that if she uses them before a game, the pharmacological effects will produce the

ability to maintain control and attack within the chessboard and, as she mistakenly thought, gain control of her life (Brown, 2022).

The first episode describes how the hallucinations appear after she has taken a sedative before going to bed. The first time, the shadows on the ceiling slowly turn into a giant chessboard. The second time, the pieces in the hallucination appear on the board, and the third time, she can now control the movement of these pieces. In the scene where she controls the pieces, the camera starts at a lower position, following Beth's gaze towards the ceiling as it slowly reveals the appearance of the illusion. Then the pieces begin to move faster, and the pensive classical music becomes intense. The camera switches between close-ups of Beth's moving hand and the rapid movement of the pieces, emphasising Beth's control of the illusion. When the camera is on the ceiling, weaving in and out of the moving pieces, it is accompanied by the sound of giant stone pillars moving in addition to the tense classical music, creating an imposing atmosphere. And the camera looks at Beth from the ceiling through the giant, fast-moving chess pieces, like a powerful army looking at its commander. Every child is sleeping in the dark of night, but Beth and the hallucination are in the light, just as she is in her own secret kingdom created by these pills. Finally, the camera cuts to a close-up of child Beth's face, and she smiles slowly, confidently and ambitiously (Figure 4.14).

Figure 4.13 In her bed (Ep 1)

Figure 4.14 Child Beth smiles slowly, confidently and ambitiously

At the end of her hallucination, the camera always moves into a close-up of Beth's face, her eyes looking directly at the viewer through the screen, intensely showing the mental state at different stages that addiction brings her:

excitement and a sense of control, vulnerability and confusion, or determination and sanity. According to Colin McGinn (2007):

> The close-up affords a uniquely powerful window onto the mind of the character, more powerful than any encountered in the world of ordinary perception. … The face on the screen becomes a means of psychological revelation to which the viewer's eye is attuned. The close-up exploits what psychologists call 'mind reading': the minds of the characters become overwhelmingly present to us, more so than in real life. (p. 52)

The general effect of close-ups of the human face is amplified in the context of TV series depicting mental issues, which makes viewers feel particularly drawn to deciphering the characters' states of mind.

Additionally, as the adult Beth in most episodes, Anya Taylor-Joy's performance contributes to this depiction. Cantrell and Hogg (2018) distinguish between television 'acting,' which refers to the actor's own portrayal of a character, and television 'performance,' which includes the wider elements such as framing, lighting and editing that shape how that portrayal is received by the viewer. In the case of *The Queen's Gambit*, both dimensions work together to construct Beth's psychological state. One of Beth's characteristics is her difficulty in expressing emotion, and such emotional blocking implies that she is avoiding the traumatic past. As a result, Beth usually has little expression, but Anya's expressive eyes convey the different shifts of emotion well at various stages, especially in close-ups. This illustrates what Cantrell and Hogg (2018) describe as the 'intimate screen' quality of television, where the close-up of the face becomes the main way for viewers to access a character's inner world. According to Hewett (2018), this kind of restrained, minimal performance can be understood as 'scaled down' from theatrical projection, where meaning is carried not through large gestures but through small, controlled shifts in facial expression. Anya's performance operates at this level throughout the series. Her still face and watchful eyes communicate Beth's shifting mental states, from the confident ambition of the early hallucination to the vulnerability of her breakdown, to the calm determination of her final match. Therefore, according to Cantrell and Hogg (2018), this is not merely a recording of the actor's face by the camera, but rather the result of the interplay between the actor's acting and the production choices. Anya's restrained performance and the consistent

use of tight close-ups at the end of each hallucination sequence work together to make Beth's inner state visible to the audience, even when the character herself is unable to articulate it.

The scenes about hallucinations also hint at the price of genius, suggesting the next stage: she could be consumed by the adverse effects of this addiction. The camera angles, lighting and music that present the illusion change to suggest a shift in power between Beth and her addiction. In Ep3, after experiencing social failure, Beth returns home and takes sedatives as usual, but this time with wine. She lies down and looks at the ceiling, waiting for the hallucination. In this scene, the camera's position and direction of movement have changed, starting from the ceiling and looking down at her as she lies in darkness, then gradually advancing towards her (Figure 4.15). The soundtrack is also no longer rousing classical music, but joyful pop songs from the previous party. As viewers slowly move into a close-up of Beth, they experience the rhyming of the camera movement with the musical themes building towards a crescendo. As the camera approaches, the dark shadows of the pieces are cast on Beth, growing larger and larger until they completely cover her, while her eyes, always watching the viewer through the camera, are full of confusion rather than smiles and aggression. Also, the light changes, illuminating the surroundings instead of Beth, who is in the dark. These differences imply a change in her relationship with addiction and hallucinations in the next stage. The possibility of her being consumed by the dark side, as she is not always in reasonable control of them, as she thinks she is. The hallucinatory aesthetic in different scenes emphasises the intensity and complexity of the chess, as well as the psychological impact that it has on Beth. To be specific, the exaggerated and distorted visual perspective depicts the intense mental focus and concentration that Beth experiences while playing chess, as well as the sense of immersion and disorientation that she feels as she becomes more deeply absorbed in the game. In this scene (Figure 4.15), the effect of the chessboard appearing to look down on Beth conveys a sense of vulnerability and powerlessness that she is experiencing, while also predicting the mental and emotional challenges she faces as she strives to become a champion.

These shifts in camera, music and lighting illustrate the construction of emotion in television. As Gorton (2009) argues, formal and aesthetic choices do not

Figure 4.15 The shadow completely covers her.

simply reflect a character's feelings but actively shape how the audience feels about the character and their situation. In those scenes about hallucinations, the change from diegetic piano music to a sweeping non-diegetic score, combined with the widening of the frame to reveal Beth's isolation, intends to draw the viewer into her experience of both the thrill of her talent and the loneliness that accompanies it.

Alcohol, failure, and social isolation

Beth's substance addiction is also an obsession with the sense of control and winning. Throughout the series, Beth's substance use has consistent triggers: shame, anxiety and isolation (Cheema & Wilkinson, 2022). That is because when she is overwhelmed by problems in reality, she cannot deal with such emotions, so she hides in her safe zone, consisting of addictive substances and chess, which she believes to be entirely in her control. When she was nine, she won her first chess match and said, "It felt good. I've never won anything before." (Ep 1) It was the first time she had played outside the basement and received positive feedback through chess, shaping how she interacted with the outside world. In an interview after becoming famous, she said, "It's an entire world of just 64 squares. I feel safe… in it. I can control it. I can dominate it. And it's

predictable. So if I get hurt, I only have myself to blame." (Ep 3). As a result, she takes sedatives when she feels anxious before a competition or when she is having difficulties during a competition. Her first exposure to alcohol is when she feels unable to fit in at a party. Since then, these emotions have arisen whenever something beyond her control has led to substance abuse, such as the death of her adoptive mother, losing a race, or being alone.

Outside the world of chess, Beth is an outsider, and the use of space, light, and music expresses her isolation and emotional state. She has been unpopular at school and has no friends, which makes her even more dependent on substances. In Ep3, after Beth becomes famous, she is invited to a social party by the popular girls at school. Still, she is not able to fit in, so she excuses herself and leaves the table when the girls begin to sing along to the music playing on the television. She then finds alcohol in another room and steals a bottle, marking the beginning of her struggles with alcohol. Beth is always at the edge of the frame when the camera films the entire party. While the others gather in a relaxed sitting position, she sits straight, legs folded, hands clasped in front of her, looking tense and endeavouring to join the conversation. As she steals the wine and prepares to leave the house, this image is divided into two parts, half in brightness and half in darkness (Figure 4.16). Inside the large window, the girls dance in the warm, yellow light, while Beth, alone in the darkness, looks towards them through the small door. The two spaces are far apart, with darkness in between, revealing two completely different worlds where Beth struggles to fit in.

Figure 4.16 Half in brightness and half in darkness (Ep 3)

The joyous atmosphere created by the music is at odds with her demeanour, adding dramatic tension and highlighting her loneliness. The TV at the party is playing a romantic and cheerful song called *"You're the One" (1965)*, a popular song played by The Vogues in 1965. The other girls are dancing to this song, but Beth is unable to understand and is stiff, despite her carefully chosen outfit showing her appreciation for the gathering. At first, the music is presented as diegetic, meaning it is part of the story world and is heard by the characters within the scene, emphasising the contrast between the lively party and Beth's isolation. When Beth escaped quietly from the party, the music became non-diegetic, not being a part of the story world but only heard by the audience. This shift in the use of music reflects Beth's downward spiral into alcoholism and social isolation. In this episode, the soundtrack accompanies Beth's first drink, which is the beginning of her alcoholism. In the following episodes, music and music television images are again used to show her terrible mental state and final breakdown.

Social isolation is also, in reverse, exacerbated by substance abuse: when she has the final breakdown of the entire series, she once again falls into social isolation. In Ep6, after her second defeat by the same opponent, she declines her friend's invitation and decides to go home alone. Her adoptive mother had already passed away from alcoholism, and her long-absent adoptive father

wanted to evict her from the house, which she bought with her savings at an above-market price and continued to live there alone. She goes alone to the restaurant where she and her adoptive mother used to eat, which triggers self-destruction. She gradually disconnects from the outside world and becomes completely addicted to substances. She stays at home most of the time, and after buying the house, she removes almost all the decorations and objects of her adoptive parents, such as paintings, books, etc. This space now represents only her own. This space now represents only her own life, which is empty, with only basic household items, many chess tournament trophies on her adoptive mother's piano, showing the emptiness of her personal world (Figure 4.17). The space is still divided into two parts: the living room on the left, featuring a sofa and television, and a table with a chessboard and wine. The piano by the window is filled with trophies, where her adoptive mother used to sit and play. To the right is the entrance to the house.

Figure 4.17 This space now represents only her own. (Ep 6)

As she begins to indulge in drugs and alcohol, Beth is shown dancing to the song *Shocking Blue* by Venus, which expresses her emotional state. Initially, the music is presented as diegetic, but it becomes non-diegetic when Beth presses the TV button to increase the volume. This shift emphasises the contrast between the upbeat music and Beth's troubled state of mind. It reflects Beth's downward spiral into alcoholism and self-destruction, which is depicted in a two-minute

montage sequence (Kooijman, 2021). Unlike the last party, this time she is on her own, dishevelled, travelling through the whole space, dancing exaggeratedly. The camera starts to become shaky and cannot capture her very well, in keeping with the instability of her behaviour and mental state. When she stops and collapses on the sofa, the camera slowly rotates in tandem with her gaze until the entire scene becomes tilted. Eventually, she becomes unconscious and collapses on the floor. The psychedelic song expresses Beth's state of mind, prompted by memories of her traumatic childhood (Kooijman, 2021). Whereas the illusion of chess is conscious and controlled, this vertigo is unconscious and entirely out of control, showing that Beth has already lost control of her addiction and of herself.

Drastic style changes would be a warning sign of her declining mental health. During the bender, she hangs up on a friend's phone call, vomits in her own trophy, and is in her drunken stupor without hearing her ex-boyfriend's visit until she is awakened by a persistent phone call and reminded of the chess tournament the next day. When she appeared on the field, she is unable to cope appropriately with the outside world. In this scene, everything about her is portrayed as dark, gloomy, unhappy, and detached from the moment, place, and others with whom she interacts. Figueiredo & Diogo's (2021) study mentions that this look is far from her personal style, which shows how far Beth has gone in indulging in self-destructive behaviour. She is dressed in a dark coat, pants, and sunglasses, which she removes to reveal an exaggerated makeup look that is different from her usual style (Figure 4.18). Not only did she “erase” her lips by applying a pale, bright eye concealer, but she also applied an irregular eyeliner shape (Figueiredo & Diogo, 2021). These changes also suggest that she is in a different mental state than usual at the moment, being dark and depressed and that she is trying to hide her terrible state. As explained by makeup artist Daniel Parker, both the outfit and make-up are directly inspired by the music video to *I’m Your Venus* by the band Shocking Blue, which Beth was dancing to while on a bender the day before her appearance at this tournament. This look is a direct recreation of the lead singer’s outfit (Figueiredo & Diogo, 2021), which reflects the fact that although Beth actively isolates herself from the outside world, deep down she still wants to fit in.

Figure 4.18 An exaggerated makeup look that is different from her usual style (Ep 6)

Beth struggles to form attachments with people outside of the chess world, and she has a difficult time maintaining romantic relationships and often pushes people away, demonstrating attachment avoidance. Experiences with early caregivers shape how we approach intimate relationships as adults, a phenomenon known as adult attachment (Bowlby, 1969/1982, cited in Zelenko & Benham, 2002). According to Brennan et al. (1998), insecure adult attachment can be understood along two dimensions, both of which arise from uncertainty about the caregiver's availability and emotional responsiveness. The first is attachment anxiety, which involves hypervigilance and preoccupation with the relationship. The second is attachment avoidance, which involves suppressing emotional needs and distancing oneself from intimacy. Attachment avoidance is a dysfunctional attachment system that emphasises self-reliance, self-efficacy, personal power, etc. and adopts various defensive strategies to deny the need for intimacy (Shaver & Mikulincer, 2007), for example, suppressing feelings of vulnerability, diverting attention away from intimate issues (Edelstein & Gillath, 2008), and suppressing relationship-related thoughts and memories (Fraley et al., 1998). In the following scenes in Ep 6, compared to other characters' friendly behaviours, Beth is taciturn, aloof, and growing increasingly uncomfortable by the minute. The camera's instability reinforces Beth's discomfort. She refused to be photographed by reporters, and when a girl, who had been her first opponent, offered her thanks and respect, she responded

awkwardly, silently, and unfriendly. When her ex-boyfriend (a former chess player who was also the first to discover her addiction problem and had been trying to help her) came to her out of concern and wanted to help her, she aggressively mocked his ability and work. When she returns home again, she pulls up all the curtains, wraps herself in a blanket and falls into complete isolation and avoidance.

Childhood, trauma, relationships

The formation of Beth's attachment avoidance involved an unstable childhood and her mother's suicide. Alice (Beth's mother) created a car accident to kill herself and Beth by driving down the highway and crashing into an oncoming truck, but Beth survived the crash and went to live at the orphanage. Beth's last memory is that Alice looks in the rearview mirror at her in the back seat and says with tears, "Close your eyes." As mentioned earlier in *The End of the F**king World,* the death of a primary caregiver as a result of a traumatic event is the most challenging trauma for young children to resolve (Zelenko& Benham, 2002). However, after the accident, child Beth never showed any emotion, just kept her face expressionless and always avoided talking about the experiences and memories, even when comforted or questioned. In Episode 1, in the orphanage, when Beth meets a girl named Jolene who asks her, "Your mama and daddy dead?", Beth nods. "What's the last thing they said to you before they died?" Jolene keeps asking and then explains, "I ask everybody that. "We get some really fun answers." There is a flashback of Beth's memory, showing her mother's tearful eyes in the rearview mirror, and her mother saying, "Close your eyes." (Figure 4.19) But Beth answered without looking at Jolene: "I don't remember." "Someday, you might. If you do, you let me know." Jolene responds jokingly and becomes Beth's only friend in the orphanage, but Beth never talks about it to Jolene until she is adopted and left.

Figure 4.19 Beth's last memory of Alice (Beth's mother) (Ep 1)

Beth's addiction to substance abuse and chess is closely linked to her insecure attachment and trauma. Insecure attachment increases someone's vulnerability to addiction, especially in combination with traumatisation (Potter-Efron, 2006), as addiction can function as an emotional relationship, through which addicts try to meet their needs for intimacy (Nakken, 1996, p. 8, cited in Potter-Efron, 2006). Everyone realised that when Beth was in a bad emotional condition, if she was alone, she would start drinking. In Ep 6, after she loses the competition, her chessmate calls to invite her to come and stay with him, saying, "You shouldn't be by yourself. You know what happens", but Beth refuses, goes home to drink, and eventually falls into a breakdown. Although the initial function of additive substances is as an alternative means to self-regulate, as the addiction progresses, it is proven to be a false sense of self-regulation that deepens the dysregulation within the attachment system (Padykula & Conklin, 2010).

Beth's journey from breakdown to recovery can be understood through what Gorton (2021) describes as a gendered construction of resilience in television drama. Drawing on Hagelin's (2013, as cited in Gorton, 2021) concept of 'resistant vulnerability,' Gorton argues that female characters in series such as *The Handmaid's Tale* demonstrate resilience through their willingness to accept

and confront the forces that have damaged them. Beth follows a similar pattern. Her resilience becomes visible after she stops avoiding her trauma and allows herself to be emotionally vulnerable with others. As Gorton (2021) points out, there is a tension in such narratives: while it's empowering to watch a woman overcome her difficulties, there is also a risk in placing the responsibility for overcoming systemic failures entirely on her as an individual. In Beth's story, the orphanage that gave her sedatives as a child and the institutions that failed to protect her are never held accountable. Instead, her recovery is presented as the result of personal courage and her friends' support.

As a result, healthy relational support became a key factor in overcoming her substance abuse. Cheema & Wilkinson (2022) believe that she overcame her addiction because she addressed the three emotional factors of shame, anxiety and isolation. The reason for addressing these was that she gained supportive relationships to cope with these emotions instead of drugs and chess. Firstly, during Beth's breakdown, Jolene (her friend from the orphanage) came to stay with her at home and offered money to support her chess race. For the first time, Beth admits her emotional and addiction issues to Jolene, even telling her childhood story, including her mother's death. This is the beginning of her facing her problems rather than avoiding them. Then, Beth returns to the orphanage for Mr. Shaibel's funeral (the orphanage janitor who taught Beth how to play chess) and sees that his room is full of newspaper clippings about her, despite never seeing him again. Beth bursts into tears, which is her first regular expression of intense emotion. She realised he had been steadily concerned and supporting her since childhood. After these experiences, in the final competition, Beth learns to trust and rely on her peers who come together to help her, rather than pushing them away. This keeps her sober under pressure and without taking any alcohol or sedatives.

Instead of substance abuse, supportive relationships become Beth's support system, so that she regains control of herself and chess. In the final match, Beth took on world champion Bogov, who had already beaten her twice, and this time, without alcohol or sedatives, her hallucinations reappeared and helped her win. The use of lighting and camera angles reinforces its themes of power and control. When depicting the players battling, the audience and the scene are set

against a dark background, with only the two players and the board in intense lighting, which highlights their power and control over the game. As the game progresses, the camera moves closer to the pieces, and these close-ups alternate with the reactions of both players, showing their ongoing psychological battle about chess (Figueiredo & Diogo, 2021). Then Beth encountered difficulties when Bogov made an unexpected move. In the past, when in difficulty, Beth would have shown agitation, aggression and resorted to sedatives. This time, however, the hallucinatory chessboard reappears, without the sedative. The camera moves slowly to the ceiling as Beth's gaze reveals them, showing the power relations between Beth and the hallucination. As in the first episode, the classical music, which once again becomes rousing, creates an exciting atmosphere. At this point, everyone in the scene looks to the ceiling with their gaze, including her opponents, even though they will not see the same sight. This emphasizes that this is a demonstration of Beth's inner state, where everything is happening in Beth's mind at the moment: the rapid movement of the pieces represents Beth's thinking and deduction, the stirring emotion embodied by the music is Beth's positive, active spirit at the moment, and the close-ups show her expression and eyes, which are calm and determined. The camera then switches between close-ups of Beth's face and the movement of the chessboard on the ceiling (Figure 4.20), gradually zooming in with each switch, which provides a more focused and intense display of Beth's mental state. As the camera closes in on a close-up of Beth's eyes, it emphasises her calmness and determination, which differ from the aggression and agitation she has shown in the past when encountering difficulties in the game (Figure 4.21). She then withdraws her eyes, makes a considered move, and eventually wins, becoming the world champion. The hallucination here can be a sign that she has become healthy, as even though she no longer relies on sedatives, she still can control her extraordinary mind to win.

Figure 4.20 The camera then switches between close-ups of Beth's face and the movement of the chessboard on the ceiling. (Ep 7)

Figure 4.21 Beth's eyes emphasise her calmness and determination. (Ep 7)

Beth overcomes her addiction without losing her talent, which is also a positive paradigm shift about "madness and genius." According to Beirne (2019), there is

a "superpowered supercrip narrative" in television drama, which refers to characters in fictional works (novels, films, television series) whose abilities and powers are directly related to or contrasted with their disabilities. They are not entirely lucky in that they must pay for all their gifts and skills with inevitable personal suffering. It appears in the episode *Monk*, which received a great deal of attention for its positive portrayal of characters with mental health challenges, as well as in many similar episodes over a relatively short period (2010-2017), for example, Sherlock in *Sherlock*, Carrie in *Homeland*, Daniel in *Perception*, and Will in *Hannibal*. Through narrative elements and characterisation, these episodes generally set up a dichotomy between enhancing extraordinary abilities and alleviating mental health challenges. These protagonists all use their skills to accomplish valuable work, but when they take medication to manage their mental disorders, both their usual symptoms and abilities are diminished. High-level professional performance is inextricably linked to symptoms of mental health challenges, which brings about a kind of frame, that is, the characters have to confront a choice that they cannot keep their health and talents at the same time, which has a negative personal impact. *The Queen's Gambit* is also a narrative about genius and the price behind it, but it changes the dichotomy about choice. In this drama, Beth's gifts are not the result of the symptoms of her mental health challenges; instead, the mental health challenges are gradually presented as separate issues to be addressed as the story develops. And as it turned out, once she had confronted her trauma and addressed her substance abuse to become a healthier individual, she did not lose her talents but rather achieved the ultimate victory. The framework of mental health challenges as a necessary condition for maintaining talent was broken, which is a positive shift.

Discussion and Conclusion

In summary, these characters with mental health challenges are dramatised as both villains and heroes, presenting universal experiences and feelings related to real life through psychological theory, and utilising television technology to convey specific messages about mental health challenges. Some common patterns and themes in these two dramas are identified while being enhanced by television representation. Although these two dramas deal with different mental disorders and different characterisations, they both follow a common

psychological logic about attachment and trauma, showing the detailed construction of the causes, symptoms, diagnosis, and healing process of the characters' mental issues. Screen technology enables the presentation of the above psychological constructs to the viewer more visually and subtly.

These TV dramas engage viewers through characters' subjective experiences, utilising close-ups, performance techniques, sound design, and sustained character development over multiple hours of screen time and narrative immersion. Some studies identify film techniques that illustrate how a character with mental health challenges is presented differently from other characters, such as the individual point of view, close-up shots, discordant music, atmospheric lighting, setting selection, and scene juxtapositions (Pirkis et al., 2006). Some UK television programmes also use the combination of close-ups and extreme close-ups to isolate characters with mental health challenges socially, displaying their differences (Rose, 1998). For James, inner monologue, set design, camera direction, acting style and more are used to display his differences, and for Beth, there are illusory aesthetics, close-ups, sound design, lighting and camera angle. Furthermore, Rohr (2015) observes that recent American films featuring autistic protagonists have moved away from disorienting editing techniques towards a more restrained aesthetic style, characterised by narrative coherence and sustained attention to the protagonists' subjective experience. Although the selected series in this study do not directly depict autism, they employ similar formal approaches, adopting sustained subjective perspectives and measured visual storytelling to present James and Beth's psychological constructions and inner worlds.

The leading causes and symptoms of characters' mental health challenges tend to be described in these dramas as involving trauma, attachment, and genetics. Significantly, their main traumatic event is witnessing their mother's suicide during childhood, and in Beth's case, it was even worse, as her mother wished for them to die together. Traumatic experiences can alter a person's self-perception, thereby undermining the mutuality between the internal world and external reality (Sar & Ozturk, 2006). According to the APA Dictionary of Psychology (n.d.), people who have been exposed to a highly traumatic event, such as witnessing a death, having one’s life threatened, or enduring serious

injury, may develop a set of symptoms known as posttraumatic stress disorder (PTSD):

A reexperience of the event through nightmares, flashbacks, and so forth.

Active and passive avoidance of the event. Active avoidance occurs when sufferers avoid situations, places, and people who remind them of the trauma. Passive avoidance, or numbing of responsiveness, is the body's way of avoiding the event through feelings of detachment or estrangement from the external world.

Generalised hyperarousal, or increased arousal. Sufferers may experience difficulty falling asleep or staying asleep, outbursts of anger, and exaggerated startle responses.

Both characters here are more or less described with some symptoms in the stories, forming different forms of mental disorder - violence and addiction. Combined with attachment theory, when such traumatic events come from the mother and occur in childhood, it increases the severity of the consequences. Also, their father, another primary carer, has not been able to provide attachment support, and again, Beth's situation is worse, as she has never seen her father. There is also a common indication that their mothers showed a tendency towards mental health challenges, respectively, which also suggests a possible heritability of mental disorders.

In both dramas, the depiction of the characters involves a process of self-examination and transformation, which can also be viewed as a narrative about personal growth. James initially thought he was a psychopath until he proved otherwise. Similarly, Beth and others had concerns about her gift being linked to the mental problem until she overcame it. This demonstrates the inaccuracy of non-professional diagnoses from oneself or others, and the possibility that mental health challenges could be alleviated or cured, which is a relatively accurate and positive presentation. A certain level of emotional competence is required to seek mental health help (Ciarrochi et al., 2003), and James and Beth do not have such an ability. A general tendency is that when young people are unable to identify and describe emotions or manage them effectively and non-

defensively, this impedes help-seeking (Ciarrochi et al., 2003). There is a high prevalence of mental health challenges in adolescence and early adulthood, but young people tend not to seek professional help (Rickwood et al., 2007). However, on the other hand, such descriptions also tend to create an overly optimistic impression because, in reality, violence, anti-social tendencies, substance abuse, and alcohol addiction are problems that will not be changed that easily.

For viewers, in reality, although mental health conditions may not be a typical situation, trauma, attachment, personal growth, etc., are all universal issues that could be experienced in life. As mentioned earlier in Chapter 2, personal experiences of mental health challenges regarding self or family may significantly influence people's reactions to media images of mental health challenges (Klin& Lemish, 2008). Eyal and Rubin's (2003) research examined viewers' engagement with aggressive television characters and found that perceived similarity to the characters significantly predicted identification with them. Also, it is common to experience trauma, causing feelings of insecurity that most people might experience a traumatic event in their lifetime， such as a traffic accident or an assault. Out of the nearly 90% of adults in the United States who experience a traumatic event, only about 10% cannot recover naturally from the trauma and exhibit high levels of stress even when they are not in a dangerous situation (Kilpatrick et al., 2013). It is normal to have strong reactions afterwards, such as flashbacks and nightmares, most of which could subside with time. Possible similarities or homogeneities tend to influence how people understand and respond to media characters with mental health conditions, and homophily could be objective or subjective (Eyal & Rubin, 2003).

Therefore, the following chapters will shift focus from textual content to audience reception, based on the understanding gained in this chapter regarding the portrayal of characters with mental health challenges in Anglophone television series. In the following chapters, I will first examine how Chinese audiences interpret the portrayal of these characters in Western television series, followed by an in-depth analysis of how audiences engage with these characters across various dimensions. The portrayal of mental health challenges in Anglophone TV series can differ from Chinese cultural norms. Therefore, in

the next chapter, I will explore how Chinese audiences interpret and decode these portrayals, based on encoding/decoding theory and cultural dimension theory, to illustrate that these characters may be reinterpreted when crossing cultural boundaries.

Chapter 5 How Do Chinese Audiences Understand and Interpret Characters with Mental Health Challenges in Anglophone TV Dramas?

Introduction

Building on the previous chapter that examines how characters with mental health challenges are portrayed in recent popular Anglophone TV series, I explore how Chinese viewers make meaning of representations of these characters in this chapter. Chapter 4 illustrates that these characters are dramatised as villains and heroes while presenting universal experiences and feelings related to real life through psychological theory, using televisual technology to convey specific messages about mental health challenges. Some common patterns and themes are identified and enhanced by television representation. Although dealing with different mental disorders and characterisations, they both follow a common psychological logic about attachment and trauma, showing the detailed construction of the causes, symptoms, diagnosis, and healing process of the characters' mental issues. TV series technology enables these psychological constructs to be presented to viewers more visually and subtly. This leads to the research question of how these characters are received and understood by Chinese viewers. Thus, this chapter explores how Chinese audiences define and interpret characters with mental health challenges in Anglophone TV series, using Stuart Hall's encoding/decoding theory and Hofstede's Cultural Dimensions as frameworks. In this chapter, I establish the connection between text analysis and audience interpretation, laying the foundation for the analysis of Chinese audiences' gratification and emotional engagement with such characters in the following chapters, providing a cross-cultural approach to sensitive topics in television studies. This chapter is divided into three main sections: Chinese audiences' recognition of these characters, their interpretation process through different types of readings, and other factors influencing the audiences' understanding.

Firstly, cultural dimension theory is used to understand how Chinese audiences might understand and interpret characters with mental health challenges in

Anglophone TV series from different cultural contexts. Cultural dimension theory was proposed in 1980, which states that different cultures vary in six main dimensions: power distance, individualism-collectivism, masculinity-femininity, uncertainty avoidance, long-term orientation, and indulgence-restraint (Hofstede, 2011). These dimensions can explain differences in cultural values, norms of behaviour and social interactions across the global audience, revealing how these cultural differences affect audience reception and understanding. In this study, I mainly focus on individualism and uncertainty avoidance because they are the most commonly used cultural dimensions in information systems (Fischer et al., 2021). Individualism is considered the most important cultural dimension for explaining different human behaviours (Fischer et al., 2021). Notably, while Hofstede's dimensions provide a valuable model for discussing Chinese audience tendencies, it is important to avoid overgeneralizing. China's population is internally diverse, and not every individual will fit the national cultural profile. Although insightful, the Hofstede model has clear limitations because it is abstract and ignores the variability within individuals; it oversimplifies reality by assuming that culture is static (Gerlach & Eriksson, 2021). In practical analysis, it is important to recognise such intercultural differences. Chinese audiences are dynamic and complex, so Hofstede's cultural framework is only used as a starting point to understand the impact it may have on interpretation, rather than as a decisive factor. Therefore, when using cultural dimensions for analysis, I will try to avoid the risk of over-generalisation and view Chinese audiences as individuals with their own agency and differences.

Then, Stuart Hall's encoding/decoding framework provided an important theoretical basis for analysing cross-cultural audience reception. In Hall's framework , encoding refers to the process by which media producers construct meaningful messages through specific codes, narratives and ideological frameworks, while decoding is the process by which the audience use their own cultural background and knowledge to understand the message. In terms of film reception behaviour, the cultural values of Chinese audiences may reflect a tendency towards collectivism and the pursuit of social harmony, which are reflected in a preference for narratives that emphasise teamwork and family bonds while resonating less with themes of individual heroism (Yu et al., 2025).

In addition, a high level of uncertainty avoidance leads Chinese audiences to prefer films with clear storylines and defined endings while being less open to open-ended narratives. At the same time, with the development of the social economy, younger audiences have higher demands for aesthetic experience, paying more and more attention to visual aesthetics and narrative complexity (Yu et al., 2025). This diversity and evolution of cultural values would influence Chinese audiences' interpretation of characters with mental health challenges in Anglophone TV dramas, which will be explored using Stuart Hall's coding and decoding theory. It demonstrates that Chinese audiences are not fully accepting the mental health portrayals in Anglophone TV series. Rather, they actively construct meaning about such narratives, which is influenced by their cultural context. Each of Hall's three reading positions offers a lens through which to understand the possible interpretations of Chinese audiences. While Hall's encoding/decoding model provides a helpful framework, it also has limitations for this research. Some participants' responses align with dominant or oppositional positions, while some sit in between or move between positions over time. The three positions of "dominant," "negotiated," and "oppositional" do not fully capture the layered, shifting ways that participants talk about characters with mental health challenges, or their longer-term engagement with TV dramas. I therefore use Hall's model as a heuristic for thinking about audience positions, while remaining cautious about these more complicated and mixed forms of decoding.

What is more, Chinese viewers' interpretations are influenced not only by cultural dimensions but also by various factors, including other information sources, personal experiences and overseas culture exposure. Different audiences in different environments may decode the same information in different ways, not only because of their cultural backgrounds, but also because of differences in knowledge structure, social status, ideology, economic status, values, decoding contexts, ethical and religious stances, and many other aspects (Xie et al., 2022). This is even more noticeable in cross-cultural contexts. For example, Anglophone TV series are not the only form of entertainment and source of information for the respondents. Each of them also has a different level of personal exposure to mental health challenges. In addition, some of them live in countries with Western cultures, which also has an impact on their

perceptions and interpretation of such characters. Next, I will first explore how Chinese audiences define the mental health challenges of characters in Anglophone TV dramas. Then, I will discuss how Chinese viewers interpret the portrayal of mental health in Western TV dramas. Finally, I will explore other factors that influence Chinese viewers' understanding.

5.1 How Do Participants Define a Character with Mental Health Challenges?

As discussed in Chapter 2, mental health challenges can be understood through multiple frameworks, including biomedical, psychoanalytic and socio-cultural perspectives (Casey & Long, 2003). Therefore, audiences can define the mental health challenges of fictional characters from multiple perspectives. This section discusses how Chinese participants define and understand the mental problems of characters in Anglophone TV dramas. It starts with the four dimensions in which Chinese participants define characters' mental illness, followed by its subjectivity and complexity, including: diagnosis and symptoms, behaviours beyond social norms, genre and characterisation context, and others' opinions. Next, I will discuss the effects of Anglophone TV series as one of the meaning systems and then the different interpretations of Chinese participants.

Criteria for Defining Mental Health in Fictional Characters

Participants in this study use a multi-dimensional approach to determine whether a television character is experiencing mental health challenges. They consider a variety of criteria rather than a single factor. Survey and interview data show that audience definitions of characters include four overlapping dimensions: medicalised language and popularised ideas about diagnosis, behaviours that go against social norms, type-based characters, and third-party or social evaluations. These dimensions provide a perspective for audiences to observe characters on screen, which are also influenced by their perceptions of mental health challenges.

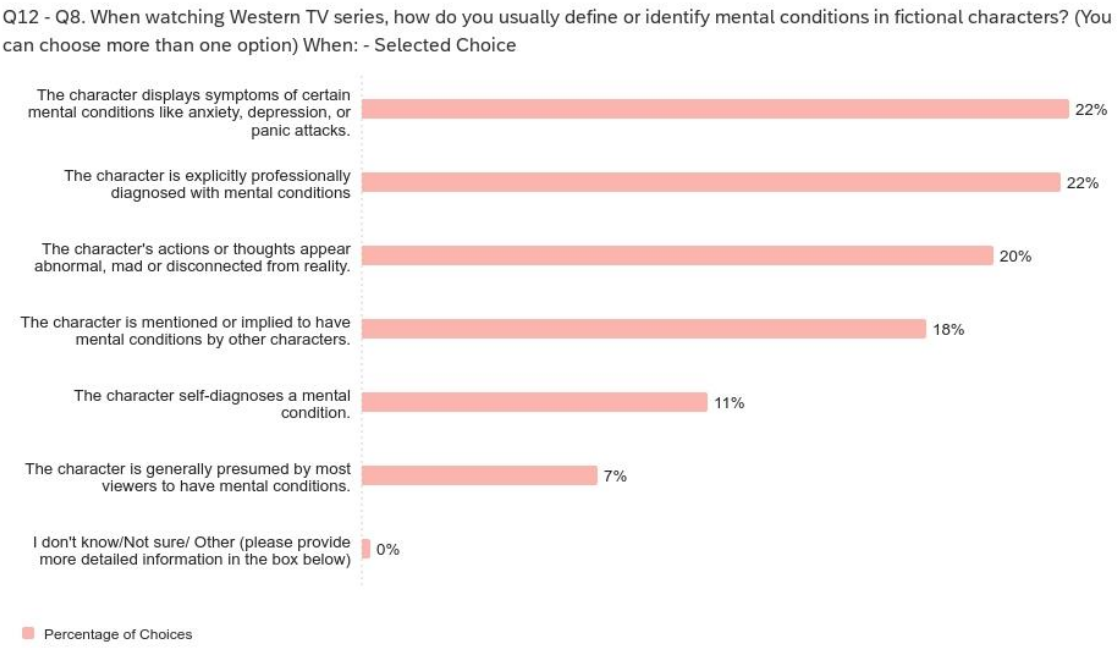

Figure 5.1 Definition of mental health challenges

Diagnosis and Symptoms:

The data suggest that viewers use a variety of cues to identify mental health challenges in fictional characters, with the two highest percentages associated with observable symptoms and explicit diagnosis, indicating a reliance on clear and definable criteria for identifying characters' mental conditions. From Figure 5.1, 22.40% of respondents identify a character with mental conditions if the character displays symptoms of certain mental conditions, and 21.86% believe the explicit professional diagnosis of mental conditions in the narrative.

This does not mean that participants are clinical experts, but that some draw on relatively high mental health literacy when interpreting the character. Some respondents are familiar with medicalised language and popularised ideas about diagnosis (such as panic attacks, hallucinations, and obsessive behaviour) or diagnoses in the narrative. They are increasingly exposed to mental health terms such as post-traumatic stress disorder, bipolar disorder, or obsessive-compulsive disorder. For example, data from the questionnaire suggests that the most frequently recognised mental health challenges in Anglophone TV series, according to respondents, are Antisocial Personality and Substance Addiction, each cited by 16% of respondents, followed by Depression (15%), PTSD (14%), Schizophrenia (12%) and bipolar disorder (11%) indicating a significant presence of

these conditions in TV character portrayals. Autism and OCD are noted by a somewhat smaller percentage of viewers, 8% and 7% respectively. These mental health challenges may overlap and appear together in the same character or drama. This recognition means that they are already attuned to visual, behavioural, or narrative cues that signal these conditions, allowing the drama to progress without overt clarification. This may influence how character development unfolds, making it less reliant on formal diagnosis and more on the embodied experience of mental health, which can deepen the emotional and narrative complexity of these portrayals.

In addition, several interviewees in this study described the symptoms of PTSD and demonstrated relevant knowledge. For example, a respondent specifically mentioned that post-war PTSD is often depicted in Anglophone TV dramas:

> "Many characters display post-war trauma, with the shows often featuring flashbacks to war scenes. In the British series The *Bodyguard*, the male lead suffers from post-traumatic stress disorder after serving in the armed forces. overseas and is unable to continue living with his wife and he commits violent acts against his lover in his sleep, strangling her neck. The series portrays the male protagonist in a state of stress during these moments, and he apologizes to his lover when he sobers up. "(Respondent)

As mentioned in the text analysis in Chapter 4, many Anglophone TV dramas describe in detail the connection between the traumatic experiences of characters and their mental health challenges, showing a range of related symptoms. It is common for PTSD survivors to experience disturbing thoughts, flashbacks, anger, fear or detachment from loved ones and society (Mueller, 2022). Biological changes in the brain trigger PTSD, associated with memory processing (Mueller, 2022).

Behaviours Beyond Social Norms

A more subjective criterion is whether a character's behaviour is considered ‘abnormal’ according to social norms. About 19.7% of respondents said they define mental health challenges in a character when the character’s actions or thoughts appear abnormal, mad, or disconnected from reality. In other words,

whether or not it is diagnosed, a character is perceived by the audience as having a potential mental health challenge when they consistently show behaviours that go beyond normal social behaviour. These behaviours may include extreme violence, irrational compulsions, unstable mood swings, or detachment from reality.

This view reflects a cultural tendency to distinguish between the ‘normal’ and the ‘abnormal’ based on social consensus. Behaviour considered abnormal by society often overlaps with mental health challenges. Although the concept of mental health challenges is changing, it has some continuities, one of which is that people with mental health challenges, or "the mad", are often regarded as "different" (Rohr, 2015). As Link & Phelan's (2001) stigma framework suggests, the boundary between "normal" and "abnormal" is socially constructed and sustained through labelling and stereotyping. For instance, an interviewee mentioned the behaviours beyond the norms of society when defining the characters' mental problems:

> "Typically, such characters will do things that don't quite fit with social norms. For instance, if it's obvious, like if someone with mental issues might have violent tendencies, they might actively harm others, and they might also engage in what is considered criminal behaviour in society." (Interviewee 3)

Meanwhile, to another interviewee, a nihilistic state and philosophical struggle were evidence of the characters' mental health challenges:

> "I don't think TV dramas will explicitly state that he's been diagnosed with any mental illness. I think they all face some sort of mental struggle... For example, there is a show I really like called 'True Detective', and in the first season, the protagonist, he’s obvious... he spends his whole day pondering philosophical questions and he has a traumatic past...I sort of forget the plot details, and then he becomes very nihilistic."(Interviewee 4)

This shows the highly subjective nature of such norm-based definitions, which means that they rely on the viewer's perception of what behaviours are acceptable or logical. For this respondent, nihilism is disconnected from reality, thus an abnormal behaviour, and therefore can be defined as a mental health challenge. Therefore, even if no formal diagnosis is given in the TV series, audiences may identify characters' mental health challenges through their own

perception. This provides the basis for the following detailed discussion in the next section of how participants decode characters with mental health challenges in Anglophone dramas in different ways.

Genre and Characterisation Context

Chinese viewers also consider the genre conventions and narrative context of a series when defining a character's mental state. As we can see in Figure 5.1, 17.76% say that a character mentioned or implied to have mental conditions by other characters would count as mentally ill. 10.66 % felt that this could be determined by the character's self-diagnosis. However, the criteria for recognising character behaviour as a mental health challenge may vary by genre in different TV dramas. For example, in thrillers or crime dramas, the protagonist's delusions or the villain's abnormal behaviour may be amplified as part of the plot. Viewers may see this as evidence that the character has mental health challenges in that genre of TV drama. In contrast, in black comedies or teen dramas, participants may read weird or moody behaviour as a style rather than a mental health challenge. This suggests that viewers adjust their criteria for recognising mental health challenges based on genre norms and narrative tone.

participants tend to show an awareness of these context cues. As an interviewee mentioned, in series with a "darker tone", there are often clear indicators of conditions like depression, while in comedies, it's "harder to determine" if a character has mental health challenges or just a comic personality:

> "In series with a darker tone, I feel there's always a clear indication when a character has depression, such as self-harming behaviours or other displays. In comedies, it's harder to determine whether a character is simply unintelligent or actually has a mental illness; it's tough to differentiate between a low IQ and mental illness or character flaws..." (Interviewee 5)

What is more, viewers may adjust their definitions according to different TV drama genres. long-form TV series now frequently portray mental health challenges as complex, long-term character traits rather than one-off plot devices (McMahon-Coleman, 2021), which means a character's mental health challenges can change over a series, influencing their development. Some

viewers notice these changes and adjust their own definitions of the characters' mental health challenges. For example, as mentioned in Chapter 4, in the British coming-of-age drama *The End of the F**ing World*, a teenage character named James self-diagnoses as a psychopath. However, as the plot develops, James's traumatic family background and emotional growth are gradually revealed. This suggests how viewers actively engage in a dynamic interpretive process, adjusting their views as characterisation deepens over time. An interviewee realised that his “antisocial” label was a narrative device and that he was not truly a psychopath:

> "It seems like sometimes ‘antisocial’ is just a label given to him, just a label of mental disorders, but in the end, it turns out he's not antisocial, and then it definitely reveals some underlying reasons, like family issues or something. That kind of feeling. ...I think it's hard to define mental illness in teenage dramas, like 'Wednesday', you might think she's not quite normal, but she might just be embodying a style typical of teen dramas, that cool vibe." (Interviewee 3)

As Interviewee 3 explained, characters like Wednesday Adams in gothic teen dramas do not actually have mental health challenges, despite exhibiting unique personalities and unusual behaviours. This suggests that some viewers are familiar with the genre of television dramas and can distinguish between realistic portrayals of mental health and stylised character traits. Gothic teen dramas often exaggerate darkness, morbidity, and outsider identity as aesthetic and thematic devices. These traits align with genre conventions rather than diagnostic labels. So, depending on the TV show's genre and the character's traits, viewers can define whether a character's unique behaviour is a sign of a mental health challenge or simply a narrative trope.

Others’ Opinions

Social discourse and the opinions of peers, family members, or other viewers contribute to the definition process. These external opinions help validate or challenge the audience’s initial interpretation based on diagnostic and behavioural cues. Other viewers' opinions also play a role. However, it is the least influential factor, as only 7.38% of respondents (figure 5.1) would presume a character has mental issues because most other viewers do so. This could happen to viewers who are not familiar with mental issues, as interviewee 2

said: "...because I really didn't actively pay attention to the area of mental problems. After I met this kind of character, I, for example, read some analyses, and then I came to know they may have certain personality tendencies or something similar." These external views may come from other information sources such as social media, video websites, or personal experiences related to mental health challenges, which will be discussed in detail in section 5.3.

Overall, these four criteria often overlap in practice, as participants tend to combine different perspectives. For example, they may notice the character's strange behaviour (beyond social norms), also refer to diagnostic terms that fit these behaviours (mental health knowledge) and may also consider what others say about the character. This suggests that defining the mental health of fictional characters is a complex process that involves interpreting narrative through multiple perspectives: scientific definitions, cultural notions of normality, story context, and social feedback. Importantly, this process is not the same for every viewer, leading to different perceptions of the same character or TV series.

Subjectivity and Complexity

Based on the above discussion, participants' definitions of a character's mental health challenges are of high subjectivity and complexity. Individual experiences and personal perceptions mean that different viewers may have different definitions even when watching the same TV series. This section explores that the process of defining the mental health challenge of characters is complex and subjective, with personal interpretations often overlapping or conflicting with onscreen portrayals. This inherent complexity forms the foundation for the following discussion on how these definitions are interpreted through the encoding/decoding process. According to John Tulloch (2000), from a poststructuralist perspective, subjectivity is the product of the many meaning systems or discourses that are circulating around us, thus constructing our 'society', so a viewer will adopt many sites of subjectivity, sometimes contradictory, and some of these are more socially 'legitimate' than others. That is, an individual's viewpoints are shaped by the multitude of discourses and meaning systems that surround them. As the audience defines the character's

mental problems, they subjectively and unconsciously choose different discourses and meanings to have their own interpretation, which could be contradictory to each other.

For example, the BBC series *Sherlock* (2010-2017), starring Benedict Cumberbatch and Martin Freeman, which is popular among Chinese audiences, illustrates the subjective nature of these definitions. When asked about the characters with mental health challenges in these TV dramas, different respondents mentioned different characters and expressed contrasting viewpoints. In audience analysis chapters, I draw on a range of series that participants mentioned themselves. In this section, however, I focus briefly on *Sherlock* as an example because it was one of the most frequently cited series in both the questionnaire and interviews. Participants referred to several different characters from *Sherlock* as examples of mental health challenges, which makes it an interesting case for illustrating how viewers apply mental health ideas to different fictional characters.

Firstly, some respondents consider Sherlock Holmes to have mental health challenges in the series, as he frequently describes himself as “not a psychopath” but rather a “high-functioning sociopath.” They refer to him as “mad” or mention that he “always acts oddly but manages to control his emotions.” It indicates that some audiences accept the show’s narrative cues: Sherlock’s unique behaviours, his self-proclaimed label, and his social detachment. These viewers appear to adopt the discourse presented in the series, aligning with the character’s own definition of his mental state. From Tulloch's (2000) perspective, this suggests that the audience are choosing the socially “legitimate” discourse provided by the series, thereby reinforcing Sherlock’s portrayal as someone with mental health challenges. This narrative framing also serves the dramatic requirements of the series: Sherlock's madness becomes a distinctive feature that enhances his genius, creates tension in his relationships, and drives the plot forward. The character’s deviance is not only accepted but functionally embedded in the drama’s core appeal.

In contrast, other respondents argued that it is Dr John Watson, not Sherlock, who shows more genuine signs of mental health challenges. One interviewee mentioned that Watson displays symptoms consistent with Post-Traumatic Stress

Disorder (PTSD), referencing his military background, insomnia, and apparent suicidal tendencies:

> “In Sherlock, Watson has PTSD. It's particularly emphasised at the beginning, showing that he has come back from the battlefields of Afghanistan or Iraq, and then he can't sleep at night, and he has suicidal tendencies. Sherlock defines himself as a 'high-functioning sociopath,' but that's not a medical diagnosis. I don't think he is one. Sometimes, it's very difficult to distinguish between artistic creation and real illness. It's especially hard to say." (Interviewee 1)

Unlike Sherlock, Watson’s mental health challenges are grounded in realism and treated with greater seriousness. He is not framed as exceptional but as a relatable figure whose struggles stem from trauma. This interpretation challenges the series’s more obvious labelling of Sherlock and instead emphasises diagnostic labels over self-identity. These viewers draw on medicalised language and popularised ideas about mental health, rather than simply following the TV series’ portrayal. From a poststructuralist perspective, this suggests that the interviewee is choosing a different site of subjectivity, one that prioritises diagnostic language over the character’s own self-description.

Besides, another respondent identified Moriarty as a character having mental health challenges due to his criminal and destructive behaviours. This viewer tends to link mental health challenges to extreme behaviours beyond the social norm, which contrasts with the medicalised framing used for Watson and the self-proclaimed label Sherlock applies to himself:

> "Take, for example, the criminal genius Moriarty in *Sherlock*; people would think he might actively do something like steal, or he simply wants to cause destruction, similar to the Joker or the Riddler in Gotham, that's my understanding." (Interviewee 3)

In general, the *Sherlock* example demonstrates the complexity and subjectivity of viewers' definitions of mental health challenges for fictional characters, with different criteria sometimes being used to reach conflicting conclusions.

In summary, this section discussed that participants used a multi-dimensional approach to identify the mental health problems of characters in Anglophone TV series, including observable symptoms, clear diagnoses, abnormal behaviours, genre expectations and the opinions of others. These criteria may overlap with

each other, suggesting a subjective and complex interpretation by audiences. By defining characters' mental health challenges through these various lenses, participants are actively decoding characters in Western TV content through their own cultural and personal framework. The definitions process they have provided the basis for how they interpret and respond to the characters with mental health challenges in Anglophone TV series. In the next section, I apply Stuart Hall's encoding/decoding framework to examine how participants transform these definitions into dominant, negotiated, or oppositional readings to explore their overall understanding of Anglophone TV series characters.

5.2 Understanding Participants Interpretation through the Encoding/Decoding Model

Hall's research (1980) has been the theoretical background that supports audience reception studies, introducing the "encoding and decoding" theory, which is particularly applicable to audience reception studies in specific social and cultural contexts. Hall (1980) argues that media communication is not a linear transmission of meaning from sender to receiver but a process structured through encoding and decoding. Encoding involves the transformation of a message, meaning, intention, or viewpoint by the information disseminator into a symbolic code or format into content, whether verbal or non-verbal, that follows specific rules and is easy to understand. Decoding refers to the process by which the recipient interprets this code and/or reconstructs the conveyed ideology. Hall identifies three hypothetical decoding positions: the dominant position, in which the message is decoded with the same meaning as was intended when it was encoded; the negotiated position, in which the viewer accepts the dominant framework but adapts it to their own situated conditions; and the oppositional position, in which the audience member decodes the message in the opposite way as was intended by the producer. Based on the previous analysis of characters with mental health problems in Anglophone TV dramas, I analysed how participants interpret their portrayal by applying Hall's model, considering both the influence of characterisation and cultural context. While Western TV dramas encode mental health with specific themes and messages, some Chinese viewers may fully accept the series' portrayal, while others might partially accept it but interpret it through the lens of Chinese cultural norms. Additionally, some viewers may reject the portrayal altogether.

To avoid imposing a singular cultural narrative, I will remain sensitive to participant responses and aware of cultural stereotypes. To gain a more reliable understanding of how participants interpret characters with mental health challenges in Anglophone dramas, I will combine Hofstede's theory with Hall's cultural dimension to understand Chinese audiences' diversity.

Dominant Reading

Dominant reading means that some Chinese viewers accept the portrayal of mental health challenges in Anglophone TV series, which could be different from the way these issues are depicted in Chinese culture. Hall (1980) terms the first decoding position dominant-hegemonic, in which the viewer decodes the message within the same reference code in which it was encoded. In this position, the audience interprets the message largely as the producer intended, operating within the dominant code. In this research, this can be understood as the Chinese audience interpreting or understanding the information and meaning within the framework of the Anglophone TV series. From the previous section, it can be seen that Chinese audiences accept and are familiar with the common symptoms and diagnoses as depicted in Anglophone TV series. Besides, they accepted the importance of addressing mental health openly, whereas Chinese film and television tend to avoid such topics and characters, as they said:

> "I think this is also related to cultural differences. Many things in American TV shows are quite different from those in China. I think they are very frank about it, whereas in China, they seem to avoid issues related to mental health. Or if such issues are addressed, it is often from a condescending perspective, portraying it as something very negative. However, American TV shows don't seem to portray it as negatively. It's hard for Chinese media to create a character with mental health challenges who has a well-developed character arc." (Interviewee 4)

> "I feel that in Chinese culture, for instance, when you see someone with a mental health issue or a character with such an issue in stories or TV dramas, you tend to think that it's probably their own problem, or they haven't handled the way others treat them well. That is, they could choose to be more positive or optimistic, or it's considered a physiological disease. This is the general perspective. But I feel that in Western works, such characters tend to discuss their personal growth environment and the social background at that time, approaching mental health challenges from a more systematic framework,

> considering the causes of their mental illnesses. Yes, that's how I feel." (Interviewee 3)

In their general impression, the interviewees mentioned the openness with which Anglophone TV shows address mental health challenges, which they find Chinese dramas tend to avoid mental health topics or depict them negatively. They mention that well-developed characters with mental health challenges are difficult to be in Chinese dramas, who may rarely be main characters but are instead used to highlight the main character.

> "I think if a similar type (of TV series) were produced domestically, even if they were to put someone with mental health challenges in the spotlight, they certainly wouldn't make them the main character or present them with such an attitude. Yes, they would more likely be used as a contrast to highlight the main character. For example, a person with mental health challenges might be depicted as someone who has taken hostages, with the main character then rescuing them. Or it could be someone with physical disabilities, with the main character helping them, which again serves to highlight the main character. Honestly, there are no memorable examples of main characters with mental health challenges in Chinese productions. The examples I mentioned are more likely found in Chinese dramas and possibly movies too. I can't think of specific examples, but I feel like I must have seen such scenes somewhere before. This perception might be biased and there might be some that I haven't seen, but this is my general impression." (Interviewee 2)

Besides, Anglophone TV series could systematically discuss the personal growth and social background of characters with mental health challenges, while Chinese TV dramas may frame mental health challenges as individual problems or physiological diseases. Based on such differences, some viewers tended to accept the complicated and positive portrayal of characters with mental problems in some Anglophone TV dramas. For example, the characters' mental problems can be beneficial traits to them:

> "The protagonist, a male doctor in *The Good Doctor*, has autism. Although he has certain quirks in his life, such as obsessive-compulsive disorder, these meticulous and obsessive traits can be well utilized during surgery at work. "(Respondent)

> "Carrie, the female protagonist of *Homeland*, has bipolar disorder, which brings great inconvenience and harm to her life, but sometimes, because of this disorder, she can find out some information that other people overlook, and become an extremely

> good intelligence agent. Bipolar disorder is a double-edged sword for her." (Respondent)

They read the depiction of obsessive-compulsive disorder and bipolar disorder as both a challenge and a unique advantage, reflecting the complexity of mental health challenges, as represented in these dramas. Also, they both mentioned the characters' success in their professional life despite their mental health challenges. This will also have a positive impact on them, which will be discussed in the next chapter. This appears in many detective and professional TV dramas, such as *Sherlock Holmes*, *Monk*, *Homeland*, *The Good Doctor*, *Hannibal*, and *Black Box*.

The dominant reading analysis of viewers' interpretations of Anglophone TV series shows a general acceptance of the more open, comprehensive, and positive portrayals of mental health challenges, illustrating the cultural differences onscreen in addressing mental health and the influence of Anglophone TV dramas on Chinese audiences. The mass media can be an important source of mental health information for viewers and can give meaning to mental issues and respond to them (Issakainen, 2014). Thus, how the media construct, organise, present and interpret mental disorders influences public perceptions (Sieff, 2003). In particular, entertainment television can be more effective than news media in shaping viewers' attitudes towards mental health conditions because entertainment television programmes may be more emotionally resonant with viewers (Pirkis et al., 2006), which will be discussed in detail in Chapter 7.

Negotiated Reading

While Anglophone TV series may influence the understanding of mentally ill characters among some Chinese audiences, other viewers might partially accept the portrayal but adapt it to fit their experience or cultural context. Hall (1980) identifies the second decoding position as negotiated. In this position, the viewer acknowledges the legitimacy of the dominant framework at an abstract level but makes their own adaptations at a more situated, local level. As Hall puts it, the negotiated position operates with exceptions to the rule, accepting the broad hegemonic definitions while reserving the right to apply them

differently according to the viewer's own social conditions. In cross-cultural reception, this means that Chinese viewers may understand the intended meaning of a Anglophone television drama's portrayal of mental health challenges but adapt their interpretation through their own cultural frameworks and personal experiences.

For example, "The mad genius and gifted artist" is a recurrent theme in Western television, which often associates characters' special talents or powers with their mental health conditions (Beirne, 2019). There is a "superpowered narrative" of mad genius in fictional works (novels, films, television series), which means that characters' abilities and powers are directly related to or contrasted with their disabilities (Beirne, 2019). To be specific, these characters tend to accomplish valuable work using their skills or talents from their mental issues. For example, as the characters analysed in Chapter 4, Beth Harmon in *The Queen's Gambit* is a chess prodigy who practises chess using illusions created by drug addiction to become the greatest chess player in the world. Chinese viewers may accept the relationship between extraordinary abilities and mental issues but interpret it differently from the portrayal in Anglophone TV dramas.

While narratives might present mental issues as contributing to a character's unique abilities, some Chinese viewers see it the other way around. They believe that the characters' extraordinary abilities led to their mental issues and then caused the behaviours beyond the norm. An interviewee noticed the general connection between mental issues and super abilities in Anglophone TV series and gave an opposite explanation. She did not talk about specific characters but rather her understanding of this type of setting：

> "I think it's the opposite: his super abilities led to his mental issues. For instance, some people have extraordinary intelligence, and then the things they say or do are often not understood by most people around them. As a result, during his growth, he actually feels a tremendous sense of loneliness. For example, no one understands what you're saying, or you don't feel a sense of intellectual satisfaction when communicating with others. Therefore, he may want to do things that are beyond the ordinary, to seek the kind of thing he desires. So, I think to some extent, his abilities or his intelligence are actually the reason for his mental issues. I don't believe it's the other way around. That's what I think." (Interviewee 3)

While Anglophone TV dramas usually portray mental health problems as the cause of extraordinary abilities, she reversed this causal relationship, which reflects the negotiated readings that reconcile depictions in Anglophone TV dramas with the Chinese cultural context. That is, she argues that extraordinary ability may lead to mental health problems due to social misunderstanding and personal isolation, which may be shaped by the cultural norms of her context. It is generally agreed that Chinese culture is characterised by collectivism (Zhang & Han, 2023). Although Chinese culture has become more individualistic over the past 60 years (Ogihara & Bao, 2023), it may still influence Chinese audiences' perceptions of mental health challenges. As a result, some participants may prioritise community harmony and social acceptance over personal traits. Even though such traits are extraordinary, valuable, and contributing, participants may view them differently.

According to Hofstede (1991), individualistic societies are characterised by relatively loose interpersonal ties, with individuals primarily concerned with themselves and their immediate families. Individualism tends to emphasise self-consciousness, personal autonomy, emotional independence, personal initiative, privacy, financial stability, the pursuit of personal pleasure, selective friendship and universal principles (Zhang & Han, 2023). In contrast, collectivist societies tend to integrate individuals into tightly knit groups that provide lifelong protection in exchange for loyalty (Hofstede, 1993). Collective cultures, therefore, focus on a sense of collectiveness (‘us’), group identity, emotional dependence on the group, solidarity, sharing, adherence to duties and obligations, stable group decision-making, and predetermined friendships (Zhang & Han, 2023). In a collective context, the individual is expected to prioritise the collective interest, especially when individual and collective goals conflict, so collective cultures emphasise the priority of the social interest over the individual interest when resolving conflicts of interest (Zhang & Han, 2023).

As a result, when extraordinary abilities are not accepted, they lead to "a tremendous sense of loneliness" rather than rewards and positive responses from the surrounding community. If she has been or is in such a situation, which is different from those around her who are in a prevailing cultural context, her personal experiences and feelings could influence this interpretation. Pre-

existing beliefs, assumptions and stereotypes can affect audiences' involvement, including their willingness to immerse themselves in a story, their empathy with the characters and their recognition of the story's meaning (Polletta & Redman, 2020). So, cultural differences can influence how these characters are perceived, depicted, and understood, leading to varying interpretations and engagements with the same content, which can influence Chinese audiences' negotiated readings. This also reflects a cultural contrast between Eastern and Western perspectives on genius and mental health.

Oppositional Reading

The oppositional perspective of some viewers can show a rejection of the pre-established framework of mental health challenges in Anglophone TV dramas. Hall (1980) identifies the third decoding position as oppositional. In this position, the viewer understands both the literal and the intended connotative meaning of the message but chooses to decode it within an alternative framework of reference. Instead of accepting the dominant framing, the oppositional reader reinterprets the message in a contrary way. For example, Interviewee 4 rejects the notion that mental health struggles can directly generate extraordinary abilities. He argues that talents are innate and, while they may be stimulated by hardships, including mental struggles, they cannot be solely produced by them. He finds it "illogical" to claim that illness alone creates genius:

> "...because you can't say that people who get sick become talented, logically I can't quite explain that. I think it would be fair to say that they have a certain ability in themselves, and then this ability is stimulated by the hardships they suffer in life, as well as the mental hardships they face." (interviewee 4)

Interviewee 4 also criticizes Anglophone TV series for their satirical treatment of mental health challenges, arguing that such portrayals have become labels to justify antisocial or harmful actions. Citing *Bojack Horseman* as an example, he notes that in Western contexts, mental health struggles are sometimes exploited by the upper class as a way to appear "cool" or to excuse negative behaviour:

> "But I think Bojack Horseman is somewhat satirical of the entertainment industry or the so-called high society. Because I think especially in Western Countries, many upper-class people, use various mental illnesses as a label. They feel it's negative, but for them, it

> might actually be positive, as if it's an excuse for their behaviour... and they can use it to excuse some of their strange behaviours, I think." (interviewee 4)

Furthermore, this interviewee believes that the depiction of characters with mental health challenges in Anglophone TV series is darker than in real life because people with mental issues can be treated as normal people and regular patients in reality, while in these TV series, they are often put in desperate situations to commit crimes. He gives *Breaking Bad* as an example:

> "I think American TV series might actually be darker than real life because they often have characters do things like committing crimes, like in *Breaking Bad* with making drugs. And I feel like the mentally ill characters in American TV series are mainly portrayed as rebelling against society or their lives. This is the path they take, I think. But in reality, I think those who actually rebel are very few. Or considering factors, like ability and social tolerance, I think in real life it's more like... maybe in life, they would receive treatment or use other milder methods." (interviewee 4)

For this interviewee, mental health challenges are more likely to be negative conditions that require appropriate treatment, rather than traits that are beneficial to the individual or the art. This oppositional reading reflects Chinese culture's emphasis on social stability, influenced by high uncertainty avoidance. According to Hofstede (2011), unlike risk avoidance, uncertainty avoidance is about a society's tolerance for ambiguity, which indicates the degree to which its members feel uncomfortable or comfortable in unstructured situations. Unstructured situations are novel, unknown, and different from the norm, while uncertainty-avoiding cultures try to minimise unstructured situations through strict norms of behaviour, laws and rules, and belief in absolute truth (Hofstede, 2011). Chinese culture tends to be moderately to highly uncertainty-avoiding, with clear rules and structures employed to reduce uncertainty, and as a result, some Chinese viewers tend to choose films with clear moral guidance and firm conclusions (Yu et al., 2025). In addition, the collectivism of Chinese culture emphasises family, group cohesion and social responsibility, so screen narratives with individual heroism may conflict with the values of some Chinese viewers (Yu et al., 2025). As a result, some Chinese viewers may make an oppositional reading as they consider that Anglophone TV series seem to over-dramatise mental health challenges.

In addition, the interviewee's background as a novelist may have further influenced his critical reading, as they evaluate characters and narratives based on cultural expectations and literary structures. His oppositional reading was influenced not only by the cultural dimension but also by his professional insights into storytelling and character development.

In summary, this section combines Hall's encoding/decoding theory with Hofstede's theory of cultural dimensions to construct a framework for exploring how Chinese viewers interpret mental health characters in Anglophone TV dramas. It shows that individualism versus collectivism and uncertainty avoidance can affect the Chinese audience's decoding process, leading to dominant, negotiated or oppositional interpretations. Next, I will discuss other factors that influence Chinese viewers' understanding of such characters.

5.3 Other Influencing Factors

Chinese audiences' interpretation of mental health challenges is influenced not only by cultural dimensions but also by interactions between social media discourse and the real world, resulting in a more complex perception. In the contemporary context, television viewing is no longer a separate or isolated activity. Chinese viewers are in an information-diverse environment in which they can constantly negotiate meaning through different sources of information. In this section, I will continue with how the interpretation process of Chinese audiences is also influenced by a variety of sources of information, personal experiences, and overseas experiences, providing a foundation for further understanding.

Diversity of Information Sources

An important consideration is that Anglophone TV series is not the only source of mental health information or influence for Chinese viewers. Although the dissemination of foreign cultural products has been limited in China, the Internet has changed the way TV dramas are disseminated and viewed (Jirattikorn, 2021). Fans are always acquiring, translating, and sharing various foreign cultural products online, making them more accessible to Chinese viewers (Jirattikorn, 2021). On the other hand, due to the diversity of cultural

entertainment and media sources, watching any programme is an active and conscious choice for viewers, who may consume various cultural products at the same time (Jirattikorn, 2021), of which Anglophone TV dramas are only one. Chinese audiences are exposed to various information sources of mental health that interact with each other. Many respondents mentioned that television, movies, social media, and online video websites are their primary sources of information on mental health topics, while literature complements this.

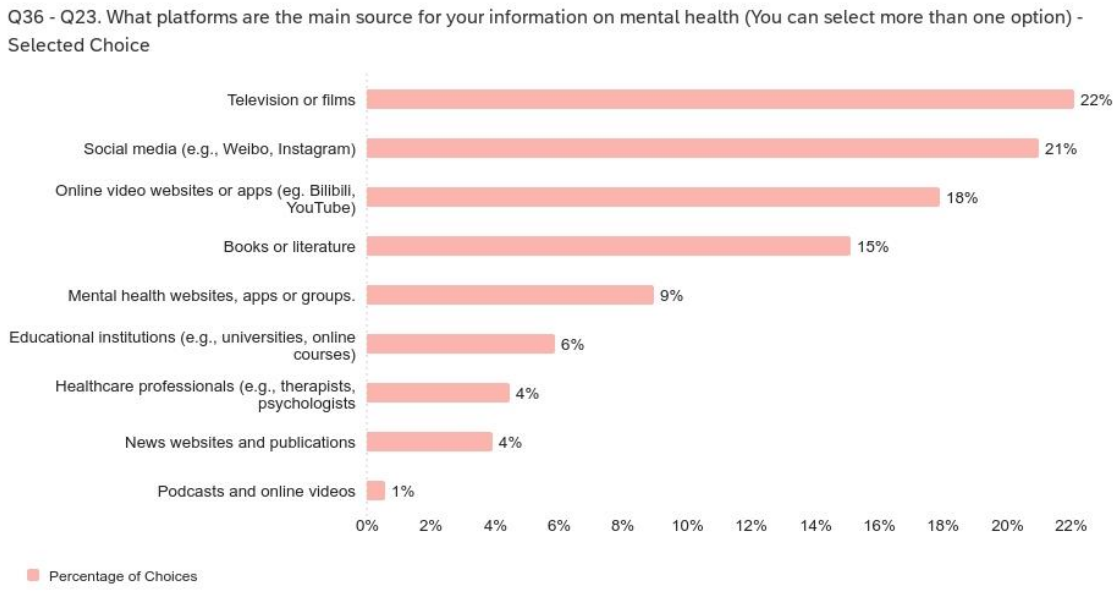

Figure 5.2 Sources of mental health information

As we can see in the figure 5.2, the majority of respondents considered television or film (22%) and social media (21%) to be their primary sources of mental health information, with online video sites (18%) and books or literature (15%) also playing an important role. Fewer participants relied on specific apps or websites (9%), educational institutions (6%), or healthcare professionals (4%), while news platforms (4%) and podcasts (1%) ranked at the bottom. These findings show that exposure to media outweighs professional or official sources for learning about mental health, especially entertainment and digital media. In other words, many people are likely to get their information on mental health topics from TV content and social platforms rather than from direct professional or academic sources.

For example, two interviewees mentioned Chinese social media and online video sites:

> "...Weibo and similar platforms, then also online video sites, like Bilibili and so on." (Interviewee 6)

> "How to put it, there are many people with mental health challenges at school, and there are plenty of shows, too, and then there's social media. I feel like social media in China is paying more attention to this topic now, though maybe it's also because I'm interested in it, so the algorithms keep pushing it to me." (Interviewee 5)

And another mentioned that the real information, news and articles:

> "I think it mainly comes from people I interact with in real life, like friends, and then possibly from the news. Sometimes, you see articles or real events reported in the news. Because in China, there are still some small groups focusing on different fields, so occasionally I come across those articles and gain some understanding." (Interviewee 4)

Anglophone TV dramas are just one source of information because viewers actively choose to watch local and foreign content, which means they use various references to decode content. As discussed in Section 5.1, which examined how respondents defined mental health challenges in fictional characters, some participants described relying on others' opinions to shape their own definitions, either within the story or in the wider audience community. More specifically, if the depiction of mental health in Anglophone TV dramas is aligned with the views they have acquired from other sources (e.g. Weibo or popular science videos), they are more likely to accept it directly, adopting dominant decoding. However, if the depiction conflicts with other information sources they trust, they may question or reinterpret it, using negotiated or oppositional decoding.

Personal or Observed Experiences with Mental Health Challenges

The interpretation process becomes more complex when it comes to the influence of personal experience. Personal experience of mental health challenges made viewers more sensitive to these characters, whether through personal experience or through friends and family. More than half of the respondents in the survey mentioned having friends or personal experience of

mental health challenges, which means that mental health challenges are not an abstract concept for them. From characters with mental health challenges in Anglophone TV dramas, these viewers are more likely to gain personal integrative gratification, as well as higher emotional engagement, which will be discussed respectively in chapters 6 and chapter 7.

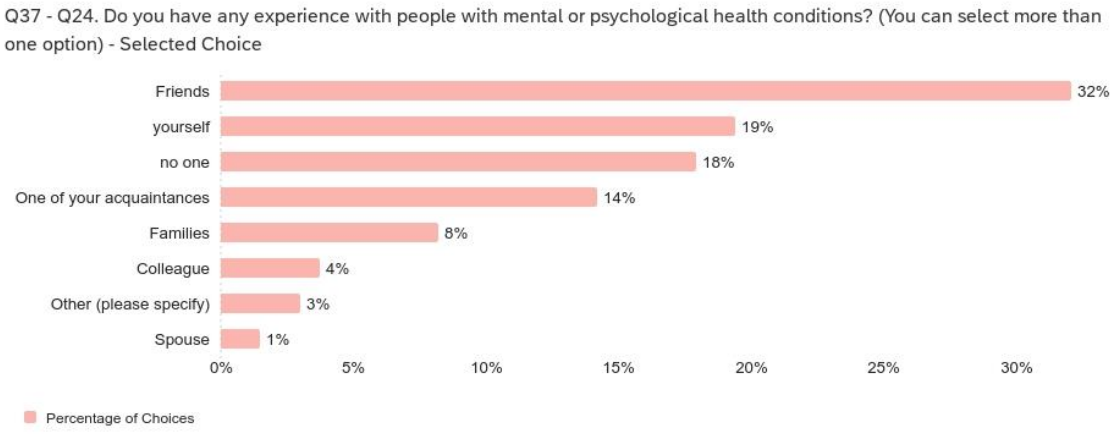

Figure 5.3 Personal experience of mental health

A significant share of respondents (32%) report having friends with mental health challenges, and nearly one-fifth (19%) indicate personal experiences themselves. By contrast, 18% say they have had no such experiences, while smaller proportions mention an acquaintance (14%), immediate family (8%), or colleague (4%). Only 1% refer to a spouse, and 3% cite other connections. This distribution suggests that for most participants, mental health challenges are not entirely distant: a sizable portion have friends or their own history with such conditions. At the same time, nearly a fifth of respondents have not encountered this issue in their social circle, showing a range of exposure levels within the respondents. Beyond friends, family, or personal experiences, several respondents also mention interacting with multiple classmates or clients/patients who face psychological challenges, as well as encountering mental health concerns among "many people in church fellowship." This indicates that awareness of and exposure to mental disorders can stem from a variety of social contexts. Whether through educational settings, professional roles (in which participants meet clients or patients), or religious communities, these varied interactions can further shape individuals' perspectives and sensitivity toward mental health challenges.

Interviewee 4 highlights how some of his friends have depression, attributing it largely to the conflict between harsh realities and higher ideals:

> "I have quite a few friends with depression, some take medication, some don't. Among people I know who deal with this, they often have a stronger sense of social responsibility. Maybe it's just my circle, but many of them work in media, especially in China. It's like reality exerts this huge mental pressure on them, yet they can't just turn into a 'different person' who's at peace. So, they do what they can in these narrow spaces. I'm not sure about their treatment, but some regularly see therapists or take meds." (Interviewee 4)

In contrast, Interviewee 5 perceives depression more as an individualised predicament:

> "Yeah, I think sometimes it's a matter of hitting a cognitive dead-end. Not that it isn't definitely a biological condition, but you can't rule out other causes. For instance, in high school, we had a girl who was somewhat depressed and tried to jump off the building; I think it was a flawed way of thinking. She was under massive pressure from the gaokao (college entrance exam) and insisted on a certain score to please herself or her parents. Once she couldn't reach it, she tried to jump. But after high school passed, she apparently lived quite happily." (Interviewee 5)

She also remarks on the variety of mental health challenges within her circle:

> "I seem to have a lot of ADHDS around me. I even suspect I have it. I feel I might be hyperactive, and plenty of my friends are, too. My best gay friend in the UK had ADHD plus depression. Then my roommate also had ADHD, possibly depression as well, though she wouldn't admit it, but I think so." (Interviewee 5)

Elaborating on another friend's potential depression, she suggests it might stem from boredom or a lack of personal goals, particularly in a privileged context:

> "I do know a guy who took antidepressants, then stopped, saying the meds didn't help, that he'd recovered. But I don't think he was really better. I feel it's this spoiled form of depression, he's got nothing else to pursue. His dad's super rich, and he can't achieve self-fulfillment… plus he's kind of a 'mommy's boy,' constantly under supervision. So he's just nihilistic, thinking life has no meaning." (Interviewee 5)

Personal experiences of being in direct contact with mental health challenges can influence audiences' understanding of characters in TV series. Personal/observed experiences provide an alternative interpretive perspective

to validate the mental health depictions in TV dramas. On the one hand, the audience may use oppositional decoding if the portrayal of the character in the Anglophone TV drama conflicts with their personal experiences. For example, Interviewee 4 had friends who were suffering from depression, and he attributed their mental health challenges to social pressures in China, which may lead him to pay more attention to mental health depictions that emphasise systemic pressures and social causes. As discussed in Section 5.2, Interviewee 4 adopted oppositional decoding of the characters in Anglophone TV dramas, finding it overly dramatised or lacking realistic context. He rejected the narrative that mental health could lead to extraordinary intelligence and criticised Anglophone TV dramas for sometimes presenting mental health challenges as beneficial personal traits. This suggests that, for some viewers, the degree of dramatic or creative licence in these portrayals has its limits, especially when it appears to distort the realities of mental health for narrative appeal. On the other hand, personal experience also tends to bring a moderate, negotiated interpretation. That is, viewers agree with the general depiction of the mental health challenges of characters in Anglophone TV dramas but may criticise certain details or add their own interpretations. For example, Interviewee 5 often provides a negotiated interpretation of these characters' mental health challenges with a personal, multiple perspective in different parts.

Overseas Experiences

Finally, direct exposure to Western culture (through study abroad or living overseas) tends to impact Chinese viewers' understanding of mental health challenges. Participants mentioned that living in an environment where mental health challenges are openly discussed can increase acceptance of mental health and reduce stigma. However, some interviewees indicated that easier access to diagnoses could also lead to confusion or overdiagnosis, complicating their overall perspective. So, overseas experiences may amplify or moderate the influence of portrayals in Anglophone TV dramas, reflecting the complex interplay between personal background and cultural context.

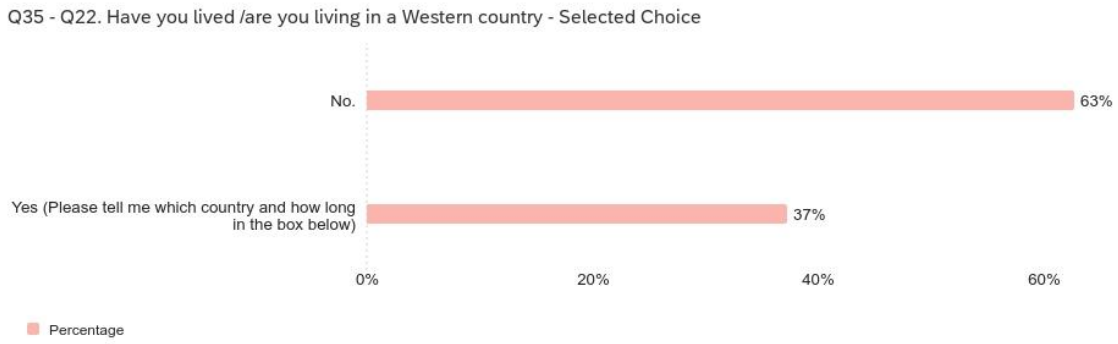

Figure 5.4 Participants' location

As we can see from the figure, about 37% of respondents report having lived in a Western country, while the remaining 63% have not. Among those with overseas experience, the United Kingdom and the United States are the most common destinations, with lengths of stay ranging from about one year to over six years (some mention as much as ten or eleven years in Germany). A few respondents indicate shorter periods elsewhere (e.g., four months in Australia, one-year stints in Spain or Mexico). This distribution suggests that roughly one-third of participants who have had substantial firsthand exposure to Western environments, potentially shaping their familiarity with and attitudes toward mental health.

Some respondents living in Western countries are more familiar with Western views on mental health and experience less culture shock when encountering characters with mental health challenges in Anglophone TV dramas. For example, interviewee 1, who currently living in the United States, said that they have more access to mental health information and feel that the United States takes a more objective and scientific approach to mental health challenges:

> "I feel like, for example, PTSD only really became widely known after people saw it in shows. Before that, nobody really talked about post-traumatic stress disorder as a thing. In the U.S., they won't, like, call you weird nicknames or label you 'C' or something. If you have a mental illness, they'll use a more neutral, though I'm not sure of the exact word, some sort of neutral or more scientific term." (Interviewee 1)

So, when people live in Western culture, they may have a dominant interpretation of the mental health narrative in Anglophone TV dramas. For

example, Interviewee 1 was more likely to accept the depiction of PTSD in Anglophone TV dramas.

On the other hand, direct exposure to Western culture can also lead to a negotiated reading that blends perspectives. For example, interviewee 5, who was living in the UK, emphasises how living there increases exposure to mental health information, with both supportive experiences and more frequent self-labelling:

> "When I was in the U.K., I'd often think I have a bunch of mental illnesses, all different sorts. Plus, I had a friend who actually had two mental illnesses and then studied psychology and got a certification... I learned a lot about mental health from him, got plenty of support." (Interviewee 5)

However, she also notes ambivalence about depression in Britain, explaining that it might be related to local conditions or even a misdiagnosis:

> "Originally, I felt depression was far from me; in the U.K., it feels really close, like my roommate had it. It's an easy place to get depressed. It's kind of funny, but now I think maybe it's just vitamin D deficiency, so maybe it's not really depression... plus I feel it's really hard to define if you're actually depressed in the U.K." (Interviewee 5)

She recounts a time she visited a general practitioner (GP) and was readily diagnosed with depression after a brief conversation, a result she questions in hindsight:

> "I went to the GP thinking I was depressed, described my symptoms. I deliberately played them up, like I was sure I had them... After talking for ten minutes, the doctor concluded I had depression. I did start medication, but because I was lazy, I didn't stick to it. I suspect it might not really have been depression, maybe just vitamin D deficiency or anxiety." (Interviewee 5)

Therefore, when Chinese audiences experience two cultures at the same time, they may accept the Western narrative framework of mental health challenges but moderate it through personal experience. Specifically, they may recognise the openness and neutral discussion of mental issues in Western culture while questioning some aspects of the Western perspective. Overseas experience can help to reduce cultural differences in decoding, which means that it allows

Chinese audiences to interpret such characters in Anglophone TV dramas in their own way by comparing different cultural contexts.

Conclusion

In conclusion, Chinese audiences have complex interpretation processes of characters with mental health challenges in Anglophone TV series, which are influenced by cultural dimensions and other additional factors. Chinese audiences do not always fully accept the portrayal of mental health in Anglophone TV dramas. Instead, they integrate or filter these portrayals according to their own backgrounds, existing knowledge and social circumstances, thus performing dominant reading, negotiated reading, or opposite reading. Also, Chinese audiences' understanding is moderated by a range of factors: different media sources, personal experiences, and the wider cultural context. Besides, I will emphasise once again that the above-mentioned connections between cultural dimensions and Chinese audience responses should be regarded as an interpretation rather than an absolute rule. It would be misleading to assume that all Chinese viewers will react in the same way to a given portrayal. Some may strongly identify with prevailing cultural attitudes towards mental health, while others, influenced by global media and changing social attitudes, may have a more liberal or individualistic attitude. In short, cultural background may influence audience reception, but it does not completely determine it.

Participants in this study define mental health challenges in fictional characters from various dimensions, influenced by popularised ideas about diagnosis, cultural norms, genre conventions, and external opinions. This complex process results in diverse and sometimes conflicting interpretations, showing both the complexity and subjectivity of audience engagement with mental health portrayals in Anglophone TV dramas. The audience reception concerns what happens when images and narratives cross national and cultural boundaries (Jirattikorn, 2021), which is the process through which ‘audiences differentially read and make sense of messages which have been transmitted, and act on those meanings, within the context of the rest of their situation and experience’ (Herold & Sisson, 2024). First, audiences sometimes rely on medicalised language and observable symptoms, such as PTSD, antisocial personality, and

depression. Then, characters with behaviours considered abnormal are often perceived as having mental health challenges, showing how audience definitions are influenced by their perceptions of normality and abnormality. Moreover, the genre of a TV series significantly affects audience perceptions. This is because genre shapes viewer expectations. Abnormal behaviours might be interpreted as mental health symptoms in crime dramas, whereas in comedies, similar actions may be read as humorous quirks. In other words, viewers draw on genre conventions to judge whether behaviour should be taken seriously as a sign of psychological struggle or dismissed as part of the character's stylised persona. Lastly, viewers' definitions are influenced by discussions from others or information from social media.

Participants interpret characters with mental health challenges in Anglophone TV dramas differently. Some viewers engaged in dominant readings, recognising the openness and depth of Anglophone TV dramas' depictions of mental health characters and referring to the more cautious and often negative ways in which they are depicted in Chinese TV dramas. Some viewers take a negotiated reading, implying that even if they accept the portrayal, they still interpret it according to their own cultural backgrounds and personal experiences. Some viewers engage in oppositional readings, rejecting or criticising certain characterisations, often because they strongly conflict with cultural norms that emphasise social harmony and stability. This reflects the fact that Chinese audiences sometimes have a cautious attitude towards foreign cultural content, in that Chinese culture tends to emphasise collectivism, social harmony, and respect for authority, which, to some extent, affects the acceptance of narrative styles that differ from their cultural norms (Yu et al., 2025).

Several other factors mentioned by interviewees also influence the viewer's interpretation process. The audience's experience is not only influenced by the individual's cultural dimension, but with globalisation, the interaction between the cultural context and the individual's perceptual or emotional experience has become increasingly complex. (Yu et al., 2025). Viewers obtain mental health information from a variety of sources, including television, social media, online videos, and literature, which either reinforce or conflict with the portrayal of mental health in Anglophone television dramas. Personal experiences can

influence viewers' perspectives, with those familiar with mental health challenges tending to become more engaged with characters with mental health challenges. Overseas experiences can also have an impact on the decoding process, which makes some Chinese viewers more accepting of the mental health portrayal in Anglophone dramas and introduces a critical perspective for others.

Finally, based on the discussion in this chapter of how Chinese audiences understand mental health characters in Anglophone TV dramas, the next chapter will explore the reasons for their engagement and the gratification they obtain, using the perspectives of uses and gratifications. The process of decoding information produces certain meanings and effects that have the potential to influence, entertain, guide or persuade, resulting in a complex set of perceptual, cognitive, emotional, ideological or behavioural consequences (Hall, 1980). While Hall's encoding/decoding model focuses on how Chinese audiences interpret these portrayals, the next chapter examines their personal motivations and the psychological benefits through uses and gratifications perspective, giving a different but complementary view. Therefore, Chapter 6 will further clarify that Chinese audiences not only interpret the characters with mental health challenges in Anglophone TV dramas but also obtain gratification from these characters to satisfy their informational and affective needs.

Chapter 6 How do Chinese audiences enjoy characters with mental health challenges in Anglophone TV dramas?

Introduction

Building on the interpretation process identified in Chapter 5, I will now turn to a detailed analysis of how these understandings turn into specific audience gratifications. In this chapter, I will examine how Chinese audiences' experiences of mental health portrayals in Anglophone TV series are reflected in unique gratifications in terms of cognitive, affective, and personal integrity. Based on uses and gratifications theory, proposed in the 1940s and developed by Blumler & Katz in 1974, the analysis will demonstrate how this understanding contributes to positive engagement and gratification. I aim to provide a comprehensive view of how characters with mental health challenges in Anglophone TV series influence the Chinese audience's gratification and viewing choices, ranging from affective gratifications to enhanced self-understanding and awareness. The different cultural contexts of the characters and the audience also influence these satisfactions. Therefore, I choose uses and gratifications theory as a guiding framework and combine it with a range of works on emotion and pleasure and cultural impacts. Drawing on examples and data from my survey, I explore the respondents' perceptions of these characters. This exploration will not only expand upon the findings from the previous chapter but also build the foundation to understand the audience's emotional engagement with such characters in the next chapter.

First, uses and gratifications theory explains why individuals choose certain media and the benefits they obtain from them. Uses and gratifications suggests that audiences actively choose media content to meet their social, psychological and cultural needs (Katz et al. 1974; Stafford et al. 2004). This theoretical process involves identifying the gratifications sought, examining the audience's motivations, and connecting media use to these gratifications. It classifies these needs into several areas: affective, cognitive, personal integrative, social integrative, and tension-free (Katz et al., 1973). However, this theory has been

widely critiqued within audience studies. As Elliot (1974) argues, it is overly "mentalistic", "individualistic," and "atheoretical", and audiences are viewed as atomised units rather than as part of significant social interactions. Morley (1992) argues that it ignores the social context of viewing, and he stresses subcultural socio-economic differences and shared cultural codes over individual psychology. Therefore, I use uses and gratifications as a starting point for understanding viewers' motivations, supplemented by Ang's (1985) work on *Dallas*, Liebes and Katz's (1993) framework of cross-cultural reading, and Gorton's (2021) work on feminist resilience.

There is no fixed list of gratifications when different studies have identified different categories and classification systems (Charney, 1996). Rubin's (1983) research on television viewing motivations introduced relaxation, companionship, entertainment, social interaction, information, habit, passing time, arousal, and escape as key gratifications. Building on Rubin's findings, Haridakis and Rubin (2003) found that viewers of violent TV programs sought time-passing, relaxation, escape, entertainment, information, social interaction, and arousal. Similar situations can also be related to Chinese audiences when they are watching characters with mental health struggles in Anglophone TV dramas. Fictionality also plays a crucial role in influencing audiences' gratification. Unlike documentaries or realist portrayals, fiction allows for stylisation, exaggeration, and emotional framing that can heighten aesthetic enjoyment and deepen emotional impact. The imagined worlds offer a safe and distanced space through which viewers can reflect on their own lives and empathise with complex characters. In this chapter, I integrate themes identified in the data with uses and gratifications to understand how Chinese audiences engage with characters with mental health challenges in Anglophone TV series. Based on the qualitative data, I found that viewers have the following main gratifications from these characters:

1. Affective needs: emotional experiences and aesthetic enjoyment.
2. Cognitive needs: seeking information and understanding (mental health and creative inspiration).
3. Personal Integrative Needs: self-understanding and personal identity.

It is noteworthy that some responses may overlap and fit into multiple themes, so that an individual can use television for several potentially interconnected television viewing gratifications. For example, admiration of strengths and abilities can coexist with fascination with the unconventional, and seeking information may intertwine with self-exploration. As Rubin (1983) said, viewing motivations are not isolated, static traits, but rather, comprise a set of interactive needs and expectations that are negotiated at the time of viewing. Viewing motivations function in concert with one another to produce certain patterns of gratification (Rubin, 1983).

Besides, quantitative data from the survey shows that a variety of factors would influence the feelings of Chinese audiences toward the characters with mental health challenges in Anglophone TV dramas, providing further support and details to understand their engagement.

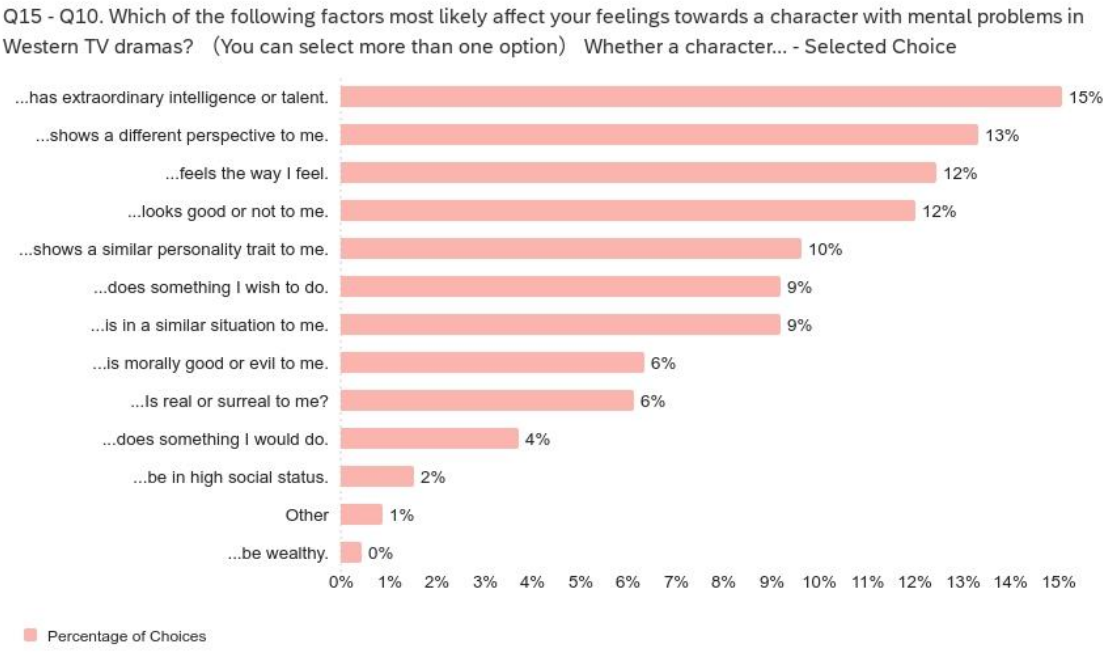

Figure 6.1 Feelings towards characters

As we can see from Figure 6.1, the most impactful factors are exceptional abilities, unique perspectives, emotional resonance, and physical attractiveness. The most influential factor was whether the character "has extraordinary intelligence or talent," with 15% of respondents selecting this option. The next most influential factor was whether the character "shows a different perspective

to me," chosen by 13% of respondents. Similarly, "feels the way I feel" and "looks good or not to me" were both selected by 12% of respondents. Additionally, 10% of respondents indicated that a character "shows a similar personality trait to me". Other factors, such as "does something I wish to do" and "is in a similar situation to me," each influenced 9% of respondents. Characters who are "morally good or evil to me" or "real or surreal to me" were each chosen by 6% of respondents, while only 4% were influenced by whether a character "does something I would do." Factors such as "be in high social status" (2%), "other" (1%), and "be wealthy" (0%) were the least influential in determining respondents' feelings towards characters. As a result, respondents tend to be influenced by these characters with unique talents, diverse perspectives, or relatable emotions. While physical appearance and personality traits also mattered, material factors like wealth and social status were less significant in affecting their feelings. These traits also influence audiences' gratification-seeking in different aspects, which will be discussed in the relevant sections in the following sections.

The high percentage of respondents identifying emotional resonance as a key factor suggests that viewers' affective engagement with these characters can be more complex than traditional categories of use and gratifications. As Ang (1985) argued, viewers engage not because the social reality, but because it articulates a 'structure of feeling' that resonates with their inner emotional lives. Besides, Liebes & Katz (1993) demonstrate that *Dallas* audiences from different cultural backgrounds negotiated the drama's emotional narratives to reflect their own identities. Further, Gorton's (2021) work on *The Handmaid's Tale* analyses how television drama constructs feminist resilience through devices such as voice-over, music and visual pauses, demonstrating how aesthetic choices actively orient viewers toward particular emotional engagements with female characters. Therefore, this affective dimension is important to understanding how these characters generate sustained pleasure across cultural boundaries.

On the other hand, emerging themes, such as cultural perspectives, have been broadening established categories since the uses and gratifications theory was proposed in the 1940s. A limitation of uses and gratifications theory is that, although audiences actively choose media content, they are still influenced by

other factors, such as media policies and socio-cultural contexts, which determine the availability and attractiveness of the content. Jiang and Leung (2012) have investigated the motivations of Chinese audiences for watching Western television dramas, finding that they seek entertainment, learning, socialisation and escapism. Specifically, this study extends uses and gratifications by exploring how Chinese viewers find gratification from characters with mental health challenges in Western TV dramas and examines how cultural factors influence these viewing experiences. I also examine how Chinese audiences perceive the characters with mental health challenges portrayed on screen from two different cultures. The survey figure shows respondents' opinions on the differences in the representation of mental health challenges between Chinese and Anglophone TV series.

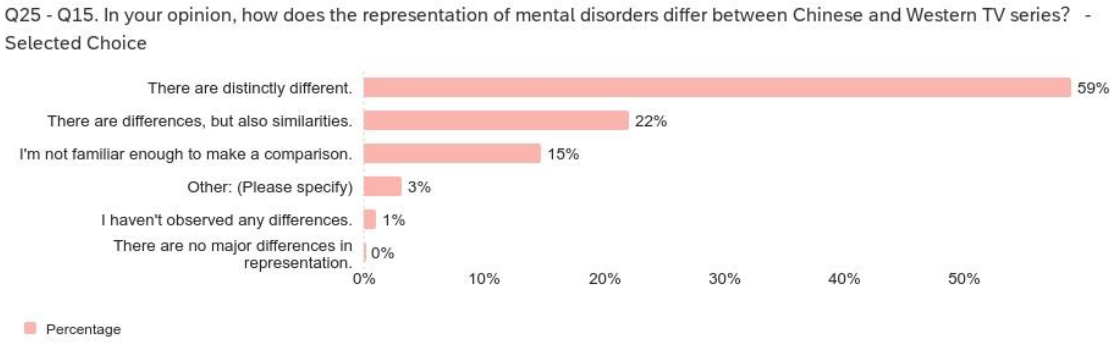

Figure 6.2 Representation on Western/Chinese TV series

The majority of respondents (59%) believe that there are significant differences in how mental health challenges are portrayed in Chinese and Anglophone TV series, suggesting a strong awareness of cultural differences in narrative style, themes, and overall framing of mental health challenges. About 22% of respondents recognise that while there are differences, some similarities also exist between the two forms of TV dramas, suggesting that they recognise the common themes in different ways of portrayal in different cultural contexts. About 15% of respondents selected that they were not familiar enough with the content to make an informed comparison. On the other hand, only 1% of respondents selected that they did not observe any significant differences, and no one thought that there were no differences between Chinese and Western portrayals.

As mentioned in Chapter 5, Chinese audiences understand and interpret characters with mental health challenges in Anglophone TV series in different ways. They are also not passive consumers as they actively seek out fictional TV series containing mental health characters for the entertainment value, different perspectives, and cultural novelty offered by Western narrative styles. As a result, this chapter will begin with an analysis of Chinese audiences' affective gratification, followed by their cognitive gratification, and finally, personal integrative gratification.

6.1 Affective needs: Aesthetic enjoyment, Emotional experiences and Cultural distance

This section examines Chinese audiences' enjoyment of such characters, exploring how their affective needs are fulfilled through engagement with characters with mental health challenges in Anglophone TV dramas, mainly focusing on aesthetic enjoyment, emotional experiences, and cultural impacts. According to Katz et al. (1973), affective needs are related to strengthening aesthetic, pleasurable and emotional experiences. Audiences look for media that can evoke feelings, such as pleasure, inspiration, or comfort, and provide moments of emotional engagement or mood enhancement. Characters with mental health challenges in Anglophone TV dramas often show unique traits, such as extraordinary intelligence, captivating beauty, or morally ambiguous behaviours, which contribute to their complexity and appeal. As cultural context also can play a crucial role, I explore how cultural context affects viewers' affective gratification-seeking, by comparing the portrayal of characters with mental health challenges in Chinese and Anglophone television dramas.

Extraordinary Traits, Moral Ambiguity, and Aesthetic Appeal

In this study, several participants expressed admiration and fascination for characters whose mental health challenges are intertwined with extraordinary abilities or compelling personal qualities. For these participants, such portrayals appeared to fulfil affective needs through aesthetic and emotional engagement, offering a mode of pleasure. Enjoyment is the primary goal of entertainment (Vorderer et al., 2004), which usually comes from our liking of the protagonist, among other things (Raney, 2004, 2011). Television viewing is fundamentally

associated with leisure and entertainment, and audiences approach it with an expectation of pleasure. As Ang (1985) observes, the framing of a programme as entertainment 'already offers the promise of pleasure' (p. 21). When viewers enjoy characters with mental health challenges, their liking tends to come from the positive evaluation of the protagonists, such as the admiration of the extraordinary Intelligence and physical beauty of the characters. As shown in Figure 6.1, extraordinary intelligence or talent is the most influential factor, with 15% of respondents selecting that these traits would influence their feelings towards characters with mental health challenges. Besides, 12% of respondents chose whether the character "looks good or not to me", suggesting that physical attractiveness also influences their admiration when mental health challenges are involved. For instance, a respondent expressed admiration for "the male lead in *The Good Doctor* who has extraordinary intelligence"(Respondent), and another highlighted the attractiveness of Villanelle in *Killing Eve*:

> "The little psycho in *Killing Eve*, she's good-looking and smart, even a bit nerdy. I find her very sexy." (Respondent).

Describing Villanelle as ‘sexy’ suggests that this respondent’s engagement is partly fulfilled through a gendered pattern of fascination. Within this pattern, female characters who challenge social norms are portrayed as both desirable and compelling. For this respondent, Villanelle’s intelligence, beauty and violent tendencies are not perceived as a threat, but as a form of liberation, which is a distinctly gendered combination of traits. While the appeal of male anti-heroes, such as Hannibal, tends to be framed through intellectual elegance and menace, Villanelle's attractiveness is explicitly sexualised and tied to her refusal of conventional femininity.

In Anglophone TV dramas, mental health challenges are often presented together with other positive traits. As I mentioned in previous chapters, the character’s mental health problem is closely linked to their talents or extraordinary abilities. For instance, a character’s creativity or intelligence may be portrayed as connected to their mental health condition, suggesting that their struggles are also a source of their unique strengths (Beirne, 2019). This shows that people with mental health challenges are not defined only by their problems but can have many sides and strengths. This is different from the

portrayal of characters with mental problems in Chinese TV dramas, which will be discussed in the following section.

What is more, a respondent expressed envy emotion without mentioning specific characters:

> "Some characters who are successful to some extent despite having mental issues make me feel envious." (Respondent)

According to respondents, “success” can be achieving career accomplishments, social admiration or managing daily life, building positive relationships, or coping with mental health challenges. Viewers admire not just the extraordinary abilities of these characters, but also their resilience and ability to live well despite difficulties.

As mentioned before, many characters with mental health challenges also tend to be portrayed as villains in Anglophone TV dramas, who are of questionable morality, such as Hannibal Lecter and Villanelle. The portrayal of villains with mental health challenges can stimulate the aesthetic appreciation of the viewers and attract them on a sensory and emotional level. As we can see from Figure 6.1, 6% of respondents selected that the moral dimension of the character ("morally good or evil") would affect their feelings towards characters with mental health challenges. Specifically, respondents expressed their fascination and admiration for these types of characters who have darker traits or morally ambiguous behaviours. As they mentioned:

> "Hannibal, elegant but terrifying, making people even more obsessed." (Respondent)

> "*Killing Eve*, every time the little psycho kills someone, I feel really thrilled. Because she does things I don't dare to do, and she's free and beautiful." (Respondent)

> "Villanelle's many actions that don't conform to social norms are recognised, accepted, and imitated by me, helping me be freer in real life, less conflicted, and often face life with a non-serious attitude." (Respondent)

According to Ang, fantasy is a special domain where the distance between an unsatisfying reality and a desired otherworld can be temporarily bridged. For

these viewers, through the vicarious experiences of freedom and transgression from Villanelle, they can "adopt positions and 'try out' those positions, without having to worry about their 'reality value'" (Ang, 1985, p.134). The act of fantasising itself is more important than specific scenarios, as experiencing fantasies creates a fascinating fictional space that offers a sense of liberation (Ang,1985). Besides, Gorton (2021) argued that series like *The Handmaid's Tale* provide a narrative example of feminist resilience, encouraging audiences to reflect on how resilience constructs the series through the narrative, resilient pauses and music. While June Osborne in *The Handmaid's Tale* demonstrates resilience through emotional endurance, vulnerability and female solidarity, Villanelle's resilience is expressed through transgression, physical dominance and an aestheticised refusal of constraint. The respondent who describes Villanelle as 'sexy' suggests that this kind of resilience has a specifically gendered appeal: her intelligence, beauty and capacity for violence can be experienced as liberation. In summary, viewers can feel attracted to these characters not necessarily because of their psychological traits, but because they embody a sense of danger, elegance, resilience, and the vicarious pleasure of freedom. This kind of portrayal combines horror and beauty, giving the audience a novel and thrilling experience.

Enjoyment of Novelty

Surpassing conventions is an important factor for viewers to gain affective gratification. Chinese viewers are attracted to characters with mental health challenges in Anglophone TV dramas, who tend to break conventional expectations and challenge social norms. As explained in research on the psychology of aesthetic pleasure, these characters provide a sense of novelty and uniqueness that satisfies aesthetic needs (Baek & Kim, 2016; Silvia, 2006). It is also important to note that the pleasures described here are often made possible because of the freedoms allowed in fiction. In fictional TV dramas, mental health challenges can be present in creative and exaggerated ways. Fiction can serve as a departure point for exploring new ideas and experiences, while non-fiction usually focuses on accuracy and social responsibility.

Participants expressed their interest in characters with mental health challenges in Anglophone TV series, as these characters often go beyond ordinary

expectations and challenge conventions. Also, according to Figure 6.1, 6% of respondents selected the option " being real or surreal" as a factor that would influence their feelings towards such characters. For example, an interviewee stated:

> "It seems I like these kinds of characters mainly because they do things that surpass ordinary people. I'm quite fascinated by their motivations. If there's a particularly exquisite psychopath, I'd also like to see just how psychopathic they are." (Interviewee 3)

So, viewers' enjoyment with these characters stems not only from their mental health challenges but also from their narrative function in the drama. Interviewee 5 expressed a similar sentiment, which also reflects an appreciation for the novelty and uniqueness of such characters:

> "I might like these kinds of characters; their thought processes are different. It's like appreciating a creature from another planet, that kind of feeling." (Interviewee 5)

The interest in "exquisite" psychopaths mentioned by the interviewee indicates a fascination with characters who defy conventional life yet possess captivating experiences. Mental health challenges are often used in Anglophone TV dramas as an element that makes the character different from others, creating a novel experience that satisfies the audience's aesthetic pleasure. People tend to identify novel stories as those containing unexpected narratives or unique characters (Silvia, 2006). And characters with mental health challenges are often given traits that are different from ordinary characters in the fictional TV dramas, making them novel.

Psychological research on aesthetic pleasure stresses the importance of novelty in enhancing enjoyment (Baek & Kim, 2016). People may initially experience discomfort or distress caused by unfamiliar stimuli, then perceive it as interesting and enjoyable when they view it as a challenge or are curious about the object's aesthetics (Silvia, 2006). This reflects Chinese viewers' interest in the fantastical nature of characters with mental health challenges, which fulfils affective needs by engaging emotionally and aesthetically. In addition, engaging with these non-conventional characters provides an emotional experience

associated with escapism, allowing the viewer to temporarily escape from daily routines.

Escapism

Beyond aesthetic enjoyment, surpassing reality through engagement with unconventional characters provides emotional experiences associated with escapism. Escapism refers to the tendency to seek distraction and relief from unpleasant realities, often by engaging in entertainment or fantasy (Katz & Foulkes, 1962; Rubin, 1983). As Ang (1985) proposes, the pleasure of television fiction lies not in its correspondence to viewers' social reality but in its capacity to offer "emotional realism": a felt truth that resonates with viewers' inner emotional lives regardless of whether the depicted world resembles their own. So, viewers can escape from their everyday life to an emotional space where feelings of constraint, frustration and desire for freedom are articulated and temporarily resolved through these unconventional or “crazy” characters.

For example, some respondents mentioned that those characters allowing them to temporarily escape their daily routines by immersing themselves in the characters' lives. For example, a respondent expressed a preference for unconventional characters who are "crazy”:

> "I generally have a higher favourability toward 'crazy' characters (non-ordinary people, abnormal people), and the reasons I like them are actually quite similar. Because they do things that normal people in reality wouldn't do. After all, ordinary things are too boring; my real life is completely uneventful and very dull. " (Respondent)

So, respondents who enjoy “crazy” or unconventional characters in Anglophone TV dramas can seek relief from the routines and pressures of ordinary life. They can temporarily leave behind these restrictions by watching TV dramas with unconventional characters, especially those who behave unpredictably or break social rules.

TV dramas provide a safe environment to viewers that allows them to explore actions and experiences that are inaccessible or unacceptable in reality, satisfying their affective needs for excitement and novelty, as this respondent further explained:

> “Moreover, in TV dramas, I don't have to think about any ethical, moral, or legal issues that might be involved in what they do. After all, all the deaths in film and television are "acted". Of course, this doesn't mean I want to meet similar characters I like in real life. I also won't imitate or learn from them; I just find them fun and interesting. " (Respondent)

As Ang (1985) points out, audiences do not passively accept popular cultural content; instead, they can distinguish between fictional entertainment and real-life behaviour, engaging with melodramatic and transgressive content precisely because they recognise it as fiction. As she explained:

> "Fantasy is therefore a fictional area which is relatively cut off and independent. It does not function in place of, but beside, other dimensions of life (social practice, moral or political consciousness). It is a dimension of subjectivity which is a source of pleasure because it puts 'reality' in parentheses, because it constructs imaginary solutions for real contradictions which in their fictional simplicity and their simple fictionality step outside the tedious complexity of the existing social relations of dominance and subordination." (p. 135)

Therefore, characters with mental health challenges can work as an independent fictional area for viewers, as these "crazy" characters often follow their impulses, ignore social judgments, and experience events that are dangerous, thrilling, or deeply emotional, doing things that would never be acceptable or possible in viewers' own lives. In this fictional space, viewers can share the excitement, adventure, and even the chaos of a different life without any real-world consequences or risks. The acknowledgement that they "won't imitate or learn from them" and simply "find them fun and interesting" indicates an awareness of the boundary between fiction and reality, reinforcing the idea that these characters can be a safe fictional escape, existing alongside reality for audiences.

Cultural Impact: Negative Image and Cultural Distance

Characters with mental health challenges in Anglophone TV dramas are different from those in Chinese TV dramas, which can also attract Chinese viewers due to their cultural uniqueness. As viewers seek affective gratification through emotional experiences and aesthetic appreciation, the different presentation of characters with mental health challenges in Chinese and Anglophone TV dramas could affect the Chinese audience's enjoyment of these characters. Moreover,

cultural distance also has an effect on how Chinese audiences perceive and enjoy these characters, which may enhance certain gratifications while diminishing others.

Firstly, characters with mental health challenges are portrayed differently in Chinese and Anglophone TV dramas due to cultural differences, which leads to varying effects on how Chinese audiences find satisfaction in these dramas. Respondents in this research compared the portrayal of characters with mental health challenges in Chinese and Anglophone TV dramas, and they tend to feel that Anglophone TV dramas portrayed these characters more attractively. In contrast, Chinese TV dramas portray these characters less comprehensively. As participants said:

> "Chinese TV dramas rarely tell stories with characters having mental health challenges, and a few dramas about such characters portray them mainly as vulnerable groups, while Western TV dramas portray them as more attractive, more shining, and more diverse, such as roles like killers, genius girls." (Respondent)

Participants derive pleasure and satisfaction from characters who are not defined by victimhood, which can directly challenge real-world stigma. As previously discussed, prevailing attitudes in some Chinese communities have often linked mental health challenges with personal weakness and family shame. The gratification derived from these powerful, non-victim portrayals, therefore, can become more than entertainment. It can be a potent counter-narrative to established cultural scripts. This can be a new understanding that individuals with mental health struggles can be powerful and brilliant.

> "Such characters in Western TV dramas would be more positive and glorified, like the Joker... They may do positive things with illegal means and may even have admirers. But in domestic dramas, characters probably just have common mental problems... They are usually filmed in a depressing way and less liked by people." (Respondent)

An interviewee further explained:

> "I think Western dramas are very frank, but Chinese ones seem to avoid these mental aspects... In American dramas, sometimes they appear as heroes or very charming villains, but in China, it's hard to

> shape a person with mental problems into a character with a strong character arc." (Interviewee 4)

Anglophone TV dramas offer complex characters with mental health challenges, satisfying audiences' affective needs for emotional stimulation and aesthetic enjoyment. However, this level of depth is not universal across all programming. As Mittell (2006) argued, narrative complexity represents a distinct narrational mode in specific contemporary American TV dramas, as "an alternative to the conventional episodic and serial forms that have typified most American television since its inception" (p. 29). For Mittell (2006), this distinct storytelling mode "encourages audiences to become more actively engaged and offers a broader range of rewards and pleasures than most conventional programming" (p. 32). Narrative complexity in American dramas excels in integrating characters into the narrative, strengthening the narrative's contribution to involvement with characters (Lu et al., 2019). What is more, universal themes in specific genres, such as violence and sex, are easy to be accepted by audiences in different countries (La Pastina & Straubhaar, 2005). Chinese audiences tend to have common emotional experiences through the characters with mental health challenges in Anglophone TV dramas. As a result, these characters are more effective in fulfilling aesthetic needs, while those in Chinese dramas may not meet such expectations.

Furthermore, cultural distance affects the affective gratification of these characters for Chinese viewers. As discussed in the literature review, Liebes and Katz (1993) demonstrated that viewers from different cultural backgrounds actively negotiate the meaning of the text through their own cultural frameworks. Their cross-cultural study of *Dallas* revealed that culturally distant viewers tended towards referential readings, relating characters and their dilemmas directly to their own lived realities, while more culturally proximate, media-literate viewers were more likely to adopt critical readings that treated the programme as a dramatic construction (Liebes and Katz, 1993). The cultural distance between Chinese viewers and the Western settings of these dramas can shape whether they read such characters referentially, assimilating their struggles into personally meaningful frameworks, or critically, appreciating them as unfamiliar narrative constructions. For instance, in the study of Chinese viewers' preferences for American and Korean TV dramas, Jiang and Leung

(2012) using uses and gratifications found that American drama viewers tend to be practical, value self-sufficiency, yearn for American culture, and are attracted by the complicated narrative, while Korean drama viewers tend to be trendy and concerned with others' approval, preferring the slow-paced narrative. Besides, Cultural distance also had a moderating effect on viewers' enjoyment. According to cultural discount theory, if there is a large cultural distance between foreign cultural products and the audience, the products will diminish in appeal as their portrayed norms and values will be less familiar and understandable (Hoskins & Mirus, 1988, cited in Baek & Kim, 2016) However, on the other hand, cultural distance stimulates viewers' sense of novelty, thus increasing their enjoyment of foreign dramas. Media enjoyment theory explains the enjoyment-enhancing effects of cultural distance, focusing on the "novelty" of a cultural product (Baek & Kim, 2016). For example, an interviewee mentioned that he prefers culturally closer dramas for companionship, while Western dramas fulfil other needs because they are more distanced from daily life:

> "If we're talking about a sense of companionship, for me, maybe Korean and Japanese dramas would be better... But with American dramas, perhaps because I like those that aren't about daily life, what attracts me more is their plot." (interviewee 4)

The cultural similarities between Korea, Japan and China, such as appearance, dress, lifestyle, and tradition, helped Chinese viewers to understand what characters did and see them as someone they knew about in everyday life (Lu et al., 2019). Characters, scenes or norms from domestic dramas tend to be familiar, which may be easy to understand but may not be novel. However, TV dramas from culturally distant settings often present unfamiliar character dynamics, which can provide a stronger sense of novelty and escapism to audiences (Baek & Kim, 2016). As a result, cultural distance could affect Chinese audiences' affective gratification from the characters with mental health challenges in Anglophone TV dramas, reducing some emotional experiences such as the sense of companionship while enhancing others such as the experiences of surpassing the ordinary.

As a result, Chinese viewers gain affective gratification from their engagement with characters with mental health challenges in Anglophone TV dramas. Their

aesthetic enjoyment and emotional experience tend to be satisfied through admiration for extraordinary intelligence or talent, the attractiveness of physical appearance, fascination with morally ambiguous characters, and the appeal of surpassing convention. Cultural background plays a crucial role in viewers' affective gratification. Compared with Chinese TV dramas, Anglophone TV dramas can satisfy emotional needs more effectively with complex character development and rich narratives. Cultural attitudes towards mental health, content regulation and narrative styles influence the portrayal of characters with mental health challenges in Chinese TV dramas, resulting in less appealing content and affective gratification. In Addition, the novelty brought about by cultural distance improves aesthetic pleasure while decreasing the sense of companionship.

6.2 Cognitive Needs: Seeking Information and Understanding

In addition to entertainment and aesthetic pleasure, Chinese viewers can also gain knowledge about mental health from characters with mental health challenges in Anglophone TV series, to satisfy their cognitive gratification. From the textual analysis in Chapter 4, although it's fictional, the portrayal of Characters with mental health challenges in Anglophone TV dramas still provides a lot of real information about mental health, which provides a source of cognitive gratification for Chinese audiences. As we can see in Chapter 4, despite having different stories and settings, the characterisation tends to follow the common psychological logic of reality. They present the construction of the causes, symptoms, diagnosis, and treatment of mental health challenges and explore the connections between characters and audiences that may exist in reality. According to Katz et al. (1973), needs related to strengthening information, knowledge, and understanding can be called. Informational viewers do not escape the informational environment but use television to learn about people, places, and events, including programmes that contain specific information. They tend to use this information for instrumental purposes, such as interpersonal interaction (Rubin, 1983).

According to the survey data, some respondents tend to seek cognitive fulfilment by acquiring more accurate and comprehensive knowledge about

mental health challenges from such characters in Anglophone TV series. Yet, cultural context may affect the availability and quality of the information provided.

Information on Mental Health

These characters make complex psychological processes easy to understand and accept. Despite the dramatisation, these depictions of fictional characters were effective in presenting information about the symptoms, diagnosis, and potential healing process of mental health challenges. Although some participants were aware of the dramatic nature of these portrayals, they still viewed them as a source of mental health information.

While such portrayals do not replace professional advice, they often present diagnostic labels, symptoms, and possible interventions in a more accessible format. As one respondent explained:

> "I think it mainly lets people know that it corresponds to some traits, although exaggerated, and it lets you know that there are such mental illnesses in the world. It opens your eyes, that kind of feeling." (Interviewee 5)

> "It might sound childish, but it's true. Through entertainment works, I get to understand the thought processes of mental illnesses (even though they're artistic representations), which helps me think about myself to some extent." (Respondent)

These responses reflect the audience's desire to seek cognitive gratification through fiction. In this case, participants acknowledged the fictionalised or "artistic" nature of these portrayals but still valued them as entry points to self-reflection and informal knowledge. Although dramatisation may risk oversimplifying or romanticising mental health struggles, participants appeared aware of the boundary between narrative truth and clinical realism, engaging critically rather than passively with what they saw.

Learning Through Fiction and Character Role Models

When Anglophone TV dramas portray how characters cope with mental health challenges and solve problems, this can have a positive cognitive impact on

Chinese viewers. As discussed in Chapter 4, the representation of the characters entails a journey of self-diagnosis and healing, which can also be interpreted as a story of personal development. For example, a respondent mentioned Beth in *The Queen's Gambit (2020)*:

> "Beth in *The Queen's Gambit*. Characters with such mental issues often appear very rational and full of strategy. I lack those qualities myself but admire strength and desire to become better. So, I learn and imitate some of the characters' problem-solving methods and ways of thinking while watching the show." (Respondent)

Beth's experience can be considered somewhat unusual, as she is a gifted chess prodigy, but her mental development offers valuable perspectives on overcoming personal challenges and pursuing goals. Audiences can draw on certain elements of her mindset and courage, especially regarding overcoming mental health challenges. This confirms and responds to the positive shift in the narrative framework of madness and genius that I mentioned in Chapter 4.

Beth overcomes her addiction without losing her talent, which is a positive paradigm shift about "madness and genius." It is the opposite of the narrative of the " superpowered supercrip narrative" (Beirne, 2019), which means that geniuses with mental health challenges are not entirely lucky because they have to pay for all their gifts and abilities with certain personal suffering. In this drama, Beth's gifts are not the result of the symptoms of her mental health challenges; instead, the mental health challenges are gradually presented as separate issues to be addressed as the story develops. And as it turned out, once she had confronted her trauma and addressed her substance abuse to become a healthier individual, she did not lose her talents but rather achieved the ultimate victory.

Even if viewers do not share the same talents or life circumstances, the internal struggles and resilience shown by such characters become relatable and inspiring. As such, these characters contribute not only to the audience's aesthetic enjoyment but also to the cognitive development for managing their own lives. As a result, Chinese viewers gain inspiration and practical cognitive gratification through Beth's strategic thinking, resilience, and personal growth journey.

Gaining Different Perspectives

Some respondents in this study mentioned being interested in gaining insight into worldviews that are different from their own, especially when these were portrayed through characters with mental health challenges. From Figure 6.2, the second most chosen influencing factor in the questionnaire was different perspectives, with 13 % of respondents selecting that whether a character offered a different perspective would affect their feelings about the character. Besides, as I mentioned in Chapter 4, Western TV dramas not only describe the detailed construction of characters' mental processes but also present their subjective experiences more visually and subtly, using close-ups, performance techniques, and sound design. This makes it easier for the audience to experience the perspective of characters with mental health challenges that differ from themselves.

For example, a respondent mentioned that the portrayal of the two villains in the Anglophone TV series gave them an understanding of the antisocial personality perspective:

> "Professor Hannibal in the movie *Hannibal* and Villanelle in *Killing Eve* provided me with perspectives of the antisocial personality." (Respondent)

Likewise, other respondents mentioned how *Rain Man* or *Mary and Max* introduced them to the thought processes of individuals with autism or Asperger’s syndrome:

> "Through *Rain Man* and *Mary and Max*, I gained an initial understanding of the thought processes of people with autism and Asperger's." (Respondent)

As a result, Anglophone TV dramas show characters with mental health challenges from a different perspective, enriching Chinese viewers' understanding of mental health diversity. These can develop audiences' empathy and reduce stigmatisation, thereby satisfying their cognitive curiosity and promoting open-mindedness.

Creative or Professional Inspiration

For some participants, characters with mental health challenges in Anglophone TV shows also provided another cognitive gratification: creative inspiration or professional inspiration. For example, one interviewee, a novelist, mentioned that they gained inspiration from the narrative structure and characterisation methods of shows such as *Legion* or *Breaking Bad:*

> "The impact on me is probably first in writing. I borrow some of their narrative structures and ways of character development. For example, some surreal elements in *Legion*, their methods, I might incorporate some of that. And then, like in American dramas such as *Breaking Bad*, their character development, their conflicts, I might borrow those in my narrative structures." (Interviewee 4)

Similarly, a fanfiction writer mentioned how they actively study such characters' thought processes to depict them more convincingly in their own work:

> "Because I need to write fanfiction, I try to think from the character's perspective and imitate them (so I can describe them better). It's an externally driven imitation behaviour." (Respondent)

This type of cognitive gratification may not be universal for most viewers, demonstrating how the complex portrayal of characters' mental processes in Anglophone TV dramas can influence personal creativity and professional inspiration. As a result, Chinese viewers obtain a diverse range of cognitive gratification as they are not passive viewers but actively interpret fictional psychological portrayals into practical applications in their real lives.

Cultural Impact: Limitations of information

Some respondents felt that Chinese TV dramas and Anglophone TV dramas are different in providing information about mental health challenges. They tend to think that Anglophone TV dramas are more informative and comprehensive about mental health challenges, while Chinese TV dramas rarely present such characters, which limits access to such information through the characters.

Participants mentioned that characters with mental health challenges are rarely seen in Chinese TV dramas or lack in-depth portrayals. The content regulation can be a potential structural reason for this narrative difference. Chinese TV

series may have safer narratives, which limit psychological conflict within the individual or the family unit, framing it as a personal issue or domestic drama. This structural constraint further stresses the unique value of such characters in Western TV dramas.

As respondents mentioned:

> "There are very few characters with mental problems in domestic dramas. Personally, I feel that the portrayals in Chinese TV dramas are either too sentimental or too stereotypical and lack diversity." (Respondent)

> "In fact, the problem of Chinese TV dramas is that they don't delve deeply into mental health challenges, and the few works with in-depth analysis tend to be niche. Chinese television rarely shows real human mental states but usually exaggerates a certain kind of mental problem. Western TV dramas are more realistic and natural in their portrayal of characters' mental conditions and rarely exaggerate a particular mental problem." (Respondent)

"Niche" here refers to productions that, while often receiving high critical acclaim, remain outside the commercial mainstream in China. These dramas are usually characterised by lower viewership compared to primetime successes, a more arthouse-oriented aesthetic, and a reception that tends to be limited to specific audiences. This contrasts with many characters with mental health conditions in Anglophone TV dramas, which often manage to integrate complex psychological themes into commercially successful, mainstream formats.

A respondent mentioned:

> "Characters in Chinese TV dramas simply have mental health challenges, while Western TV dramas describe and introduce specific problems and medications in detail, mainly with a lot of details... From watching Western TV dramas I've known several antidepressants and other medications, but in domestic dramas, umm, I have almost no impression."

They also mentioned that the reason could be the content regulation in China,

> "I think it's mainly because it's hard to pass censorship in China, so only things that teenagers can watch can be released." (Respondent)

In China, content regulation and societal stigma surrounding mental health may limit the depth of representation. Certain content in Anglophone television may be subject to stricter content regulation, including depictions of ethnic relations, violence, and sexual themes (Wu, 2015). As a result, representations of mental health challenges in Chinese television dramas tend to lack the depth and specificity found in Anglophone television, limiting Chinese audiences' exposure to detailed portrayals of these experiences.

However, it is also important to note that fictional Western representations are not always entirely accurate. Some participants questioned whether these portrayals might be too dramatised or sensationalised, though some of them still considered them more informative than local content. This is related to how they understand and interpret the portrayal of mental health in Anglophone television dramas. As discussed in Chapter 5, Chinese audiences interpret characters with mental health challenges in Anglophone TV dramas differently. Some viewers engaged in dominant readings, recognising the openness and depth of Western TV dramas' depictions of mental health characters and referring to the more cautious and often negative ways in which they are depicted in Chinese TV dramas. Some viewers take a negotiated reading, implying that even if they accept the portrayal, they still interpret it according to their own cultural backgrounds and personal experiences. Some viewers engage in oppositional readings, rejecting or criticising certain characterisations, often because they strongly conflict with cultural norms that emphasise social harmony and stability. This reflects the fact that Chinese audiences sometimes have a cautious attitude towards foreign cultural content, in that Chinese culture tends to emphasise collectivism, social harmony, and respect for authority, which, to some extent, affects the acceptance of narrative styles that differ from their cultural norms. (Yu et al., 2025)

For example, an interviewee believed that American TV shows also portray mental health challenges inaccurately in their own way:

> "I think American TV series might actually be darker than real life because they often have characters do things like committing crimes, like in *Breaking Bad* with making drugs. And I feel like the mentally ill characters in American TV series are mainly portrayed as rebelling against society or their lives. This is the path they take, I think. But in

> reality, I think those who actually rebel are very few. Or considering factors, like ability and social tolerance, I think in real life it's more like... maybe in life, they would receive treatment or use other milder methods." (interviewee 4)

Therefore, Chinese audiences' cognitive gratification is influenced by how they decode these characters, and this decoding process is in itself influenced by cultural dimensions. Viewers who engage in dominant decoding are more likely to accept the portrayal of mental health challenges in Anglophone TV dramas and thus achieve greater cognitive satisfaction, while viewers who engage in negotiated decoding partially accept the mental health messages in Anglophone TV dramas and thus achieve partial cognitive satisfaction. Viewers who engage in oppositional decoding, on the other hand, reject the portrayal of mental health challenges in Anglophone TV dramas and thus achieve less cognitive satisfaction.

In summary, for many Chinese viewers concerned about mental health challenges, characters with mental health challenges in Anglophone TV dramas provide cognitive gratification. Due to content regulation and cultural conventions in China, the representation of mental health challenges in domestic TV dramas is limited, which affects viewers' exposure to characters with mental health challenges from Chinese TV dramas. Through these characters in Anglophone TV series, viewers can gain some information about mental health challenges and explore different perspectives from mainstream Chinese narratives. Respondents also believe that these characters are beneficial to self-encouragement and professional or artistic creation. However, Chinese audiences' cognitive gratification is influenced by how they decode these characters, and this decoding process is in itself influenced by cultural dimensions. Cognitive gratification can also facilitate personal integration, which will be discussed in the next section.

6.3 Personal Integrative Needs: Self-understanding and Personal Identity

This section explores how Chinese viewers respond to characters with mental health challenges in Anglophone television dramas to fulfil their need for personal integration, focusing on self-reflection, self-understanding, self-validation and psychological compensation. According to Katz et al. (1973),

individual integrative needs include both cognitive and affective elements and involve reinforcing credibility, confidence, stability, and status. These needs are important because they resonate with viewers' inner emotions and help shape their sense of self. When people engage with media that reflects their values or features trusted authorities, they can gain confidence and reinforce their personal identity (Blumler & Katz, 1974). Through identification with characters and narratives, media consumption can enhance self-understanding and promote self-reflection (Rubin, 1983).

In particular, engaging with characters with mental health challenges can help viewers maintain a stable and meaningful self-image. Individual experiences with mental illness, whether personally or within the family, can greatly shape how people respond to media portrayals of mental health (Klin & Lemish, 2008). As discussed in Chapter 5, experiences related to mental health challenges influence Chinese viewers' interpretations of these characters, either through their own experiences or through friends and family. They tend to interpret these characters according to their own personal experiences. More than half of the participants in the online survey had personal or friends/family experiences related to mental health challenges, and some of them mentioned how they see themselves in such characters. This sense of recognition deepens emotional resonance and fosters reflection.

Even for those without direct experience of mental illness, common life challenges may still evoke identification with these characters, such as trauma, attachment issues, or emotional development. According to Figure 6.1, both situational similarity and personality similarity can build a connection with characters with similar mental struggles to improve self-reflection and self-understanding, as 10% of respondents selected "showing a similar personality to me" can affect their feelings towards characters with mental health challenges, and 9% of respondents selected that being in a "similar situation". Eyal and Rubin's (2003) 's research examined viewers' engagement with aggressive television characters and found that perceived similarity to the characters significantly predicted identification with them. Engaging with these characters offers viewers a reflective space that may contribute to greater self-understanding and emotional coherence.

Also, the factor "feels the way I feel" was selected by 12% of respondents, which could help viewers validate and confirm their hidden feelings, which leads to self-validation. Besides, respondents selected that they would be affected when a character does something they wish to do (9%) or something they would do (4%), which is related to psychological compensation. These responses do not exclude aesthetic pleasures mentioned in 6.1 but often exist alongside them. This engagement can be both aesthetically pleasurable and emotionally meaningful. Also, since this was a multiple-choice question, it is likely that viewers who selected emotionally reflective options also selected those related to aesthetic appreciation.

Self-Reflection: "Do I also have bipolar disorder?"

Characters with mental health challenges can prompt Chinese viewers to self-reflect on their thoughts, behaviours and lives. In the integrated personal engagement, viewers critically examine their own experiences in light of the characters' struggles. For example, one interviewee stated that watching *Bojack Horseman* made him think about unhealthy thought patterns, while another questioned whether her energy and mood fluctuations were similar to bipolar disorder while watching *Modern Love*. As Interviewee 4 noted:

> "I think the impact on me might be that I'll reflect on things in life. I might pay more attention to their reasons, the causes behind their issues. Like in *BoJack Horseman*, his life is actually terrible. Yes, that's a good example. And maybe there are things in it that make me think, like, how to say, for example, BoJack's unhealthy lifestyle and his thoughts, I might reflect on whether I've had similar thoughts in my life." (Interviewee 4)

Additionally, Interviewee 5 mentioned that she often projects onto herself when she sees a character with mental health challenges, and she specifically referred to Anne Hathaway's portrayal of a character with bipolar disorder in *Modern Love*:

> "I often watch those shows and feel that they have issues, and I project it onto myself, thinking, 'Do I also have this illness?' I think when I was watching the one about bipolar disorder, I searched about the illness and thought, 'Do I also have bipolar disorder?' Like sometimes I'm energetic for a while, and then sometimes I just want to stay at home lying down." (Interviewee 5)

This reflection can lead viewers to a deeper understanding of their own values or emotions. Specifically, Chinese viewers can engage in self-reflection and awareness through the complex portrayal of mental health challenges in Anglophone television dramas. They can explore the inner emotional world in a more entertaining and meaningful way, leading to personal integrative gratification.

Self-Understanding: " I understand myself better"

By engaging with characters with mental health challenges in Anglophone TV series, Chinese viewers often gain a deeper understanding of their own conditions and emotions. By seeing aspects of themselves reflected in these characters, they may recognise personal challenges that they may have overlooked or misunderstood, involving gaining clarity and deeper insight into one’s own psychological condition. Some interviewees indicated that they learnt about specific mental symptoms through these roles, which helped them to understand their personal situation. For instance, one respondent shared:

> "I've been deeply troubled by anxiety and depression myself. My major is film and media, so I usually learn about mental symptoms, which helps me understand myself." (Respondent)

Another respondent recognised the underlying causes of his own childhood experiences after seeing Rue's struggles with OCD and anxiety in *Euphoria*:

> "When Rue in *Euphoria* talked about her childhood experiences with OCD and anxiety, I suddenly realized that I had also experienced that in my childhood. It made me more certain that my mental health might have always had some issues, leading me to want to conduct in-depth self-exploration and psychological therapy, helping me understand myself better." (Respondent)

Furthermore, characters with mental health challenges in Anglophone TV dramas could be an educational tool for self-exploration. As another respondent said, they could re-contextualise their own past feelings through the straightforward descriptions of the characters' reactions to their mental situations in these dramas:

> "It's hard to say. Most of the time, it just releases a kind of empathetic feeling at the moment and doesn't leave a deep,

> unforgettable impression. However, in the mental illnesses I pay attention to, most characters' words and actions are simple and straightforward, easy to understand. So it's quite common to see protagonists react with extreme, avoidant, or aggressive behaviours when facing difficulties, setbacks, challenges, or a beautiful future. This helps me realize, 'Oh, I handled something that way because I felt uneasy or was cowardly due to longing,' and then further analyze myself." (Respondent)

As we can see, characters with mental health challenges in Anglophone TV dramas can serve as a mirror for Chinese viewers to recognise and address their own mental states.

Self-Validation:" I felt much more accepting of my own situation "

Engaging with characters with mental health challenges in Anglophone TV dramas could also help Chinese viewers confirm and validate their feelings. By identifying with characters who face similar challenges, viewers can validate their experiences and feel less isolated (Cohen, 2001).

For example, one respondent mentioned that she was more accepting of her situation when seeing a character who also suffered from bipolar disorder:

> "The boyfriend of the 'little angel' in *Skam*, the one with bipolar disorder, I felt much more accepting of my own situation after knowing about him. Not that I have such a severe condition, but sometimes I'm full of energy and very caring and nice to my partner, but other times my energy is very low, and I just want to be by myself and don't want any interaction with my partner." (Respondent)

Through emotional resonance with these characters, viewers perceive their own emotions reflected in characters (Livingstone, 1998). Recognising personal feelings through characters' experiences enables viewers to process and accept emotions that may have been previously unacknowledged, thereby contributing to emotional well-being and personal growth. This process contributes to the reinforcement of personal identity and enhances self-esteem by acknowledging one's feelings and conditions.

Psychological Compensation: "They did what you didn't do."

These characters can also be vehicles for psychological compensation, allowing Chinese viewers to deal with emotions or desires that are repressed or unfulfilled in reality. Specifically, characters with similar feelings or desires as the audience take actions that the audience could not take on their own, or face issues that the audience could not face, achieving some sort of psychological balance. As interviewee 3 mentioned:

> "For example, if you've suffered such harm, you might have wanted to hurt others at the time, but due to societal morals or your abilities, you didn't act like them. So when you find such a character who might have the same trauma as you but did what you didn't do, it might give you a bit of psychological compensation." (Interviewee 3)

Interviewee 2 also shared:

> "To put it bluntly, maybe because inside, maybe when I was young, I might have had sudden thoughts like this, connecting with my younger self. But due to the limitations of reality, it's impossible to do these things. So these more morally ambiguous characters in movies can easily make me feel something." (Interviewee 2)

> "Because this part of the feeling is understood and presented in a fantastical way. It's quite interesting." (Interviewee 2)

So, emotional truth can be conveyed through fantastical characters, indicating that realism is not a prerequisite for resonance. According to the compensation theory proposed by Mendelson and Papacharissi (2007), viewers can use media to compensate for unmet needs in real life. Chinese viewers can achieve psychological satisfaction and balance through such characters that reflect their hidden desires or unresolved emotions. So they can explore aspects of themselves in a safe fictional environment, thus reinforcing their identity and self-awareness.

Cultural Impact: Character Complexity and Cultural Attitudes

Some respondents mentioned that characters with mental health challenges in Chinese TV dramas tend to be more one-dimensional, often lacking personal background and in-depth experiences compared to those in Anglophone TV dramas. This could affect audiences' ability to relate to the characters and

reflect on their own experiences, thereby impacting their personal integrative needs.

As mentioned before, in China, content regulation and societal stigma surrounding mental health may limit the depth of representation. While stigma and discrimination related to mental health challenges are prevalent in all countries, their manifestations are influenced by cultural contexts. In some Chinese communities, mental health challenges are often considered personal or family failure, weakness, or shame (Mak & Chen, 2010). Because of the cultural differences, Chinese mainstream perceptions are a recurring topic under the discussion of the application of Western psychotherapies to some Chinese help-seekers, which often involves conformity to societal norms, deference to authority figures, emotional suppression, filial piety, and humility (Wang et al., 2020). Influenced by prevailing attitudes towards mental health, Chinese TV dramas rarely describe the depth of mental health challenges.

As respondents mentioned:

> "I feel that in Chinese culture, when you see a person with mental problems... you tend to think that it's probably their own problem... But I feel that characters in Western works will talk about their personal growth environment and the social background at that time. It feels like looking at the issue of mental illness from a more systematic framework." (Interviewee 3)

> "The West focuses on the character's own struggles and growth experiences. The domestic dramas only use mental problems as a label, simply calling them 'madness'...I think they are richer in foreign TV dramas, while more one-dimensional in domestic TV dramas." (Respondent)

> "The West dramas emphasise the background and experiences of characters with mental health challenges, while Chinese films tend to portray these characters as marginal figures, only as tools to drive the plot forward, or focusing on portraying their crazy behaviours. The rationale differs." (Respondent)

Participants identify differences between Chinese and Anglophone TV dramas portraying mental health challenges, suggesting a strong awareness of cultural differences in narrative style, themes, and overall framing of mental health challenges. They consider that Anglophone TV dramas can help them to engage

in personal reflection more than Chinese TV dramas. Thus, Anglophone TV dramas provide a more complex portrayal of mental health challenges, allowing Chinese viewers to explore mental health challenges from different perspectives, and therefore meet their needs for personal integration more effectively than domestic TV dramas.

Specifically, the rich personal integration journeys presented in Anglophone TV dramas further enhance audiences' personal integration gratification. As respondents mentioned, Anglophone dramas provide complex character portrayals and nuanced explorations of relationships and emotional depth:

> "Western themes are richer, like *Hannibal*, dedicated to creating various elegant ways of dying. A better aspect is that it showcases soulful love, making this theme more mainstream. Additionally, shows like *The End of the F***ing World* and *You're the Worst* also show how two flawed people are both compatible and different, exploring love and humanity." (Respondent)

Specifically, as discussed in Chapter 4, the analysis of *The End of the F***ing World* (2017), it is clear to see how the depth of character portrayal satisfies the audience's need for personal integration when it comes to mental health challenges and love. Although James has antisocial tendencies, insecure internal working patterns and attachment styles, which is changed by his relationship with Alyssa. In this series, Alyssa provides a supportive relationship, and unlike James' parents, she is mindful of his feelings and accepts and protects him. Also, because of their similar awful family relationship, they deeply understand each other, despite their aggressive behaviours towards society and others. Their relationship provides a safe and supportive space to both of them to express emotions and work through traumas. According to attachment theory, the type of social relationships a person chooses is crucial because the process of creating internal working patterns of self and others is influenced by all relationships rather than determined by a single relationship (Bowlby, 1988). The relationship with a supportive individual may positively change internal working patterns and alleviate insecure attachment problems (Sroufe, 1988).

Thus, in contrast to Chinese TV dramas, Anglophone TV dramas portray the complexity of characters' psychological development, through which Chinese

viewers can gain a deep reflection on mental health, interpersonal relationships and personal growth, fulfilling their self-integration needs.

In addition, cultural factors also affect the behaviour of participants, thus affecting how they obtain personal integration gratification. As discussed in Chapter 2, research has shown that many people in China associate emotional distress with personal weakness and prefer to manage such difficulties without professional intervention (Parker, Gladstone & Chee, 2001; Sun et al., 2018). Here, I focus on a situation where viewers have no direct experience with mental health and how they perceive potential emotional challenges.

Interviewee 3 mentioned that she has no direct exposure to mental health challenges and found it difficult to label certain behaviours as genuine disorders:

> "I currently have none. That makes it hard to say, maybe in daily life, you encounter people with bad tempers or who are harsh toward others, and you might think they have some mental problem. But it's not so easy to be certain." (Interviewee 3)

Despite a lack of direct experiences of mental health challenges, she mentions being emotionally strained and suspects that her reluctance to share negative emotions may be affecting her mental state:

> "From my past experiences, I'm pretty private, especially with negative emotions or thoughts, I tend to keep them to myself. I usually don't tell friends or family. Lately, I've been thinking maybe that's not great for my mental health, so I wonder if I should start opening up. I'm torn between these two approaches.... I suppose if I do have a mental issue, it might stem from not talking about my negative feelings for a long time. That's made me feel under constant mental stress, which isn't pleasant, maybe even quite painful." (Interviewee 3)

Nevertheless, she expresses a willingness to help others facing severe mental health challenges:

> "I guess my personality leans toward helping others improve, whether it's their actual life or mental condition. So, if, say, a friend had a serious mental problem, I definitely wouldn't agree with them just keeping quiet and dealing with it alone." (Interviewee 3)

In short, interviewee 3 does not have direct experiences with mental health challenges, but she still reflected on her emotional patterns and, despite her own preference for privacy, when it comes to her friends' mental health challenges, she considers it beneficial to openly seek help.

A similar preference for privacy was expressed by Interviewee 1, who stated that if she had a mental health challenge, she "probably wouldn't tell anyone." At the same time, she also suggested that her friends could ask for help:

> "I'm not really sure why that is. Maybe because I don't have any actual diagnosis. If it's someone else who's officially diagnosed, talking about it might help them handle things. For myself, even if it were a physical issue, I wouldn't bring it up much, and it's not specifically because it's a mental illness. I just don't post about myself; I rarely update my Moments." (Interviewee 1)

She clarifies that her reluctance is less about stigma and more about simply preferring to keep her personal matters private. Still, she views a friend's open disclosure as beneficial if it leads to practical support or resources.

They express a similar perception of emotional exposure or mental health challenges: recognising that openly seeking help is beneficial but valuing personal privacy more, which reinforces the tendency of audiences to seek integrative gratification through fictional characters. A general tendency reflects that when young people do not know how to identify and describe emotions or manage their emotions in an effective and non-defensive manner, this impedes help-seeking (Ciarrochi et al., 2003). There is a high prevalence of mental health challenges in adolescence and early adulthood, but young people tend not to seek professional help (Rickwood et al., 2007). The open portrayal of these characters' emotional and psychological difficulties in Anglophone TV dramas provides a safe space for viewers to engage in indirect personal reflection and emotional compensation. Therefore, even for viewers who have no direct experience with mental health challenges, characters with mental health challenges in Anglophone TV dramas can help with personal integration.

In summary, the portrayal of characters with mental health challenges in Anglophone TV dramas satisfies Chinese viewers' need for personal integration by prompting self-reflection, enhancing self-awareness, affirming personal identity,

and providing psychological compensation. Through these processes, viewers not only engage with these characters for entertainment, but also to understand their own lives. Especially in cross-cultural contexts, Chinese presentations may have limitations or stereotypes influenced by prevailing attitudes on mental health. Thus, the unique portrayal of characters with mental health challenges in Anglophone TV dramas enables Chinese viewers to explore, validate and sometimes compensate for certain aspects of their own inner lives, thus contributing to a more integrated and self-aware identity formation.

Conclusion

For understanding a new media environment, uses and gratifications theory still provides an approach to examine audiences' engagement from a how-and-why perspective (Yu, 2024). It shifts perspective from the media-centred view to how receivers receive the content (Yu, 2024). The majority of respondents believe that there are significant differences in how mental health challenges are portrayed in Chinese and Anglophone TV series, suggesting a strong awareness of cultural differences in narrative style, themes, and overall framing of mental health challenges. When Chinese TV dramas lack relevant descriptions, Chinese viewers gain unique gratification from the portrayal of mental health challenges in Anglophone TV dramas. There are five principles in uses and gratifications: First, media use is goal oriented. Second, audiences play an active role in the media which they consume. Third, media compete against other sources to satisfy various needs. Fourth, audiences recognise that the media competes with other sources to satisfy various needs. Fifth, only audiences themselves can assess the value of media content and the gratification gained from media usage (Yu, 2024). As we discussed, Chinese audiences gain unique gratification from these characters, including affective needs (aesthetic appeal, enjoyment of novelty, escapism), cognitive needs (seeking information and understanding, role models, different perspectives, creative or professional inspiration), and personal integrative needs (self-reflection, self-understanding, self-validation, and psychological compensation).

Firstly, Chinese viewers gain affective gratification from their engagement with characters with mental health challenges in Anglophone TV dramas. Their

aesthetic enjoyment and emotional experience tend to be satisfied through admiration for extraordinary intelligence or talent, the attractiveness of physical appearance, fascination with morally ambiguous characters, and the appeal of surpassing convention. Then, they also gain information about mental health challenges and explore different perspectives from mainstream Chinese narratives. Respondents also believe that these characters are beneficial to self-encouragement and professional or artistic creation. Their cognitive gratification is influenced by how they decode these characters, and this decoding process is in itself influenced by cultural dimensions. Besides, characters with mental health challenges in Anglophone TV dramas also satisfy Chinese viewers' need for personal integration by prompting self-reflection, enhancing self-awareness, affirming personal identity, and providing psychological compensation. Through these processes, viewers not only engage with these characters for entertainment, but also to actively understand their own lives.

Furthermore, Western TV series consumption can affect the cultural awareness, cultural acceptance, and cultural knowledge of Chinese viewers. People can identify their perceptions from media usage (Tirasawasdichai, et al. 2022). For cultural awareness, audiences can perceive and acknowledge cultural differences from what they experience in TV series. Anglophone TV dramas are more informative and comprehensive about mental health challenges, while Chinese TV dramas rarely present such characters. Due to content regulation and cultural conventions in China, the representation of mental health challenges in domestic TV dramas is limited, which affects viewers' exposure to characters with mental health challenges from Chinese TV dramas. So, audiences can gain more mental health information to satisfy their cognitive gratification from these characters in Anglophone TV dramas, which is also affected by their decoding of these characters. Also, Cultural attitudes towards mental health, content regulation and narrative styles influence the portrayal of characters with mental health challenges in Chinese TV dramas, resulting in less appealing content and affective gratification. Compared with Chinese TV dramas, Anglophone TV dramas can satisfy emotional needs more effectively with complex character development and rich narratives. Cultural distance could affect Chinese audiences' affective gratification from the characters with mental health challenges in Western TV dramas, such as reducing some emotional

experiences, like the sense of companionship, while enhancing others, such as aesthetic enjoyment or the experiences of surpassing the ordinary. In Addition, the unique portrayal of characters with mental health challenges in Anglophone TV dramas enables Chinese viewers to explore, validate and sometimes compensate for certain aspects of their own inner lives, thus contributing to a more integrated and self-aware identity formation.

According to uses and gratifications theory, Chinese viewers make conscious choices based on their personal needs and motivations, and these processes of engagement may also have an emotional connection and cultivation effect. The seeking of specific gratifications such as entertainment, knowledge, or personal integration often has broader cultural implications (Tirasawasdichai, et al. 2022). Specifically, viewers are increasingly exposed to foreign TV series cross-culturally because of the widespread distribution of foreign media through technological developments and platforms (Tirasawasdichai, et al. 2022). These platforms can bring about self-initiated cultural learning, reduce culture shock and develop viewers' familiarity with other lifestyles, emotional norms, and modes of thinking (Tirasawasdichai, et al. 2022). As a result, Chinese viewers' use of and satisfaction with Anglophone TV dramas may then develop into deeper emotional resonance and cultural adaptation. Building on this, the next chapter will explore how Chinese audiences emotionally respond to characters with mental health challenges in Anglophone television dramas and how these portrayals influence viewers’ perceptions of mental health.

Chapter 7 How are Chinese Audiences Emotionally Engaged with and Influenced by Characters with Mental Health Challenges in Anglophone TV Dramas?

Introduction

The final chapter of audience analysis will explore how characters with mental health challenges in Anglophone dramas influence participants, including the emotional engagement, factors influencing emotional responses, and potential changes in their mental health perceptions. It is important to understand what creates the connection or bond between the viewers and the characters, as increased audience involvement with characters may lead to more communication and emotion, which increases the possibility that television content will influence viewers' knowledge, attitudes and behaviours (Herold & Sisson, 2024). When exploring participants' participation, the content of the television depiction and the viewing environment need to be considered (Herold & Sisson, 2024). As Ang (1985) argued, *Dallas* provides emotional realism to its audience, allowing them to recognise characters' feelings and evaluate the story through their own emotional experiences, even without direct resemblance to the world depicted on screen. Enjoying the realism of television dramas requires both emotional and cognitive engagement: viewers rely on their personal experiences and logical reasoning to assess how authentic the storylines are (Livingstone, 1990). This engagement depends on whether the characters, emotions, and events feel believable and applicable to real life. In Chapter 4, I discussed how these characters embodied universal psychological experiences through attachment theory, and how television techniques convey particular messages about mental health challenges. By presenting detailed constructions of characters' psychological processes and healing experiences, these dramas offer narratives of general personal growth that produce an emotional realism recognisable to Chinese viewers, enabling them to connect to the characters across cultural boundaries.

First of all, participants have an emotional response to characters with mental health challenges in the Anglophone TV series that is beyond cultural differences. The audience's engagement with the characters tends to be an effective way by which people participate in the narrative (Dill-Shackleford et al., 2016). In the studies of narrative engagement, audiences' connection to fictional characters can be understood in various ways, such as identification, empathy, and sympathy. Identification occurs when the audience adopts the perspective of the characters in the story, usually the protagonist (Cohen, 2001), which can develop empathy for the character and allow the viewer to see themselves in the character's experience (Chen et al., 2016). Empathy can be a dual process in which audiences regard characters as self-extension while at the same time bringing characters into the self, which means that they engage in both personal feelings and characters' feelings (Dill-Shackleford et al., 2016). Sympathy is another mode of emotional engagement with fictional characters. When empathising with characters, audiences experience characters' mental states in a sense as if they were mine, while sympathy emphasises the other's experiences and situation, often perceived as different from one's own (Giovannelli, 2009). Although they represent different modes of responding, they all imply that viewers are able and willing to step into the shoes of the figures during viewing (Tian & Hoffner, 2010). The process of the audience imagining themselves in the characters' place suggests a deep personal connection, even though their cultural backgrounds are different from those fictional characters on screen.

Then, these emotional responses can be influenced by many factors, including the similarity between the audience and the character, how the character's trauma is depicted, the aesthetic choices made in the production, and the differences between television and film formats. Emotional engagement is dynamic as audiences may "step in and out" of a character's shoes (Cohen & Klimmt, 2021). In other words, viewers can regulate their emotional responses, sometimes highly emotionally involved, and sometimes may withdraw from a character's perspective to avoid distress if the narrative becomes too personal or uncomfortable. Therefore, particular contexts or different factors may lead individual viewers to adopt a more fluid position, for example, as observers rather than immersive emotional engagement with the characters (Cohen &

Klimmt, 2021). Therefore, perceived similarities, trauma depictions, and aesthetic choices in film or television can change participants' emotional engagement with characters with mental health challenges in Anglophone TV dramas.

After that, participants' perceptions of mental health challenges can be influenced by characters in Anglophone TV dramas. The way audiences respond to characters with mental conditions can also be associated with their perception or behaviour change. If viewers develop an affective bond with a character who disconfirms generally held stereotypes of a stigmatised group, their beliefs, attitudes, and behaviours may change (Schiappa et al., 2005). These influences tend to produce a meaningful shift in participants' awareness, understanding and attitudes towards mental health challenges. Cultures become interpenetrated in the process of contact, and no culture can exist purely without being influenced by other cultures, which means a reinterpretation of perceptions or practices when the West meets the East, when the global meets the local (Chen & Liu, 2023). Narratives can be used to change audience attitudes, beliefs and behaviours in many contexts and are particularly effective in using narratives to influence health-related themes (Christy et al., 2022). Cultivation theory, developed by George Gerbner in the 1960s, examines the effects of television on viewers' perceptions of social reality. Specifically, those who spend more time watching television are more likely to perceive the real world in ways that reflect the most common and frequent messages in the fictional television world (Morgan & Shanahan, 2010).

Building on the analysis in Chapter 5, which applied Stuart Hall’s encoding/decoding model, and Chapter 6, which examined uses and gratifications among participants, in this chapter, I explore participants' emotional responses to characters with mental health challenges in Anglophone TV dramas. While previous chapters examined how participants interpret these characters and the gratifications they seek, such as cognitive or affective needs, this chapter discusses the affective connections that audiences have with these characters and the influences that they may have. In particular, I will firstly discuss the following main emotional responses: identification and empathy, sympathy, fear or caution. Then I also examined the factors that influence these

responses, including perceived similarity, the portrayal of trauma, production techniques. Finally, I will discuss the influence these characters have on participants' perception of mental health. I will draw together the discussions in the previous two chapters and this chapter to understand this influence.

7.1 Participants ' Emotional Response to Characters with Mental Health Challenges in Anglophone TV Dramas

Based on texts from surveys and interviews, participants' personal emotions are touched by these characters, focusing on a series of concerns such as growing up, family, and socialisation, achieving self-projection and empathy while watching the process, rather than recognising the different cultures presented in the dramas. To be specific, when audiences see the behaviours or situations of the characters on screen, they unconsciously project themselves into the situation as well (Chen & Liu, 2023). In other words, emotional responses can work across cultural differences, enabling viewers to connect with characters from different cultural backgrounds. In this part, I explore three main modes of participants ' emotional engagement with characters with mental health challenges in Anglophone TV series: identification, empathy, and sympathy. In addition, a few respondents mentioned a fourth reaction: fear or caution about encountering such characters in reality.

Identification and Empathy

Identification is often understood as a process in which viewers momentarily adopt a character's perspective, goals, and emotional state as though they were the character (Cohen, 2001). In such moments, the boundaries between "self" and "other" may blur, allowing a deeper, more immersive connection to the characters. In contrast, empathy involves understanding and sharing a character's emotional experience while maintaining one's own separate identity (Coplan, 2004). This usually involves empathising with another person's pain or pleasure without fully integrating perspectives. In this way, the audience tends to respond emotionally to the character and possibly adopt the character's point of view (Chen et al., 2016). As Samuel and Trimmel (2025) note, empathy involves both cognitive and affective dimensions: cognitive empathy refers to the capacity to represent and understand another person's mental states, while

affective empathy refers to an emotional response generated through exposure to another's experience. The narrative arts, as they argue, can be a hybrid stimulus in both dimensions simultaneously to foster viewers' empathy. In this study, although respondents have different cultural backgrounds from characters with mental health challenges in Anglophone TV dramas, there is an emotional connection between them. Some accounts tend to blur the line between identification and empathy. Some participants mentioned seeing themselves in the character's difficulties and spoke of personal similarities ("I have this problem too ..... ‘I don't understand it either ....."), which are categorised in this section as strong resonance or partial identification.

For example, when a respondent related the characters' journey to their own life, I considered their response to be identification while also containing deep empathy. She mentioned Amy from *The Big Bang Theory* and related it to her own social anxiety and difficulties, characterised by emotional detachment, strict interpersonal boundaries, and failed friendships due to perceived coldness:

> "In *The Big Bang Theory*, Amy made an extremely inappropriate sexual comment (with lesbian undertones) at a female pyjama party to try to be friendly with the other women. While I wouldn't go that far, I can empathise."

This respondent feels empathy for Amy because they also struggle with understanding normal social interactions and lack similar friends, leading to a reduced interest in socialising due to awkward encounters, as they further explained:

> "I know I have some social anxieties, shown in my lack of support for others' emotional needs and my overly strict boundaries in social interactions. Past friendships have ended without resolution, with everyone saying I'm cold. I empathise with Amy because I also don't understand what normal social interactions look like. I have no friends like me, only people who awkwardly drift away after I bring up topics of interest or 'inappropriate' topics. This reduces my interest in socialising." (respondent)

This response reflects the emotional realism proposed by Ang (1985), that a character's emotional experiences can feel authentic and recognisable to viewers, even when the narrative setting bears little resemblance to the viewer's own life. The viewer recognises the pain of failed social connection in Amy's

situation and resonates with the emotional state itself. This perceived truthfulness of Amy's emotional state generates empathy rather than shared cultural or social circumstances. As introduced in Chapter 6, this identification can also be linked to psychological compensation, which means that audiences may tend to identify with characters that embody repressed desires or unmet emotional needs. This reinforces the idea that the participants's identification is not merely a passive emotional response but also an active engagement aimed at fulfilling needs.

Besides, some respondents empathised with characters experiencing specific mental health challenges without indicating that they had the same conditions. This shows that viewers could recognise emotional or behavioural traits related to the mental conditions as emotionally authentic, such as self-isolation, numbness, or being misunderstood, rather than evaluating the conditions themselves. Two respondents mentioned bipolar disorder, and resonated with the character’s isolation and emotional trauma:

> "Anne Hathaway's character in *Modern Love* has bipolar disorder. When she has an episode, she isolates herself and doesn't want to interact with the outside world. I deeply empathise with this behaviour." (respondent)

> "In *Shameless*, both Monica and her son Ian have bipolar disorder. One's condition is inherited, and the other's is influenced by a poor family background. The emotional trauma caused by their family of origin deeply resonates with me." (respondent)

One respondent mentioned their empathy with symptoms of depression and feeling numb about everything:

> "In the last episode of *You Are the Worst* season 2, Jimmy builds a fort out of bed sheets for the depressed Gretchen, which deeply moved me. I empathise with Gretchen's feeling of numbness during her depression. I also felt a moment of emotional impact when Jimmy gave up hooking up with other girls to stay with her, but I believe this feeling of numbness will eventually return." (respondent)

One respondent mentioned the obsessive traits of autism:

> "The main character in *The Good Doctor* is a male doctor with autism. Despite having various issues in life, such as OCD, his meticulous and

> obsessive traits are well-utilised in his work, particularly in surgery. Seeing the protagonist persist and succeed due to his insistence on minor details makes me feel moved and reminds me of my own experiences of being misunderstood and doubted. To a certain extent, I can empathise and relate to him." (respondent)

As Ang (1985) argued, emotional engagement does not depend on empiricist realism and classical realism. Viewers' experience is at the emotional level: "what is recognised as real is not knowledge of the world, but a subjective experience of the world: a 'structure of feeling'" (Ang, 1985, p. 45). Ang (1985) terms the 'tragic structure of feeling' a sensibility in which happiness is understood as inherently precarious, and emotional life is characterised by continuous fluctuation between joy and suffering (p. 46). This instability sustains viewers' emotional investment rather than any fixed state of happiness or despair. These responses demonstrate how emotional realism functions across not only cultural but also experiential boundaries: viewers do not need to have the same condition to find a character's psychological experience truthful and resonant.

Furthermore, moving beyond empathy grounded in specific traits or conditions, one interviewee described a more fundamental feeling rooted in universal emotional needs. They did not mention specific characters but described empathy for characters who exhibit a desire for love and attention, often stemming from childhood bullying or other hardships. The interviewee noted that such behaviours resonate with their own experiences and observations, where individuals, including themselves, sometimes seek attention and understanding through actions perceived as disruptive. This empathy is driven by the shared feeling of craving love and recognition:

> "Yes, they might have certain traits, like being bullied as a child or having a strong desire for love. I feel that either I or the people around me have such thoughts to some extent, so by putting myself in their shoes, I can understand why they act this way. Many characters seem to be seeking attention or care when they act out. This makes me feel quite empathetic." (interviewee 3)

Taken together, these responses illustrate a progression from identification with a specific character's struggle, through recognition of emotional traits associated with particular conditions, to a broader empathy with universal human needs.

This demonstrates the emotional realism described by Ang (1985), showing that a character's inner emotional life can be recognisable and authentic to its audiences, regardless of cultural, real-life, or narrative distance. By relating their personal experiences to these characters, participants in this study experience both identification (their struggles are not isolated) and empathy (understanding their pain). This emotional authenticity can also be persuasive. When viewers identify with a character, they are more likely to adopt attitudes, beliefs and behaviours that are aligned with the story, which can generate empathy, consume cognitive resources and increase enjoyment (Christy et al., 2022). In this process, viewers tend to adopt the character's perspective imaginatively, therefore accept persuasive messages rather than critically evaluate them (Christy et al., 2022).

Sympathy

Respondents' answers also show varying degrees of sympathy for characters with mental health challenges in Anglophone TV dramas, influenced by the narrative context, personal experiences and professional backgrounds. Sympathy is an emotion felt for and directed at another person, differing from empathy in that it not only involves sharing in the other’s emotion but also, and importantly, includes a genuine concern for their well-being (Giovannelli, 2009). Sympathetic responses to characters are a common and significant way that audiences engage with narratives. Because stories often present characters' thoughts and emotions from an internal perspective and across time, they are effective at arousing strong or subtle feelings of sympathy (Giovannelli, 2009). As Samuel and Trimmel (2025) argue, drawing on Smith (2023), empathy is best understood as 'feeling with' another subject, while sympathy involves 'feeling for' them, recognising and caring about their suffering without necessarily mirroring their emotional state. These concepts are intertwined, and they cover different aspects of the conscious experience and interactions with others. Responses discussed below demonstrate this distinction, that participants engage emotionally with characters' difficult situations while maintaining their own separate perspective.

For example, one respondent mentioned a veteran with PTSD. The participant sympathised with the trauma and pain carried by this character despite having a different life experience from the character in China:

> "An episode of *Criminal Minds* tells the story of a serial killer who is a veteran suffering from PTSD. One day, a sound triggers his condition, making him believe he's still on the battlefield, leading him to kill many innocent people. In the end, it's revealed that the reason he developed PTSD was because he killed innocent children on the battlefield, causing him to be trapped in painful emotions until his death. The soldier's experience evokes both sighs and sympathy." (respondent)

This is sympathy without strong identification or empathy. The viewer doesn't share the feeling of having PTSD flashbacks, but they recognise the character's suffering and have compassion. The characters are depicted as victims suffering from the trauma of war, showing inner struggle and remorse for hurting innocents. Here, sympathy is directly related to the character's awareness of wrongdoing, and the audience's emotional response integrates compassion with moral conflict.

Another interviewee's sympathy is also intertwined with moral ambiguity:

> "Because I feel that, in the things I watch, they're always under the heavy pressure of some insurmountable problem in life, and because of that, they carry out very antisocial, misanthropic actions. That reason, I think, triggers my sympathy. It's like in Breaking Bad: he got cancer, and his family didn't understand him." (Interviewee 4)

This interviewee's sympathy for the main character in *Breaking Bad* is rooted in relatability and the universal struggle for survival. Specifically, he believes that the character's immense life stresses lead to antisocial behaviour, and therefore, he understands them emotionally, even if he does not agree with them morally.

Besides, a respondent's sympathy comes from the character's struggle with social expectations, considering that the mental health challenges cause a clear socio-emotional disorder. The respondent's sympathy is mainly emotional, driven by their awareness of the daily challenges in typical social interactions:

> "In *The Good Doctor*, Dr. Shaun, who has high-functioning autism, appears to have flaws in his approach to life and emotions from a regular person's perspective, which elicits my sympathy. "(respondent)

Moreover, a respondent with a psychiatry internship experience particularly sympathises with Monica in *Shameless*, arguing that her mental health status has deteriorated due to neglect and social judgment:

> "In *Shameless*, Monica and Ian are both bipolar cases who achieve different states under different supports. I sympathise with her more because everyone forgives Ian but criticises her. Perhaps due to my experience as a professional who has interned in psychiatry, I pay more attention to her. She is clearly a typical case of a mental patient who had poor outcomes due to a lack of early attention." (respondent)

As Beneš (2025) identifies in the analysis of *Dopesick*, its narrative reframes addiction from an individual moral failure into a structurally comprehensible predicament, convincing viewers to respond with empathy rather than judgment. Similarly, this respondent's sympathy stems from perceived social injustice and a professional understanding of the characters who are marginalised in the drama. It demonstrates that social stigma and insufficient support systems can exacerbate mental health challenges, which makes the viewer's sympathy morally legible through narrative framing.

As a result, audiences can emotionally engage with characters with mental health challenges through sympathy, without relevant experience or a similar cultural background. Many factors can influence participants' sympathy, such as narrative framing, moral judgment, personal and professional experiences, and recognition of systemic injustice. While identification involves the audience getting inside the character's perspective, sympathy allows the audience to engage emotionally from a distance in cross-cultural or unfamiliar contexts.

Fear or caution

In addition to empathy, another common emotional response is fear or caution. Viewers may feel anxious or mildly negative about possible real-life encounters with people who resemble these characters, especially in professional or everyday social contexts. For example, some respondents express understanding and sympathy but also concern about the distress caused by potential colleagues exhibiting similar behaviours:

> "I understand and sympathise, but sometimes I'm not sure whether encountering such partners in real life, especially at work, would cause me distress." (respondent)

> “I’m not sure if working with someone like that in real life would bother me.” (respondent)

These examples demonstrate that audiences can experience multiple emotional responses simultaneously, such as sympathy and fear. They may feel sympathetic toward a character's mental health challenges but remain hesitant or wary when it comes to applying this understanding to real-world interactions.

Besides, others specifically reference characters like Hannibal, expressing anxiety about intelligent yet dangerous individuals:

> “Hannibal... it’s really scary when a bad guy is too smart!” (respondent)

This negative emotion exists alongside or overlaps with identification, empathy, and sympathy, illustrating the complexity and multilayered responses of participants to characters with mental health challenges in Anglophone TV dramas. As discussed in Chapter 6, audiences derive aesthetic satisfaction from anti-hero characters due to their intelligence or independence. However, the emotional responses of respondents also reveal an underlying sense of unease, particularly when these traits are linked to mental instability.

As a result, all these emotional responses suggest that participants' emotional engagements tend to be less dependent on shared cultural context and more grounded in universal experiences of connection. At the same time, Chapters 5 and 6 demonstrated that cultural background plays a significant role in influencing how participants interpret portrayals of characters’ mental health and seek gratification from Anglophone TV dramas. As mentioned in Chapter 4, mental health challenges in Anglophone TV dramas are portrayed in specific cultural narratives, such as medicalised language and popularised ideas about diagnosis. Thus, interpretation can be influenced by cultural background, while emotional resonance can operate beyond those boundaries. Participants can respond to these characters in emotional and personal ways, which transcend cultural borders. To be specific, the characterisation of mental health

challenges in Anglophone TV dramas is presented in particular socio-cultural understandings. At the same time, participants engage with these portrayals through emotional processes that may bypass cultural differences.

However, this does not reduce the importance of cultural differences but instead reveals that cultural specificity coexists with universal emotional responses. While viewers' emotional responses, such as empathy, identification, and sympathy, may transcend cultural boundaries, the characters who evoke these responses are influenced by the cultural context of the Anglophone TV series. The Anglophone TV dramas present mental health challenges in specific narrative and aesthetic ways that are different from those portrayed in Chinese TV dramas or other cultural media. These culturally different portrayals provide various opportunities to participants. In other words, cultural differences are not unimportant but instead make these emotional responses possible. The participants 's reactions come from the fact that these Anglophone dramas present a unique kind of character and story. In this case, the emotional universality is generated through culture-specific representations. Thus, cultural differences still influence participants' mental health challenges perceptions through emotional responses, which will be discussed in section 7.3.

To conclude, participants ' emotional responses to Anglophone mental health characters are multiple and intertwined. Sometimes, they strongly identify or empathise with the characters' situation, sometimes maintain a distance of sympathy, and sometimes express caution about what may happen in the real world. The audience can move between these different emotional states, feeling one or more of them at the same time. These emotional engagements transcend the boundaries of language, geography and cultural differences. At the same time, other factors may amplify or reduce the viewer's emotional responses to the character, which will be discussed in the next section.

7.2 Factors Influencing Emotional Response

Participants’ emotional engagement with these characters is varied and influenced by a range of factors related to both themselves and the way the story is told. In this section, I will discuss the major factors, including how perceived similarity affects emotional connection, how the portrayal of

characters' trauma influences empathy and understanding, and how specific production techniques and storytelling methods influence emotional engagement.

Similarities Between Characters and Audiences

Several participants mentioned that similarity influences how they connect with characters with mental health challenges. For some, relating to a character's personality or experiences can make them feel more understood, while for others, it may cause discomfort or lead them to avoid similar portrayals.

Liking Characters with Similar Traits

Similarity can lead to stronger emotional involvement. According to K. Y. Huang et al. (2024), several reasons explain why similarity can lead to stronger identification with characters. First, just as similarity helps people like each other in real life, viewers may like characters more if they see them as similar to themselves. This liking makes it easier to identify with the character. Second, viewers may find it simpler to imagine themselves in the place of a character who shares similar traits or experiences, compared to a character who is very different from them. Third, characters who resemble the viewers might feel more realistic, and believing a character is realistic can increase how closely viewers engage with them. Finally, identifying with similar characters lets audiences indirectly experience and learn from the ways those characters pursue their goals. Feeling similar to the character signals to viewers that the lessons from the story are meaningful to their own lives. Because of these factors, similarity between viewers and characters usually leads to higher levels of identification (K. Y. Huang et al., 2024). As a result, participants can have more emotional engagement with such characters who share similarities. This suggests that emotional engagement is not only about surface traits but also includes shared experience or the inner world of the character, so such emotional connections can cross cultural boundaries. For example, some respondents find characters with the same personality traits or life experiences attractive:

> "I think it makes sense. You understand them better if you share something in common. Like with Friends and Phoebe, I really relate to certain aspects of her. That free-spirited way she approaches life

> definitely comes from her childhood experiences, so it's not separate from who she is." (Interviewee 6)

> "Right, I believe if there's some overlap, it could be a quality your family or friends don't appreciate in you, or maybe something you don't have yet but see in that character, the person you want to be." (Interviewee 3)

Moreover, interviewee 2 mentioned that even small similarities can evoke identification, such as a short plot or scene:

> "It might not even require big similarities, maybe just one point in the story, one subplot or short scene that really resonates with me. That's enough to move me." (Interviewee 2)

Seeking difference

While some viewers like characters who are similar, others may find 'excitement' in characters with experiences that are very different from their own. In other words, contrary to identifying with similar characters, some viewers prefer different characters or fantasy scenarios, as the interviewee mentioned the different effects of similarity:

> "I feel there can be two sides: sometimes a character has things in common with you, so you resonate; other times you feel a huge distance, which can also be fun, like a contrast. I guess it also depends on what kind of mental illness it is. If it's someone severely depressed, they might not want to watch more depression, but some do look for that sense of communion. Meanwhile, if it's multiple personalities, the audience might just enjoy that 'thrill' or revenge or contrast they don't get in their own life." (Interviewee 5)

As a result, some participants seek not similarity, but a difference or relief. As Johnson et al. (2016) suggest, narratives let us step beyond our own experience to gain relief from the "constraints of the everyday".

Avoiding Characters Who Are "Too Similar"

Some participants mentioned that they deliberately avoided characters whose struggles are similar to their own. For instance, Interviewee 1 mentioned that she would not watch something that resembled her own experiences:

> "If it were me, I might not want to watch something that's too close to my own experiences." (Interviewee 1)

This avoidance indicates that similarity can also make audiences withdraw when it evokes unpleasant emotions. From the viewer's perspective, viewing experiences that cause an increase in subjective stress are likely to cause them to change their position and distance themselves more from the text and the characters (Cohen & Klimmt, 2021). So, it may trigger personal distress if a character's situation becomes too similar to that of the audience. Being too 'close' to a character with mental health challenges can be the risk of triggering unresolved emotions or personal distress. When viewers are reminded of painful experiences, particularly those involving mental health challenges, the viewing experience may become overwhelming rather than resonating.

Also, interviewee 4 did not consider similarity to be a factor, as there was no similarity between himself and the character he liked:

> "In my case, there aren't many similarities between me and those characters. For me personally, I just don't find much overlap." (Interviewee 4)

As a result, perceived similarity can influence participants' emotional engagement with characters with mental health challenges in Anglophone TV series. Viewers are more likely to emotionally engage with the characters when they have a shared feeling or situation. Besides, those who seek excitement can seek differences instead of similarities. However, similarity also may trigger discomfort and cause some people to disengage from the character. As discussed in Chapter 6, the impact of perceived similarity on audience engagement can be related to audience expectations of the gratification they seek from the characters. When they seek the aesthetic pleasure of fictional narratives, similarity to the characters is no longer a key factor. Similarity increases the audience's emotional engagement when they seek personally integrated needs for self-awareness. Stories do allow the individual to transcend themselves, to find relief from the inevitable limitations of individual personhood, which makes entertaining narratives play a role in the psychological well-being of the self (Johnson et al., 2016).

Trauma Description

Traumatic experiences are a frequent element in Anglophone TV dramas, often used to explain the causes of characters' mental health challenges. As discussed in the text analysis in Chapter 4, many Anglophone dramas depict childhood trauma, such as witnessing mother's suicide or being abandoned, as the primary cause of the protagonist's mental health challenges. These depictions often involve explanations based on trauma, attachment and genetics. For example, the trauma experienced by James in *The End of the F**king World* and Beth in *The Queen's Gambit* is not only portrayed as a plot device but also to illustrate the connection between personal loss and their mental development. Traumatic experiences can alter a person's self-perception, thereby undermining the mutuality between the internal world and external reality (Ozturk & Sar, 2006). According to APA (1994), people who have been exposed to an extremely traumatic event, such as witnessing a death, having one’s life threatened, or enduring serious injury, may develop a set of symptoms known as posttraumatic stress disorder (PTSD). In Chapter 5, it was mentioned that some interviewees relied on professional diagnoses and observable symptoms to identify mental health challenges in these characters, many of whom were familiar with PTSD specifically. Therefore, the depiction of trauma makes the mental development of the characters more realistic and reasonable, which has both positive and negative effects on participants. Some interviewees believe that the depiction of trauma enhances their empathy and understanding of the characters, while others believe that this depiction of trauma has become a cliché. They think that there are more interesting depictions of characters with mental health challenges than trauma, especially villains.

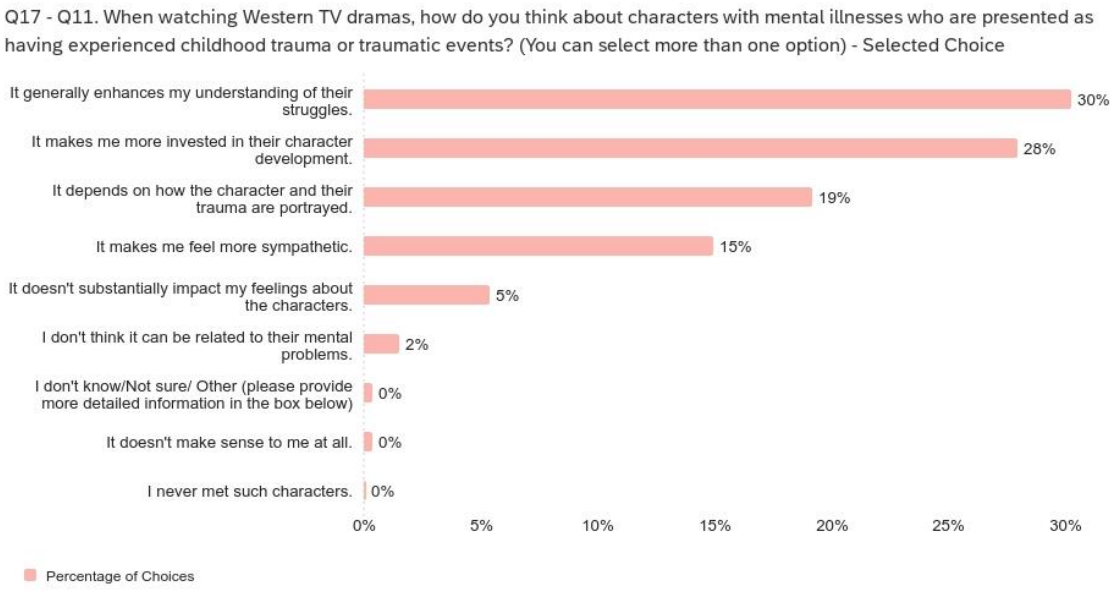

Figure 7.1 Trauma of Characters

As we can see in the figure, the majority of respondents (30%) said that knowing about a character's childhood or traumatic background usually increased their understanding of that character's struggles, and a further 28% said that it made them more invested in the character's development. 19% of respondents felt it depended on how the trauma was portrayed, with 15% saying that knowing about a character's difficult past directly led them to empathise more with them. Only 5% said that the backstory would not have a significant impact on their feelings, and 2% felt that the trauma was unrelated to the character's mental health. These suggest that the majority of viewers are more engaged or empathetic when a character's mental health challenges are linked to a traumatic experience, while some consider that the quality or depth of characterisation is more important.

Positive Effects: Enhancing Understanding and Empathy

As the figure shows, some participants respond positively when a character’s mental health challenges are linked to traumatic experiences. For many respondents, trauma descriptions enrich character depth and lead to greater empathy and identification. Learning about a character’s childhood or traumatic experiences increases their understanding of the character’s struggles, which can improve their empathy and engagement, as respondents mentioned:

> "When I watch American TV shows, I focus more on the plot, so when I see a character with mental health issues, I naturally try to look back at what caused them. Plus, there's currently a lot of discussion about family-of-origin issues in society. Personally, I feel that Monica's teenage eating disorder in *Friends*, and Peter's schizophrenia in *Horace and Pete (2016)* both illustrate this, one in a subtle way and the other more directly." (Respondent)

> "All childhood trauma evokes my sympathy." (Respondent)

Besides, for some audiences, traumatic depictions are important to creating believable and dimensional characters. Respondents said that carefully constructed backstories of trauma, such as a character's experience of domestic abuse or emotional neglect, made the character seem more real and vulnerable. One respondent said:

> "It better fits the psychological development patterns of the character, it's more reasonable. For example, in Killing Eve, there's a female assassin who is obsessed with women who have black curly hair because her first love had black curly hair." (Respondent)

> "Take Melrose, learning that he was abused by his father. Generally, I find such characters richer, more three-dimensional, and more vulnerable, which increases my fondness for them." (Respondent)

Moreover, another participant explained that the connection between trauma and character behaviour could be divided into explicit factors such as clear instances of abuse, and implicit factors such as subtle cues that reveal characters' traumatic experiences:

> "I think it's an indispensable part of the script. Maybe it's just to help me understand why the character went mad. But how to put it…I think this connection can be divided into the explicit and the implicit. The explicit might be, for instance, someone who was abused as a child or had family members with violent tendencies. That kind of direct influence can mean you handle things violently. The implicit influence might be that some people control themselves quite well, but at certain unguarded moments, they still reveal the effects of what they experienced in childhood." (interviewee 6)

This distinction shows how the trauma description can enable the viewer to better understand why the character is behaving violently or defensively, thereby increasing their overall engagement with the story.

Negative Effects: Overuse and Cliché

Despite these positive effects, some viewers consider that it has become cliché to use trauma to explain mental health challenges, which tends to weaken the audience's emotional engagement with these characters. For example, an interviewee believes that the idea that 'trauma causes mental health challenges' has been overused and has become boring:

> "I feel it's a bit boring. It's been overused. But I think some mental illnesses aren't the kind caused by trauma. I think it depends on the show. In some shows, from the start, the premise is that this person has a mental illness, but they don't tell you why because it's not important, it's unrelated to the plot. But in others, they specifically tell you the reason for the mental illness. I personally lean more toward the former. In that case, they just have a mental illness, and I can't really explain it to you. It's just mental illness." (Interviewee 5)

Another interviewee also mentioned that too many trauma descriptions make characters lose uniqueness, as they become predictable and formulaic:

> "But I feel that characters like this, who are perverse, are often described as having some kind of trauma or family trauma. I feel there are so many such tropes that it doesn't really make sense to me anymore." (interviewee 3)

She thinks that the trauma description may affect her emotional connection with the character, but it is not a significant factor:

> "If they do have that kind of past, it might allow me to form more of an emotional connection with the character. But if they don't have it, and I like them for other reasons, it doesn't really affect how I feel about that character." (interviewee 3)

In addition, she mentioned a contrasting portrayal of trauma, which she found more interesting and engaging:

> "Then, recently I've been watching *Person of Interest*, which has a hacker named Root. They are the kind of character who, right from the start, will do anything to achieve their goals, even kill without psychological burden. In this show, that character is quite unique. At one point, when they kidnapped the main character and started chatting, you might think the next step would be for them to say, 'I have some childhood trauma that made me like this.' But instead, the character mocks the audience's expectation and says, 'No, my family was really happy; I just want to do bad things.'" (interviewee 3)

As a result, trauma descriptions in Anglophone TV dramas have a dual impact on participants. On the one hand, detailed portrayals of childhood trauma and family-of-origin issues can enhance understanding, evoke empathy, and enrich character complexity and thus contribute to the deeper personal integration gratification discussed in Chapter 6. On the other hand, too many traumatic depictions may become clichéd and boring, reducing the audience's emotional engagement.

Aesthetic and Narrative Choices

Aesthetic choices can also influence participants' emotional engagement with characters with mental health challenges in Anglophone TV series. According to Gorton (2009), emotion is the means by which television holds and orients its viewers, which is actively fashioned, constructed and valued by producers, writers, and the text's aesthetic properties to cultivate and sustain the emotional engagement of an otherwise distracted, domestic audience. Gorton's (2021) *Handmaid's Tale* article on resilience directly extends this method, analysing voice-over, "resilient pauses," mise-en-scène and musical score as devices that "invite" viewers to feel characters' experience. As analysed in Chapter 4, *The End of the F***king World* and *The Queen's Gambit* present the subjective perspectives of their protagonists and visualise their psychological constructions to invite audiences' emotional engagement. For James, inner monologue, set design, camera direction, acting style and more are used to display his differences, and for Beth, there are illusory aesthetics, close-ups, sound design, lighting and camera angle. Some studies identify audiovisual techniques that illustrate how a character with mental illness is presented differently than other characters, such as the individual point of view, close-up shots, discordant music, atmospheric lighting, setting selection and scene juxtapositions (Pirkis et al., 2006). In this section, I explore participants' responses to aesthetic choices such as lighting techniques, editing, surreal or symbolic elements, and other stylistic choices used to represent characters' mental health challenges in Anglophone TV dramas.

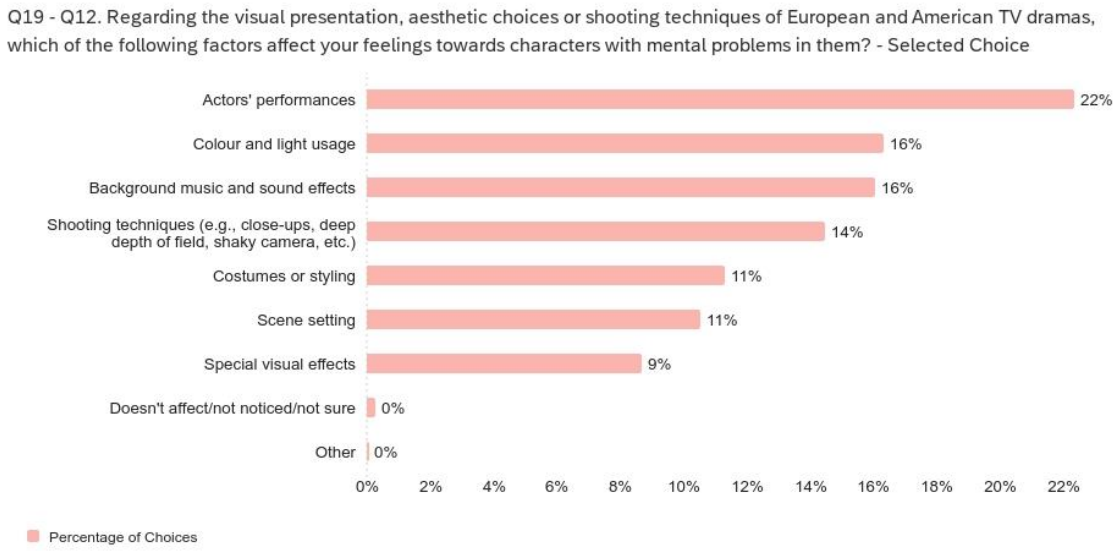

Figure 7.2 Visual presentation

As we can see from the Figure 7.2, among the visual and aesthetic factors affecting the participants' feelings about the characters with mental health challenges, the actor's performance is the highest (22%), followed by colour/lighting and background music/sound effects (16% each), filming techniques (14 %), costumes/styling and set decoration (both 11 %), and special visual effects (9 %). No respondents chose 'no impact' or 'did not notice', suggesting that these elements tend to influence the participants' feelings about characters with mental health challenges in Anglophone TV series to some extent. The actor's performance was identified as the most influential factor, aligning with Cantrell and Hogg (2018)'s argument that the actor's portrayal of a character within a dramatic context is constitutive of television meaning. In representations of mental health challenges, how actors embody psychological states through facial expression, stillness, or behavioural shifts becomes important for audiences' access and response to characters' inner worlds.

Positive Influence of Aesthetic Choices

Empathy with characters is influenced by shot scale, with closer shots of the face increasing empathy, mental state references, emotional intensity, and emotional accuracy, while music further facilitates emotion recognition (Bálint et al., 2022). For example, a respondent mentioned a key scene from *Killing Eve* showing how the actor's performance, especially in close-up, conveys this

character's internal state and thus influences the audience's emotional engagement:

> "In *Killing Eve*, the female assassin Villanelle goes back to her family to trace her roots. After a brief warmth, she returns to her true nature overnight: out of anger and frustration, she burns all the adults in the family to death. The night is deep. From Villanelle's face to the field and the background, it's not dark and gloomy, but rather a familiar, comforting blackness that can conceal and offer escape. The blast of the flames is abrupt, breaking the peace, making people uneasy. Because my ability to appreciate artistic techniques is limited, I don't really have any particular opinion on the filming artistry. Most of the time, I just savour the silence, awkwardness, hesitation, dissatisfaction, or happiness expressed on the actor's face." (Respondent)

This response demonstrates the 'intimate screen' quality of television discussed by Cantrell and Hogg (2018), where the close-up of the face becomes the primary site through which viewers access a character's inner world. As discussed in chapter 4 about Anya's performance in *The Queen's Gambit*, television acting operates on a smaller scale than theatre or film, and meaning is constructed through minimal gesture and subtle shifts in expression. This respondent's focus on the emotions on Villanelle's face suggests that even viewers who do not consider themselves attentive to techniques are nonetheless responding to the intimacy that television's formal qualities construct.

Also, bold character modelling can also reflect a character's state of mind, such as exaggerated make-up and clothing. One interviewee mentioned such strong aesthetics as an extension of the character's identity:

> "I once watched *Cruella* and really liked her. I think half the reason is her style, the way she presents herself… She might use rather exaggerated makeup and costumes, the kind you'd never normally see on the street. Another example is the Joker in *Gotham*, who wears very exaggerated clown makeup." (Interviewee 3)

As I mentioned in Chapter 4, there are many close-ups and exaggerated looks in the *Queen's Gambit* to show Beth's mental shifts at different times.

In addition to actor performance and styling, lighting techniques, editing and scene transitions can also influence audience engagement with a character's mental health challenges. Some respondents mentioned that they were

impressed by elements such as half-lighting and half-darkening of faces, novel editing methods or colour changes reflecting changing moods:

> "In *Fleabag*, light is cast on half of the stepmother's face, leaving the other half in shadow." (Respondent)

> "The editing in *Sherlock* is very novel to me, making the reasoning process very interesting." (Respondent)

> "In *Modern Love*, whenever Anne Hathaway's mood drastically changes, the outdoor setting seen through the window also changes each time." (Respondent)

> "Flashback memories come with transitions that are almost seamless." (Respondent)

Besides, an interviewee mentioned impressive, surreal or symbolic elements in Anglophone TV series that visually externalise a character's subconscious desires or fears:

> "Take *Twin Peaks*, for instance, it has a lot of surreal elements. I think David Lynch is very skilled at using Freudian concepts in his filmmaking. He may take certain psychological ideas and translate them into something tangible. For example, there are many mysterious spaces in *Twin Peaks*, like the Red Room and other inexplicable things. Although they're surreal, I think they represent certain human desires or dark aspects, presented visually. Within the show, it feels like a force of heightened reality, a certain kind of power. And as you know, David Lynch isn't going to explain what they actually are. Perhaps it's just the dark side of the world." (Interviewee 4)

These responses reflect how aesthetic choices can represent psychological depth. Although aesthetics can be important, these techniques tend to support rather than replace the narrative which still drives the drama forward. As Lury (2005) argues, television's formal properties, including sound, image, mise-en-scene and the close-up, function as carriers of emotional meaning, creating a televisual aesthetic through which viewers access characters' psychological interiority. This is significant in dramas depicting mental health challenges, where internal states can be visible through aesthetic choices rather than only dialogue. The choices of lighting, sound and symbolic space can become important factors that influence how the dramas represent madness and how the viewers feel it. When television uses aesthetic techniques to portray a

character's psychological state, it can visually promote emotional engagement and allow viewers to feel the madness directly. Therefore, the aesthetics of Anglophone TV dramas are important not only for their artistic value, but also because they influence how participants emotionally and intellectually engage with mental health narratives.

Negative Perceptions of Technical Choices

However, not every viewer responds positively to aesthetic choices or shooting techniques, and in some cases, these choices can be disengaging for the viewer. Some respondents consider that such portrayals are too stereotypical and exaggerated to convey characters' mental health challenges in Anglophone TV series. It may reinforce stereotypes rather than improve emotional engagement through overly dramatic camera angles, sound effects, or exaggerated performances. Although this study focuses on Anglophone TV dramas, several participants referred to films when discussing mental health portrayals. This reflects how audiences often engage with film and television as part of a shared narrative environment, where the boundaries between the two media are blurred. Participants also discussed how different forms of film and television have influenced them, which will be discussed in Section 7.3.

An interviewee felt uncomfortable because of some of the overly stereotypical filming techniques for the character's mental health challenges:

> "Some scenes left a deep impression on me, and some were portrayed very poorly but still stayed in my memory, like depicting them as if they're mentally ill. *Silver Linings Playbook* is a movie featuring Jennifer Lawrence and Bradley Cooper. The two of them, well, one was striking a pose, and the other was doing something else. I can't quite recall. But basically, they were just yelling at each other all day. I feel it's quite a stereotypical portrayal, and it's unpleasant to watch." (Interviewee 1)

As Interviewee 1 mentioned, she avoids films that seem "overly stylised":

> "For example, I know there was a film about schizophrenia, but I haven't watched it. Maybe I'm just not that interested. I feel that kind of portrayal is overly stylised or a bit too exaggerated." (interviewee 1)

In addition, not every viewer pays attention to televisual techniques, which is also a reaction to aesthetic technique. For example, interviewee 5 expressed a lack of awareness: “I haven’t really noticed those things.” Meanwhile, another respondent noted a more negative reaction: “I hate flashy lighting and other visual effects.” (Respondent)

These responses suggest that aesthetic elements can enhance emotional engagement for some viewers but diminish it for others. Some viewers responded negatively to the visual representation of mental health challenges due to what they perceived to be stereotypical or exaggerated depictions, while others expressed a more general disapproval of techniques such as lighting and special effects. The former reflected a critical awareness of representational choices, while the latter indicated a lack of interest in or resistance to aesthetic techniques. Overall, these findings demonstrate the interplay between characters' mental health challenges, aesthetic choices, and audience reception, contributing to a better understanding of participants’ emotional engagement with these characters.

7.3 Effects on Participants ' Perception

While the first two sections of this chapter explored the emotional responses of participants, this section returns to the impact of cultural differences. Although participants' emotional engagement with these characters may transcend cultural boundaries, these characters are also shaped by culture. Participants react emotionally to characters in Anglophone TV series not because culture is irrelevant, but because these TV series portray mental health challenges in unique ways that resonate cross-culturally. Thus, cultural differences are not a barrier to emotional connection, but rather an opportunity that makes such reactions possible through these particular characters. This final section synthesises the analysis of the engagement processes from the previous chapters to discuss how these roles influence participants. I will examine how their interpretations, gratification experiences, and emotional engagement during their interaction with these characters have gradually influenced their perceptions of mental health challenges.

Characters with mental health challenges in Anglophone TV dramas have an impact on participants' perceptions. Those who spend more time watching television are more likely to perceive the real world in ways that reflect the most common and recurrent messages of the world of fictional television (Morgan & Shanahan, 2010). In other words, media messages “cultivate” certain ways of seeing the world, but the process is slow and subject to a range of moderating factors (Morgan & Shanahan, 2010). Although the effects on attitudes and self-perceptions are generally modest, they are not trivial. As respondents mentioned, Anglophone TV portrayals can heighten awareness, prompt self-reflection, or slightly alter views on mental health challenges, even if these changes do not dominate viewing choices or radically transform beliefs.

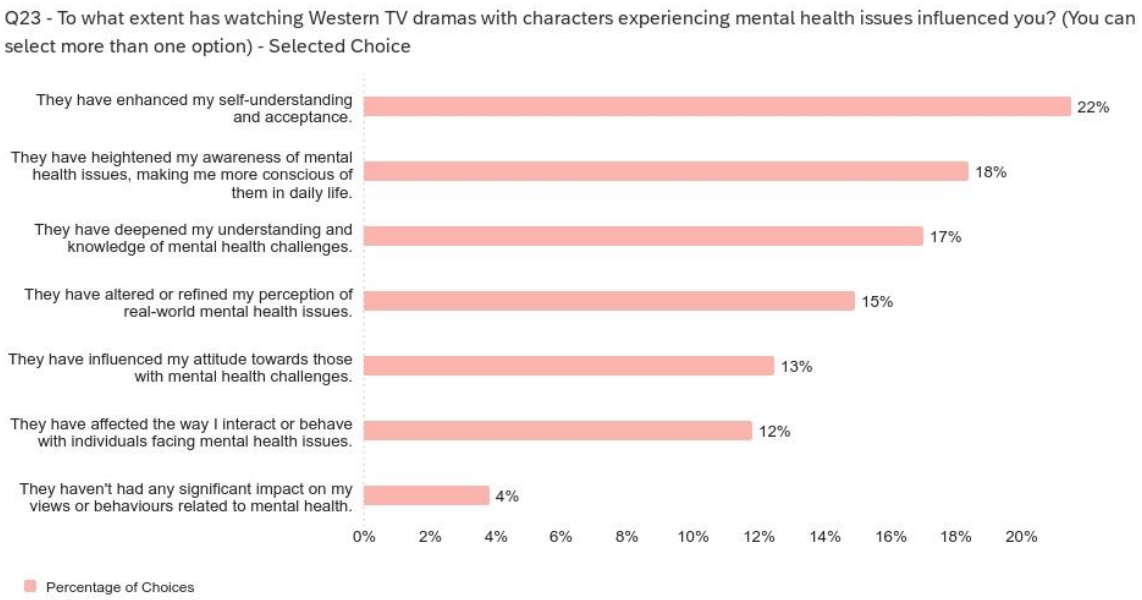

Figure 7.3 Effects on audience perception

From the figure, most respondents felt that watching Anglophone TV dramas with such characters had some impact on them. Fewer than 4 % of respondents reported no effect at all, while the others reported at least one effect: self-understanding (22 %), increased awareness (18 %), deeper understanding (17 %), or shifts in perceptions and attitudes (between 15 % and 13 %). While no one effect was overwhelming, the distribution suggests that most people experienced a modest shift in how they viewed mental health challenges or themselves. To be specific, these impacts tend to produce a meaningful shift in

participants' awareness, understanding and attitudes towards mental health challenges.

The way audiences respond to characters with mental conditions can also be associated with their perception or behaviour change. If viewers develop an affective bond with a character who disconfirms generally held stereotypes of a stigmatised group, their beliefs, attitudes, and behaviours may change (Schiappa et al., 2005). Therefore, characters with mental health challenges in Anglophone TV dramas could have an impact on participants ' perceptions. In this section, I primarily explore the effects on perception and interpretation, and the shifts in how participants describe their understanding of mental health or themselves after watching these dramas. The research data focuses on participants' self-reported reflections and changes in perspective, rather than their direct behaviour. Therefore, my discussion about influence here centres on viewers' perceptions of changes in mental health.

Effects on Mental Health Perception

Anglophone TV dramas have influenced participants ' perceptions of mental health challenges. On one hand, television plays a crucial role in cultivating a virtual cultural public sphere and can shape viewers' perspectives, whether positively or negatively (Hyler et al., 1991). Scholars have proposed that watching American television can influence Chinese audiences' attitude on both sides (Gao, 2016; Y. Huang et al., 2019; Wu, 2015; Xu, 2018; Y. B. Zhang & Harwood, 2002). Chinese audiences who watch American dramas may more positively accept and identify with American values (Xu, 2018). For example, American television drama consumption can shape Chinese audiences' perception of gender roles (X. Zhang & Su, 2021). American TV dramas show different values of gender roles from Asian dramas by depicting women's independence. Viewers' identification of sexism and gender-role norms in marriage is weakened when they consume more American dramas than Chinese domestic dramas, but their identification is improved when they consume more Korean dramas than Chinese dramas (X. Zhang & Su, 2021). In this study, I examine participants' interpretations, gratifications, and emotional engagement with characters with mental health challenges in Anglophone TV series, further exploring the cultural influences on the mental health perception of participants.

On the other hand, the effect size would be considered small in many dimensions, and there are good reasons to expect that it would not be larger (Hermann et al., 2021). These effects will not affect viewers' behaviour or fundamentally change perceptions, as Cultivation effects can be recognised as first-order and second-order effects. First-order effects tend to be perceptions of reality, while second-order effects are reflected in judgments, attitudes, or values of reality (Gerbner et al., 1986). Second-order effects are related to First-order effects, as judgments formed by second-order effects can be based on perceptions formed by first-order judgments (Shrum et al., 2011). In other words, these effects on mental health challenges only work at a perceptual scale and do not change people's behaviour when they happen at the first-order level. However, impacts on perception are also of great importance. As Gerbner stressed, “A barely perceptible shift of a few degrees average temperature can lead to an ice age or make the desert bloom. A slight but pervasive tilt in the cultural climate can have major social and public policy implications” (cited in Hermann et al., 2021)

These influences on perception are reflected in the audience's engagement process. Several participants mention that engaging with characters who have mental health challenges helps them think through their own feelings or experiences, showing their highly conscious and deliberate processes of self-reflection. This suggests that perceptual influence can be active and intentional, rather than passive or unnoticed. As discussed in Chapter 6, it is evident how these influences manifest through uses and gratifications of Anglophone TV dramas by participants:

> "I often watch those shows and feel that they have issues, and I project it onto myself, thinking, 'Do I also have this illness?' I think when I was watching the one about bipolar disorder, I searched about the illness and thought, 'Do I also have bipolar disorder?' Like sometimes I'm energetic for a while, and then sometimes I just want to stay at home lying down." (Interviewee 5)

> "I think the impact on me might be that I'll reflect on things in life. I might pay more attention to their reasons, the causes behind their issues. Like in *BoJack Horseman*, his life is actually terrible. Yes, that's a good example. And maybe there are things in it that make me think, like, how to say, for example, BoJack's unhealthy lifestyle and his thoughts, I might reflect on whether I've had similar thoughts in my life." (Interviewee 4)

Anglophone TV dramas can be a special source of cognitive gratification for some participants interested in mental health challenges, especially when Chinese TV dramas lack the relevant portrayals:

> "There are very few characters with mental problems in domestic dramas. Personally, I feel that the portrayals in Chinese TV dramas are either too sentimental or too stereotypical and lack diversity." (Respondent)

> "I think it mainly lets people know that it corresponds to some traits, although exaggerated, and it lets you know that there are such mental illnesses in the world. It opens your eyes, that kind of feeling." (Interviewee 5)

> "It might sound childish, but it's true. Through entertainment works, I get to understand the thought processes of mental illnesses (even though they're artistic representations), which helps me think about myself to some extent." (Respondent)

Through these fictional characters, participants can learn about diagnostic categories, treatments, and coping strategies, as well as explore alternative perspectives that differ from mainstream Chinese portrayals. These narratives can also broaden awareness, stimulate self-reflection, and occasionally inspire professional or artistic pursuits. Besides, the portrayal of characters with mental health challenges in Anglophone TV dramas meets participants' personal integrative needs by prompting self-reflection, enhancing self-understanding, affirming personal identity, and offering psychological compensation. Through these processes, some Chinese audiences not only to entertain but also to make sense of their own lives. These integrative gratifications influence viewers' identities, especially in a cross-cultural context where local media representations may be limited or stereotypical. So, participants can consider Anglophone TV dramas as a unique space to entertain, explore, validate, and sometimes compensate for aspects of their own needs, thereby contributing to such meaningful influences on their perceptions of mental health challenges.

Furthermore, the effect of Anglophone TV dramas on participants can be moderated by many other factors. American TV dramas can be foreign symbolic materials for Chinese audiences to reflect their own identity and life (Gao, 2016). Chinese viewers actively engage with television content rather than passively accepting it. They interpret overt and hidden meanings, reconstructing

the understanding of series based on their personal experiences (Xu, 2018). Viewers' perceptions of traditional values are not completely undermined, as they can integrate aspects of American values into the Chinese cultural context without changing their cultural identity (Xu, 2018). My research confirms this, and for the respondents in this survey, Western and Chinese ideas about mental health challenges can also be integrated rather than opposed. This is reflected in how participants understand and interpret such portrayals in Chapter 5. Rather than passively accepting the portrayal in the Anglophone TV series, the interviewees negotiated interpretations based on their own identities and experiences. For example, "The mad genius and gifted artist" is a recurrent theme in Western TV, which often associates characters' special talents or powers with their mental health conditions (Beirne, 2019). Compared to accepting it all or rejecting it all, participants may accept the relationship between extraordinary abilities and mental issues, but interpret it differently from the portrayal in Anglophone TV dramas:

> "I think it's the opposite: his super abilities led to his mental issues. For instance, some people have extraordinary intelligence, and then the things they say or do are often not understood by most people around them. As a result, during his growth, he actually feels a tremendous sense of loneliness. For example, no one understands what you're saying, or you don't feel a sense of intellectual satisfaction when communicating with others. Therefore, he may want to do things that are beyond the ordinary, to seek the kind of thing he desires. So, I think to some extent, his abilities or his intelligence are actually the reason for his mental issues. I don't believe it's the other way around. That's what I think." (Interviewee 3)

So, they can obtain information and perspective from American TV dramas to reflect their minds or lives while keeping their Chinese identity (Gao, 2016). As I mentioned in chapter 5, an important consideration is that Anglophone TV series is not the only source of mental health information or influence for participants. Several other factors mentioned by interviewees also influence the viewer's interpretation process. Viewers obtain mental health information from a variety of sources, including television, social media, online videos, and literature, which either reinforce or conflict with the portrayal of mental health in Anglophone television dramas. Personal experiences can influence viewers' perspectives, with those familiar with mental health challenges tending to become more engaged with characters with mental health challenges. Overseas

experiences can also have an impact on the decoding process, which makes some participants more accepting of the mental health portrayal in Anglophone dramas and introduces a critical perspective for others. As a result, these perceptual influences are limited or reinforced by participants' different understandings of characters with mental health challenges in Anglophone TV dramas.

Limited Concerns on Mental Health Themes

Another moderating factor is that viewers do not prioritise mental health–related content when choosing what to watch. Participants don't pay much attention to mental health challenges, which weakens the cultivation effects. The majority of participants focus on plot quality, familiar genres, or strong reputations ("good ratings") over thematic depth. Hence, while portrayals of mental illness might spark mild curiosity or interest, they often remain secondary considerations. This limited direct focus on mental health weakens the possibility of immediate, powerful attitudinal change.

For example, although some viewers find characters with mental health challenges interesting, they do not take them as a significant factor influencing their viewing choice:

> "I like funny stuff, like sitcoms. I'm into those 'foolish' characters, the ones who seem like they're not quite right in the head, they go wild, they do unexpected things. For instance, the female lead in Fleabag does stuff you'd never expect from a normal person. But honestly, I'll watch anything that gets really high ratings. I've noticed those mentally off-beat characters can give a show that surprising vibe in its plot structure." (Interviewee 5)

> "It doesn't really affect me. But I might still get curious if it's a topic I'm interested in. For example, if there's a writer, a writer with a mental health problem, then I'd think, 'I could check it out.'"(Interviewee 4)

After that, others tend to care more about ratings, plot, and other factors rather than mental health themes. Some respondents mentioned that overall quality is more important, such as plot quality, genre preferences, or good ratings:

> "No, it (a mental-health role) won't be my main reason. Honestly, I haven't paid specific attention to mental illness. Sometimes I encounter such a character, then I might read some analyses and realize, 'Oh, they have a certain personality tendency or something.' If that resonates, I might think, 'I once had that tendency, too…' But overall, I still prefer shows that lean toward drama." (Interviewee 2)

> "I watch for the plot, not because a character has mental issues… If the plot isn't good, who'd bother just because it features a mentally ill character? The writer might add that condition to make the role more fleshed out, but it's still the overall storyline that matters." (Interviewee 6)

> "Basically, I'll watch anything that gets good word-of-mouth, since I'm studying film. I don't pay special attention to who's mentally ill. I just look at how well people say it turned out." (Interviewee 1)

Also, according to the online survey, the participants tend to be experienced audiences of Anglophone television dramas who generally prioritise compelling narratives and familiar entertainment factors over specific themes like mental health. A majority (67%) report watching Anglophone TV series "often," and a further 27% do so "occasionally," suggesting that they have a wide experience of watching Anglophone TV series. Most respondents have also been following Anglophone television for a relatively long time: nearly 40% for over ten years and about 25% for 7–10 years. This suggests that respondents have a relatively high level of familiarity with Anglophone TV dramas. When asked about their viewing motivations, the largest share (42%) prefer series that allow them to focus on plot and engaging situations, followed by 18% emphasising "interesting situations" and 16% looking for deeper exploration of character psychology. Although some respondents (24%) identify as dedicated fans who keep up with popular series or return to favourites, another 20% consider themselves more casual viewers. However, concerning mental health portrayals, the impact on viewing decisions appears limited: half the respondents (50%) say such characters do not affect their choices, while around 29% are "more likely to watch," and an additional 19% "actively seek out" TV dramas featuring these storylines. Only a small fraction (1–2%) avoid or watch fewer shows for this reason. Hence, while characters with mental health challenges can attract certain viewers' choices, the strongest motivating factors remain plot quality, familiar genres, and the overall reputation of a given series.

This preference shows that the cultivation effects of mental health representations may be limited. As we can see, portrayals of mental health challenges in Anglophone television dramas are rarely the primary motivation for participants to choose them, although they can be of interest or recognition to viewers. Instead, viewers tend to prioritise factors such as compelling plots, familiar genres and critical reviews. On one hand, mental health themes often serve as secondary elements within broader narratives. On the other hand, viewers tend to engage with these characters after watching, rather than choosing them based on such portrayals, indicating a more diffuse and indirect form of influence. As a result, these portrayals may gradually shape participants perceptions over time, through gratification or emotional resonance, rather than change attitudes strongly or immediately.

Television and Film

Although this research focuses on Anglophone TV dramas, respondents frequently referred to both films and TV series when discussing characters with mental health challenges, often without clearly distinguishing between the two. Therefore, this section focuses on how the serial form of television drama may shape audience engagement differently from film, particularly in terms of emotional connection and character attachment, rather than attempting a comprehensive comparison between film and television.

Since the early 1990s, scholars have identified a distinct shift in television drama. Thompson (1996) was among the first to define 'quality television' as a category, characterising it by genre hybridity, narrative complexity and literary ambition. Caldwell (1995) traced how television increasingly adopted a self-conscious visual style, moving away from transparency toward what he termed 'televisuality,' a heightened attention to aesthetic display. Nelson (2013) extended this analysis to what he calls contemporary 'high-end' television drama, examining the production values, narrative structures and cultural status of series. More recently, Mittell (2015) has argued that contemporary television is defined by 'narrative complexity,' a mode of storytelling that challenges conventional episodic and serial forms through sustained, intricate narrative arcs. In this context, “television” refers not to the physical device or distribution platform, but to the medium and form of the serialised drama. Several

interviewees indicated that there was no significant distinction between the films and TV series in portraying mental health challenges:

> “No, I don’t really feel there’s an impact. I don’t care if it’s a movie or a TV show. Nowadays, many TV series are basically just like movies, so from that angle, it doesn’t make a difference.” (Interviewee 3)

> “Is there a difference between film and TV? I don’t think so. Those boundaries are kind of blurred anyway.” (Interviewee 1)

> “Yes, I don’t really separate movies from TV dramas. It’s more about whether the work is good or not. But for American TV, since I prefer those non-everyday-life shows, I choose carefully, maybe something with strong artistic or accurate content. Because American series can be really long, I have to be selective.” (Interviewee 4)

However, there are still undeniable differences between television series and movies, most notably the “temporally extended nature”, although this has also become slightly blurred due to the development of movie sequels and film series (Shuster, 2021). Whether television has become more like cinema, this study focuses on how its serialised form shapes audience engagement in ways distinct from film, particularly in the emotional connections viewers develop with characters over time. As Gorton (2009) argues, television actively constructs emotional engagement through its formal qualities. The serial form's extended temporality intensifies this process. TV series often have longer storylines and more detailed characterisations, which allow the audience to engage with the characters over a long period of time and gain a deeper understanding of them (Rohm et al., 2022). Prolonged exposure to the narrative of a series can increase narrative engagement, which in turn can enhance engagement with the depicted social interactions and thus foster empathy (Rohm et al., 2022). For portrayals of mental health challenges, gradual revelation of a character's inner world may build understanding in ways that a film cannot replicate. As one interviewee noted:

> “There might be an influence due to the longer runtime of a TV series. You can see more of the character’s background and growth, so if a character with mental issues appears in a show, you might spend more time with them and get more details. You tend to like them more easily and for a longer period, right? If that’s what it means, then I agree.” (Interviewee 3)

Similarly, another interviewee mentioned that the format affects their engagement with the story:

> "For me overall, I guess I'm more of a 'series person.' A film is just something I watch like a drama, whereas with a TV series, I tend to take it more seriously, you know?" (Interviewee 2)

At the same time, participants also recognised that quality and characterisation matter than format alone. As an interviewee mentioned:

> "Sure, spending 11 seasons with a character can leave a deeper impression because it's so long. But, for example, 'Joker' also gives a strong impression, even though it's just a two-hour movie. So I wouldn't say it's purely the runtime. If the portrayal is outstanding, if the plot is really well done, it leaves a deep mark either way." (Interviewee 6)

Television series, with multiple episodes and seasons, provide repeated encounters with characters and narratives, increasing the likelihood of conveying specific messages to viewers (Henderson, 2017). Fictional narratives can foster emotional resonance, enabling audiences to interpret social issues, including mental health. So, entertainment television can be effective in shaping viewers' attitudes towards mental health challenges because of its capacity to generate emotional resonance and engagement (Pirkis et al., 2006). As a result, although audiences may not consciously distinguish between film and television, the serial and temporally extended nature of television drama offer a distinctive context for cultivating emotional engagement. Prolonged exposure to characters allows audiences to develop empathy and familiarity, which may influence their perceptions of mental health challenges. Therefore, while the boundary between film and television continues to blur, the structural characteristics of TV dramas can be effective for shaping audience emotional engagement and cultivation effects.

Conclusion

This chapter explores three questions: how participants emotionally engage with characters with mental health challenges in Anglophone television dramas; what factors influence participants' emotional interactions; and how participants' perceptions are influenced by these characters. Firstly, participants' emotional

responses to characters with mental health challenges in Anglophone TV dramas are diverse and intertwined, primarily involving identification, empathy, sympathy, and occasionally fear or caution. Identification and empathy enable participants to see themselves in the characters, often leading to deeper emotional engagement and understanding. It reveals that universal human experiences beneath surface cultural differences can lead to viewers' emotional engagement. Sympathy is another significant response, characterised by viewers' compassion toward characters whose struggles they acknowledge, even without personal experience, indicating a moral concern that transcends culture. Moreover, fear or caution can be another emotional reaction, showing viewers' caution about encountering similar individuals in real-life contexts. Overall, these emotional engagements show that participants can deeply connect with these characters from different cultures through shared emotional and psychological experiences. Additionally, various factors such as narrative context, personal experiences, and professional insights can influence how viewers emotionally interact with characters.

Then, I identified factors influencing participants' emotional responses towards these characters: perceived similarity between viewers and characters, the depth and realism of trauma depictions, aesthetic techniques that invite viewers into the characters' subjective experiences, and the differences between film and television. The audience's emotional engagement is dynamic and can change as the narrative develops, personal reactions or situational factors, and factors in the narrative can also trigger shifts in the audience's position (Cohen & Klimmt, 2021). Perceived similarity can impact viewers' emotional engagement, with audiences identifying more strongly with characters who share their traits or experiences. This similarity fosters empathy and deeper understanding but can also cause discomfort or avoidance sometimes. The depiction of trauma can also shape participants' emotional responses. Detailed portrayals of trauma can deepen viewers' empathy and understanding, making characters appear more realistic and emotionally resonant. However, excessive or clichéd trauma portrayals may reduce emotional engagement. Then, production techniques and aesthetic choices greatly affect emotional connection, such as close-ups, actor performances, lighting, music, and symbolic imagery. These elements can convey a character's emotional state, enhancing participants' emotional

engagement. Nevertheless, overly stylised or stereotypical portrayals may reinforce negative stereotypes rather than understanding.

Finally, characters with mental health challenges in Anglophone TV dramas influence participants' perceptions. Despite significant changes in media forms, television storytelling still has an important relationship with how people perceive the world and cultivation theory remains important (Hermann et al., 2021). Although television is not always the strongest influence on people's ideas, it remains one of the most widespread (Hermann et al., 2021). Respondents tend to mention some degree of influence, such as enhanced self-awareness, deeper knowledge about mental health, or different attitudes toward mental health challenges, even though these influences do not change their viewing preferences or fundamentally change their core beliefs. Participants actively interpret these characters, integrating them selectively into their existing knowledge and beliefs, which can be moderated by factors such as personal experiences, cultural contexts, and exposure to additional information sources. That is, participants actively interpret these characters, integrating them selectively into their existing knowledge and beliefs, while they prioritise factors like plot quality, genre familiarity, and overall production reputation rather than mental health themes when choosing content. As a result, characters with mental health challenges in Anglophone TV dramas can influence participants' mental health awareness and self-understanding, although these impacts depend on narrative quality, viewer engagement, and the complex interplay of cultural, personal, and social factors. From a cultural indicators' perspective, it continues to be valuable to examine how the stories on television we encounter shape or cultivate our perceptions (Hermann et al., 2021). Understanding how television narratives influence our cultural, social, and world views has become increasingly complex (Hermann et al., 2021). My research focuses specifically on how representations of mental health challenges in Anglophone TV dramas influence participants' mental health perceptions across cultural contexts. This is an important implication for television studies, emphasising the importance of more culturally sensitive approaches to audience reception studies.

As a result, these emotional responses are often an essential part of how participants interact with characters with mental health challenges in Anglophone TV dramas. These emotional responses complement the interpretive process in Chapter 5 and the personal gratification in Chapter 6, thus providing a comprehensive understanding of the participants's interactions with these characters. In other words, the emotional responses are related to the audience's interpretation of these characters, and cultural understanding of mental health challenges, and in addition to seeking entertainment or information, the audiences also seek the emotional experience from these characters. Therefore, emotional responses are the result of both understanding and fulfilment, such as the satisfaction of empathising with a character, emotional catharsis, and empathy or curiosity. Also, participants' emotional engagement with characters with mental health challenges is multi-dimensional and influenced by characterisation and cultural perspectives, and these characters have a meaningful impact on viewers' perceptions of mental health challenges. In the following and final chapter, I will integrate all analyses from all chapters, discuss the conclusions, and theoretical contributions of this research.

Chapter 8 Conclusion and Contribution

Introduction

In the final chapter, I synthesise the core findings, insights, and contributions of the thesis, reflecting on the broader implications of this study. In this research, I used a combination of methods for character and audience analysis, including textual analysis, online questionnaires and semi-structured interviews. Combining television analyses and audience research, I provide a coherent overview of how this study has explored the portrayals of characters with mental health challenges in Anglophone television dramas and Chinese audiences' engagement with these characters. The aim of this chapter is not only to summarise but also to situate the findings within a wider academic, cultural and practical framework. This thesis contributes to several fields of scholarship, such as television studies, audience reception, and cross-cultural communication. After discussing the key findings and contributions, I will identify the study's limitations and provide recommendations for future research.

8.1 Key Findings

Patterns and Shifts in Mental Health Portrayal

Anglophone television dramas have undergone a positive shift in their portrayal of characters with mental health challenges. TV dramas containing protagonists with mental conditions are popular both in Western countries and in China. As portrayals of such characters have become increasingly complex, research on the representation of mental health challenges tends to shift from anti-stigma to cultural studies, linking the representation of madness to discourses of race, class, and gender (Black, 2020; Brayton, 2017; Harper, 2009; Cross 2010). Scholars have identified several recurring cultural paradigms used to describe these characters with mental health challenges. As discussed in Chapter 2, Rohr (2015) identifies four categories in the representation of madness, with the emergence of "the mad as normal" marking a significant shift in contemporary television. M. A. Johnson and Olson（2021) develop this category further, arguing

that recent film and television increasingly present characters with mental health challenges who talk openly about their struggles. This makes these characters not only popular and appealing but also more relatable to real-life mental health challenges.

In Anglophone TV dramas, mental health challenges can be the defining character feature in characterisation and driving plots, which is no longer a simple symbol or a short-term setting but a complicated and long-term character trait (McMahon-Coleman, 2021). The appeal of characters with mental health challenges comes from characterisation and television narrative techniques. Characters with mental health challenges who are villains can be understood through antihero narratives in which protagonists' actions are often morally ambiguous, questionable, or even irrational (Janicke & Raney, 2015). According to Shafer & Raney (2012), although they usually act in questionable ways, the narrative may provide reasons to justify their behaviour through different forms of dialogue, innuendo, etc. They can be flawed but good-intended, lone wolves who defy authority, criminals but redeemable, or bad guys with a noble goal (Shafer & Raney, 2012). Besides, according to Beirne (2019), there is a "superpowered supercrip narrative" of "mad genius" in television drama, which means that the abilities and powers of such characters in fictional works (novels, films, television series) are directly related to their disabilities. Specifically, the talents of these genius characters directly stem from their mental health challenges, so they must endure personal suffering to obtain and maintain their abilities, such as Sherlock in *Sherlock*, Carrie in *Homeland*, Daniel in *Perception*, and Will in *Hannibal*. Moreover, television narrative techniques engage the viewer in the character's subjective experience through television's close-ups, acting techniques, and sound design while consistently enhancing the viewer's identification with the character through long screen time and narrative immersion (Stadler, 2017).

My research validates and expands upon this existing academic perspective by proposing that attachment theory and trauma narratives operate as narrative tools for framing characters with mental health challenges. I further propose a positive paradigm shift regarding the characterisation of ‘madness and genius.’ Previous literature often suggests that madness and genius are inseparable, that

brilliance emerges as a direct result of mental instability (Beirne, 2019). However, my analysis of Beth Harmon's character challenges this view. Through the survey of Chinese participants, I confirm the validity of this description and shift in a cross-cultural context.

Firstly, through attachment theory, these TV dramas construct the causes, symptoms, diagnosis, and cure of the characters' mental health challenges, creating a genuine connection between the characters and the audience. As representations of characters with mental health challenges grow more layered and nuanced, my research specifically focuses on attachment theory as a narrative mechanism that assigns emotional cause and effect to character behaviours. This psychological framing not only builds empathy but also influences the viewer's interpretation and reflection of characters' mental health challenges. Current television research has not yet fully explored the psychological construction of characters through attachment theory. Contemporary Anglophone TV dramas demonstrate this trend, as exemplified here by *The End of the f***king World Season 1 (UK, 2017)* and *The Queen's Gambit (USA, 2020)*, in which the two main characters are a villain and a genius, while they present the common struggle of mental health challenges in normal daily life. These portrayals still resonate with the classic tropes of mental health challenges in media: the mad as villain, genius, or the normal. James and Beth are depicted not merely as 'the mad' but as multifaceted characters shaped by abandonment, isolation, and grief. Besides, they discuss a common psychological logic of reality despite having different stories, settings, and symptoms, which can be understood by attachment theory and trauma. The elements in these two dramas tend to identify the links between the insecure attachment pattern and mental health challenges, involving unresolved childhood trauma, emotional detachment, violent offending behaviours, and substance abuse. What is more, both series offer more detailed narratives by combining mental health challenges with aesthetic strategies such as close-ups, surreal visuals, and symbolic design. I confirm the existing academic view that mental health challenges in Anglophone TV dramas have evolved into defining character features that drive plot development, rather than serving merely as symbolic or short-term traits (McMahon-Coleman, 2021). My research illustrates a positive shift in these portrayals and further proposes attachment theory as a valuable

framework for depicting characters with mental health challenges in greater depth. While such psychological depth can enhance character complexity, it can also complicate identification, particularly for audiences who have different experiences or cultural backgrounds. However, this complexity also creates space for more forms of engagement and emotional resonance.

Secondly, Beth Harmon in *The Queen's Gambit (USA, 2020)* overcomes her addiction without losing her talent, which is a positive paradigm shift about "madness and genius." Previous literature often suggests that madness and genius are inseparable, or brilliance emerges as a direct result of mental instability (Beirne, 2019). In the classic framework, the mad characters can be portrayed as geniuses who usually have certain unique talents or gifts, such as brilliant mad scientists, artists or detectives (Rohr, 2015). A key trend with these characters is that their special talents or powers are associated directly with mental health challenges, which give them both extraordinary skills and trouble in life (Beirne, 2019). Through narrative elements and characterisation, this paradigm generally sets up a dichotomy between enhancing extraordinary abilities and alleviating mental health challenges (Beirne, 2019). To be specific, these characters all use their skills to accomplish valuable work, but when they take medication to manage their mental health challenges, both their usual symptoms and abilities are diminished, which means that their high-level professional performance is inextricably linked to their mental health challenges (Beirne, 2019). When their genius is often portrayed as inseparable from their mental health challenges, it reinforces a negative implication that talent seems to depend on mental health challenges. In other words, it can romanticise mental health challenges to audiences. *The Queen's Gambit* also explores the story of a genius with mental health challenges, but it disrupts the dichotomy of talent versus mental well-being. In Beth's case, her brilliance is not portrayed as a product of her psychological struggles. Instead, the series gradually separates her mental health challenges from her talent, framing them as personal struggles that require care and healing. Crucially, when Beth confronts her trauma and overcomes her substance dependence, she doesn't lose her genius, and she thrives. Her ultimate victory shows that brilliance does not have to come at the cost of mental health, marking a positive narrative shift.

Then, according to the results of audience research, these depictions and transactions have an impact on participants' engagement, including aesthetic pleasure and mental health knowledge. As mentioned in Chapter 7, on the one hand, it increases Chinese viewers' emotional engagement with characters with mental health challenges in Anglophone TV series through personal experiences. On the other hand, the extensive use of some trauma descriptions may be clichéd for Chinese viewers, thereby reducing engagement. The positive shift of the "madness and genius" is also important to the participants' engagement with the characters in this study. To be specific, in *The Queen's Gambit*, Beth's genius is not rooted in her struggles but survives despite them, while characters like Sherlock Holmes are often depicted as brilliant because of their instability. The narrative allows Beth to grow psychologically while retaining her talent, offering a positive shift: one where the audience can admire brilliance without romanticising suffering. This shift plays a crucial role in audience engagement. As mentioned in Chapter 6, audiences can gain mental health knowledge and cognitive gratification from Beth's positive portrayal. For example, one respondent mentioned that they learned from Beth's courage and wisdom, seeing her not as a tragic figure, but as someone emotionally real and inspiring.

Audience Engagement and Cultural Impact

It is also crucial to understand how participants in this study engage with characters with mental health challenges in Anglophone TV series. While media content contributes to the media effect, it is also unrealistic to ignore the possibility that different people react differently to media content. Audience subjectivity functions as a crucial mediating variable in the meaning-making process (Perse & Lambe, 2017). The audience's engagement with the characters tends to be an effective way by which people participate in the narrative (Dill-Shackleford et al., 2016). From previous chapters, respondents' engagement with characters is not only a form of narrative participation in the drama but also a vehicle for emotional and cognitive processing, especially when it involves characters with mental health challenges. Their engagement can enhance reflection, create emotional bonds, or influence perceptions toward mental health challenges. Notably, as I keep mentioning, this thesis attempts to avoid generalising about audiences in China as a singular entity. The participants in this study are individuals with their own agency and differences. Their

perceptions and responses are shaped by a range of intersecting factors, such as generation, gender, geographic location, and personal experience, which can lead to different and sometimes contradictory responses.

Many theories have been proposed to explore audience engagement. Firstly, Hall (1980) 's encoding/decoding framework provides an important theoretical basis for analysing cross-cultural audience reception. Encoding refers to the process by which media producers construct meaningful messages through specific codes, narratives, and ideological frameworks, while decoding is the process by which the audience uses their own cultural background and knowledge to understand the message. Despite the changing media landscape, Hall's model is still highly valuable to understand how audiences from different cultural backgrounds interpret media texts in different ways, rather than just accepting all information. In addition, uses and gratifications theory, developed by Katz and Blumler in the 1974, explains why individuals choose certain media and the benefits they obtain from them. It suggests that audiences actively choose media content to meet their social, psychological and cultural needs (Stafford et al., 2004). This theoretical process involves identifying the gratifications sought, examining the audience's motivations, and connecting media use to these gratifications. What is more, in the studies of narrative engagement, audiences' emotional connection to fictional characters can be understood in various ways, such as identification, empathy or sympathy. Although they represent different modes of responding, they all imply that viewers are able and willing to step into the shoes of the characters during viewing (Tian & Hoffner, 2010). My research extends and deepens these theories by exploring, in multiple ways, how Chinese viewers engage with characters who have mental health challenges in Anglophone TV dramas. The cross-cultural direction of this research is crucial because it shows how audiences from different cultural backgrounds respond to Western portrayals through distinct value systems. For example, as I mentioned in previous chapters, while Western descriptions created individualistic character arcs for characters with mental health, some participants from collectivist cultures may interpret emotional choices, trauma responses, or character growth differently. These findings contribute to a deeper understanding of how global reception of mental health portrayals is filtered

through cultural frames, which is a relatively underexplored area in existing scholarship.

Nevertheless, people often resist new information because of existing beliefs, assumptions, and stereotypes. Although stories can help overcome this resistance, they are not always effective, as these underlying biases may reduce the audience's engagement, emotional connection with characters, and ability to understand the story's intended message (Polletta & Redman, 2020). As a result, the Chinese prevailing cultural attitudes towards mental health challenges can be an important factor influencing Chinese audiences' engagement with these characters in Anglophone TV series. In particular, when prevailing cultural attitudes frame mental conditions as shameful or the result of personal weakness, audiences may reinterpret the character's behaviour through culturally specific lenses. This can limit the emotional engagement of the narrative or reduce the potential influence. At the same time, these differences can also be opportunities for some viewers to question or reflect on dominant cultural assumptions through their engagement with alternative portrayals in Anglophone TV dramas. Thus, cross-cultural audience reception is not just about understanding the content, but also about navigating the emotional and ideological boundaries set by the culture. Cultural dimension theory proposed that different cultures vary in six main dimensions: power distance, individualism-collectivism, masculinity-femininity, uncertainty avoidance, long-term orientation, and indulgence-restraint (Hofstede, 2011). These dimensions can explain differences in cultural values, norms of behaviour and social interactions across the global audience, revealing how these cultural differences affect audience reception and understanding. While Hofstede's model is well established, my research applies it in a new context, through Chinese audience reception of fictional characters in Anglophone TV dramas, discussing the sensitive topic of mental health challenges in different cultural contexts. I extend Hofstede's framework by showing how Chinese cultural values, such as uncertainty avoidance or collectivism, may influence audiences' understanding, emotional responses, and narrative trust toward characters with mental health, supporting a cross-cultural approach to sensitive topics in television studies.

Many scholars have studied how Chinese audiences engage with Anglophone television series, mainly American TV series. Chinese audiences who watch American dramas are more likely to positively accept and identify with American values than those who don't (Xu, 2018). American television drama consumption can influence Chinese audiences' prevailing cultural perception, such as gender roles (X. Zhang & Su, 2021) or Confucian morality (Zhang & Harwood, 2002). However, the effect of Anglophone TV dramas can be limited or reinforced by reality because Chinese viewers actively engage with television content rather than passively accepting it (Gao, 2016). Specifically, American TV dramas can be foreign symbolic materials for Chinese audiences to reflect their own identity and life (Gao, 2016). They interpret overt and hidden meanings, reconstructing the understanding of series based on their personal experiences (Xu, 2018). Therefore, Chinese viewers obtain information and perspectives from American TV dramas to reflect on their minds or lives while maintaining their Chinese identity (Gao, 2016). This suggests that while these representations can influence audiences' attitudes, such influence is neither uniform nor unlimited. So, the influence of Anglophone TV dramas on Chinese viewers' perceptions of mental health challenges does not operate in isolation. It is affected by the viewer's own cultural, personal, and real-world experiences. They do not simply accept these portrayals uncritically but bring their own beliefs, emotional frameworks, and social contexts to their interpretation. Their personal experience, social discourse, or cultural norms can either reinforce these mental health representations or challenge and limit their impact. This thesis suggests that such active engagement is important for understanding how Chinese audiences are influenced by the mental health portrayal in Anglophone TV dramas. However, although these existing studies discussed how Chinese audiences engage with Anglophone television dramas in various aspects, there is a lack of research specifically examining how Chinese audiences perceive and emotionally respond to portrayals of mental health challenges. In this study, I address this gap by examining Chinese audiences' interpretations, gratifications, and emotional engagement with characters with mental health challenges in Anglophone TV series, and I further explore the cultural influences on this whole process.

Firstly, Chinese audiences have complex interpretation processes of characters with mental health challenges in Anglophone TV series, which are influenced by cultural dimensions and other additional factors. Chinese audiences do not always fully accept the portrayal of mental health in Anglophone TV dramas. Instead, they integrate or filter these portrayals according to their own backgrounds, existing knowledge and social circumstances, thus performing dominant reading, negotiated reading, or opposite reading. Also, Chinese audiences' understanding is moderated by a range of factors: different media sources, personal experiences, and the wider cultural context. Then, the majority of respondents believe that there are significant differences in how mental health challenges are portrayed in Chinese and Anglophone TV series, suggesting a strong awareness of cultural differences in narrative style, themes, and overall framing of mental health challenges. Therefore, they gain unique gratification from these characters, including affective needs (aesthetic appeal, enjoyment of novelty, escapism), cognitive needs (seeking information and understanding, different perspectives, creative or professional inspiration), and personal integrative needs (self-reflection, self-understanding, self-validation, and psychological compensation). Furthermore, Chinese audiences have a variety of emotional responses to characters with mental health challenges in Anglophone TV dramas. Many respondents mentioned identification, empathy, and sympathy for these characters, while others expressed caution when the characters were dangerous villains. There are some factors that can influence respondents' emotional responses, including similarity, trauma depiction, aesthetic preferences, and narrative form. Longer narrative forms, such as TV dramas, sometimes led to deeper emotional engagement. This suggests that the complex portrayal of mental health challenges in Anglophone television dramas has wider influences that can shape global media production, media literacy, and future scholarship. In this study, I suggest that Chinese viewers are not passively accepting the portrayal of mental health in Anglophone TV dramas but are actively interpreting and responding to it through the lens of their own cultural, emotional, and experiential frameworks. Besides, I reveal that these Western portrayals not only influence Chinese viewer reception but also influence prevailing cultural attitudes towards mental health challenges through audiences' emotional and cognitive engagement with these characters. This is an

important implication for television studies, emphasising the importance of more culturally sensitive approaches to audience reception studies.

Then, cultural influences are identified in Chinese viewers' overall engagement with characters with mental health challenges in Anglophone TV dramas. First, cultural dimensions influence Chinese viewers' interpretation process of these mental health portrayals. Some Chinese viewers adopt a negotiated interpretation, partially accepting Anglophone TV dramas' depictions of individual characters' mental health challenges, while others adopt an oppositional interpretation, rejecting or criticising certain character portrayals. This reflects the fact that Chinese audiences sometimes have a cautious attitude towards foreign cultural content, in that Chinese culture tends to emphasise collectivism, social harmony, and respect for authority, which, to some extent, affects the acceptance of narrative styles that differ from their cultural norms (Yu et al., 2025). Second, when Chinese TV dramas lack relevant descriptions, Chinese viewers gain unique gratification from the portrayal of mental health challenges in Anglophone TV dramas. They gain cognitive or personal integrative gratification because Anglophone TV dramas are more informative and comprehensive about mental health challenges, while Chinese TV dramas rarely present such characters. Also, cultural distance could affect Chinese audiences' affective gratification from the characters with mental health challenges in Anglophone TV dramas, such as reducing some emotional experiences, like the sense of companionship, while enhancing others, such as aesthetic enjoyment or the experiences of surpassing the ordinary. Ultimately, these characters in Anglophone TV dramas influence Chinese viewers' perceptions of mental health challenges. Most respondents report that such characters had some impact on them, including self-understanding, increased awareness, deeper understanding, or shifts in perceptions and attitudes. Although previous studies have explored Chinese viewers' engagement with Western dramas, there has been no discussion of their engagement with mental health portrayals. In this study, I discuss how Chinese viewers respond to portrayals of mental health in Anglophone TV dramas, while these portrayals are also interpreted through cultural lenses. This contributes to television research by revealing how Western portrayals of mental health can both bridge and reinforce cultural differences. I provide a more complex model for viewer reception research, demonstrating how meaning can

be actively reconstructed in different cultural contexts with effects on perception and understanding.

8.2 Contributions

This study makes significant contributions to the academic fields of television studies, audience reception, and cross-cultural communication in several ways. This study contributes to television studies by expanding the analytical and methodological lens through which mental health portrayals are understood, combining psychological frameworks like attachment theory and trauma narratives with textual and audience analysis. First, it expands the theoretical lens for understanding mental health portrayals in Anglophone TV dramas by applying attachment theory and trauma narratives as central narrative frameworks. These psychological models help explain not only character behaviour but also the emotional mechanisms by which viewers are invited to engage with them. Second, the study challenges the “mad genius” trope, which is often assumed to link mental health challenges and talent inseparably, by demonstrating that some contemporary portrayals, like *The Queen’s Gambit*, separate these concepts. Characters can retain their brilliance while healing, presenting a healthier and more hopeful model of genius. Furthermore, through the survey of Chinese audiences, I confirm the validity of this description and shift in a cross-cultural context. By including a cross-cultural audience perspective, this study demonstrates that these mental health portrayals are not only legible but emotionally resonant across cultural boundaries. These characters can be interpreted in different ways through the cultural lens and can also influence audiences' perception of mental health challenges, which provides new directions for future global television scholarship.

For audience reception research, by combining textual analysis with audience studies, I examined Chinese audiences' engagement with characters with mental health challenges in Anglophone television dramas from different dimensions. Firstly, I expand audience reception theory by combining Stuart Hall's encoding/decoding model from the 1980s with Hofstede's cultural dimensions theory (initially developed in the 1980s and expanded in later decades). I demonstrate how Chinese audiences decode representations of mental health in Anglophone TV dramas through a culturally specific perspective, showing that

the interpretation process is mediated by cultural norms. I also expand on uses and gratifications theory, demonstrating the gratification Chinese audiences obtain from these characters and how cultural factors influence these gratifications. Furthermore, I deepen the understanding of emotional engagement by introducing Chinese audiences' emotional responses (identification, empathy, sympathy, fear) to such characters. In summary, this thesis makes academic contributions to the field of audience reception from different cultural perspectives, illustrating that even when characters are encoded with Western values or frameworks, viewers from other cultures may accept, negotiate or resist these meanings based on their own norms and lived experiences. This challenges the assumption of a universal or Western decoding position, indicating a concern for more inclusive, culturally aware approaches in audience reception theory, especially when it involves the sensitive topic of mental health challenges.

In the field of cross-cultural studies, I have enriched the media's presentation and discussion of mental health challenges by providing insights from a relatively unexplored audience group: Chinese viewers. This has promoted more culturally inclusive media academic research. According to this research, Chinese viewers do not passively accept characters with mental health challenges in Anglophone TV dramas, but actively interpret, enjoy, or respond to these presentations, which is influenced by the cultural frameworks in a Chinese context. For example, as mentioned in Chapter 5, the collectivism of Chinese culture emphasises family, group cohesion and social responsibility, so screen narratives with individual heroism may conflict with the values of some Chinese viewers (Yu et al., 2025). Some Chinese viewers may make an oppositional reading as they consider that Anglophone TV series seem to over-dramatise mental health challenges. Cross-cultural audience studies are increasingly important in the global media environment. This study reveals the complex interactions between representation, interpretation and identity across cultural boundaries. Although Western narratives about mental health provide Chinese audiences with opportunities to identify, reflect and even criticise, these interactions are always filtered by local cultural influence. Previous studies have examined the impact of Anglophone TV dramas on Chinese audiences. Chinese audiences who watch American dramas are more likely to positively accept and identify with

American values (Xu, 2018). American television drama consumption can influence Chinese audiences' prevailing perception, such as gender roles (X. Zhang & Su, 2021) or Confucian morality (Zhang & Harwood, 2002). However, there remains limited attention to how mental health representations are received across cultural boundaries in China. This study addresses the gap by showing how Chinese viewers emotionally respond to, interpret, and sometimes resist portrayals of mental health in Anglophone TV dramas. These findings suggest that audience engagement with such characters is shaped not only by narrative technique but also by cultural values and norms, pushing the field toward more inclusive, context-aware approaches.

Methodologically, by combining textual analysis with audience data, I provide a comprehensive perspective for understanding how meaning is constructed in television and received by audiences. I also validate the use of a mixed research design to analyse role-based audience engagement by combining qualitative analysis with quantitative methods. This provides useful implications for television studies, audience studies, and cross-cultural research.

Furthermore, when local television dramas lack depictions of mental health themes, international entertainment media have the potential to influence the public's understanding of mental health. As respondents mentioned in this study, Anglophone TV dramas television dramas' portrayals of characters with mental health challenges can sometimes resonate with viewers' personal experiences and sometimes challenge China's existing cultural norms regarding mental health. For example, in Chapter 7, a respondent mentioned that they empathised deeply with a character’s isolation during a bipolar episode in *Modern Love*, and another noted the intergenerational and environmental effects of bipolar disorder portrayed in *Shameless* that resonated with their own experiences. Also, in Chapter 5, an interviewee reflected on mental health portrayals in Anglophone TV dramas that often explore social and environmental causes more systemically, while mental health challenges are often considered to be personal problems in China. Chinese TV series may have safer narratives, which limit psychological conflict within the individual or the family unit, framing it as a personal issue or domestic drama. This structural constraint further stresses the unique value of the Western dramas analysed in this thesis.

Therefore, media education programmes can use TV drama plots as material to spark discussions about mental health, cultural differences, and stigmatisation. Especially in situations where domestic discussions are restricted or stigmatised, this approach may help audiences gain more diverse knowledge about mental health.

8.3 Limitations and Future Research

Although this research provides important understandings into Anglophone television dramas and Chinese audiences, it also has some limitations. First, in the television research section, I used two characters from two television dramas as case studies for analysis, but these examples do not fully represent the entire portrayal of mental health in Anglophone television dramas. Future research could explore more case studies, more diverse genres, more portrayals of specific mental health challenges, or dramas from different Western countries. Second, the participants in the online questionnaire survey and semi-structured interviews may not fully reflect the diversity of Chinese television audiences, especially those from non-urbanised or low media penetration backgrounds. Future research could expand the demographic characteristics of participants or focus on specific subcultural groups in China to gain a more focused understanding.

Third, the data I obtained from the audience survey relied mainly on participants' self-reported perceptions, which may not be entirely accurate. Future research could focus on more scientific perception measurement tools. Furthermore, I also used cultural frameworks such as Hofstede's dimensions to explain the attitudes and perceptions of Chinese audiences, but a cultural group cannot be overly generalised. Each individual will have different perceptions. Future research could explore how Chinese audiences' perceptions of mental health challenges are influenced by globalisation and digitalisation. Finally, I focused on how Chinese audiences perceive characters with mental health challenges in Anglophone TV dramas. Future research could explore how Chinese-produced dramas portray mental health themes, or dramas from other cultures, and whether Chinese audiences react differently due to cultural proximity differences.

Conclusion

To conclude, by analysing the portrayal of mental health challenges in Anglophone television dramas and examining Chinese audience engagement, I discuss how Chinese viewers engage with these characters and how their perceptions of mental health are affected. I combine textual analysis with empirical audience research to explore how these characters are represented and received across cultures, which presents a unique interdisciplinary contribution. Previous research has discussed the role of entertainment media in shaping public understanding and reducing stigma around mental health challenges. The media can be an important source of mental health information for viewers and can give meaning to mental health challenges and respond to them (Issakainen, 2014). Thus, how they construct, organise, present and interpret mental health challenges can influence public perceptions (Sieff, 2003). Characters and plots in fictional television series provide viewers with a more compelling narrative to convey a specific message (Henderson, 2017). This study adds to that conversation by showing how Chinese audiences understand and engage with characters with mental health in Anglophone TV dramas. It not only deepens the understanding of such mental health portrayals but also deepens the understanding of cross-cultural acceptance, which influences how people engage with such narratives in real life. Reflecting on this journey, I see this thesis not only as a piece of academic work but also as a personal exploration into the emotional connections we form with stories and what those connections might quietly reveal about ourselves.

Appendices A Questionnaire

Characters with mental health conditions in Western TV series and Chinese audiences

Thank you for considering participation in this survey. I am Xin Li, a PhD student at the College of Arts, University of Glasgow, and this ongoing research is about "Characters with Mental Health Conditions in Western TV Dramas and Chinese Audiences."

What is the purpose of this research?

European and American TV dramas have portrayed many fascinating characters with mental problems, such as the 'dangerous villain', the 'mad genius', or the struggling ordinary person. They have garnered significant attention among Chinese audiences: well-known figures like Hannibal and Sherlock Holmes, as well as popular roles in recent years like James in *The End of F***king World*, Elizabeth in *Queen's Gambit*, Villanelle in *Killing Eve*, Gretchen and Edgar in *You're the Worst*...

This study aims to explore the feelings and thoughts of Chinese viewers towards these characters and also look into perceptions related to mental health issues. You are welcome to participate in the survey and share your feelings and opinions about any characters.

How can I participate?

You are invited to complete an online questionnaire w ith 24 questions that typically takes 7–15 minutes to complete. The duration might vary based on the depth of your responses. Some questions offer text boxes for detailed answers, but these are optional. You can share as many details as you like about any fictional characters, or you can just ignore that and move on to the next question. All responses from you are very valuable and helpful.

At the end of the questionnaire, you will be invited to participate in the follow-up interview and you can choose yes or no.

Do I have to participate?

Your participation is entirely voluntary. It is up to you to decide whether to take part and you are free to withdraw at any time. If you're interested in the follow-up interview, you will be asked to provide your email address at the end. However, if you prefer not to share email in the survey, you're welcome to email me directly.

How is my data managed?

Your responses to the questionnaire will remain anonymous, ensuring no personal identifiers are recorded. All data will be kept confidential and securely, adhering to legal requirements and professional guidelines. Materials relating to this study have been reviewed and approved by the College of Arts Research Ethics panel at the University of Glasgow.

Thank you for reading this. Please feel free to contact me with any concerns or questions.

Researcher:

Xin Li (x.li.8@research.gla.ac.uk)

Supervisors:

Dr Ian Goode and Professor Ian Garwood

Consent Form

I confirm that I have read and understood the above information on research participation and have the opportunity to ask questions to the researcher.

I confirm that I participate voluntarily and that I can withdraw at any time without giving any reason.

I acknowledge that this research is anonymous and that the material will be treated as confidential and kept secure at all times.

By giving your consent, you confirm that you have read and understood the above information:

Yes, I agree to participate in this study.

No, I don't.

Part 1: Viewing preferences of Western TV dramas

Q1. How often do you watch Western TV series?

Often

occasionally

Rarely

Never

Other (please provide more detailed information in the box below)

Q2. How long have you been watching Western TV series?

0-12 months

1-3 years

3-5 years

5-7 years

7-10 years

More than 10 years

Other (please provide more detailed information in the box below)

Q3. When watching Western TV series, which of these statements comes the closest to your approach?

I don't have a particular preference; I just enjoy Western TV series.

I'm a casual viewer of certain Western TV series.

I keep up with various popular Western TV series to feel included in ongoing discussions.

I love certain Western TV series and keep coming back to them.

I'm a fan of certain Western TV series and I actively participate in various fandoms.

I watch them to learn English or other countries' cultures.

Other

_____

Q4. When watching Western TV series, what kind of dramas do you find the most engaging?

... (Please choose the option that is most important to you)

I like it when a TV series……

allows me to focus on character development and character psychology.

allows me to focus on the plot and shows me interesting situations which I find engaging.

allows me to focus on its themes and meanings and helps me explore a topic in depth.

allows me to focus on the fictional world and shows me compelling settings and places.

allows me to focus on good visual representation, aesthetic choices and shooting techniques.

Other (Please give me more detail in the box below)

_____

Q5. How do Western TV series that feature important characters with mental health issues influence your viewing choices?

I actively seek out such dramas.

I'm more likely to watch.

They do not influence my viewing choices.

I'm less likely to watch.

I avoid series with such characters.

Other: _____

Part 2: Characters with mental problems in Western TV series

In this section, some questions offer text boxes for detailed answers, but these are optional. You can share as many details as you like about any fictional characters, or you can just ignore that and move on to the next question. All responses from you are very valuable and helpful.

Q6. Have you encountered characters with mental conditions in the Western TV series you've watched?

Often

Occasionally

Rarely

Never

Other (please provide more detailed information in the box below)

Q7 What mental conditions of characters have you encountered in the Western TV series you've watched? (You can select more than one option)

Depression

Schizophrenia

Autism

Substance Addition (e.g., drug, alcohol)

Bipolar disorder

Obsessive-compulsive disorder (OCD)

Post-traumatic stress disorder (PTSD)

Antisocial personality

I don't know/Not sure/ Other (please provide more detailed information in the box below)

_____

Q8. When watching Western TV series, how do you usually define or identify mental conditions in fictional characters? (You can choose more than one option)

When:

The character is explicitly professionally diagnosed with mental conditions.

The character self-diagnoses a mental condition.

The character is mentioned or implied to have mental conditions by other characters.

The character is generally presumed by most viewers to have mental conditions.

The character displays symptoms of certain mental conditions like anxiety, depression, or panic attacks.

The character's actions or thoughts appear abnormal, mad or disconnected from reality.

I don't know/Not sure/ Other (please provide more detailed information in the box below)

_____

Q9. Which of the following feelings do you usually have about characters with mental problems in Western TV series? (You can choose more than one answer)

I feel understanding and empathy for them.

I step into their shoes and feel that sometimes I am them.

I am attracted to them, and we seem to form some kind of attachment. They are like a role to me, a teacher, a lover, a friend .....who give me company.

I have a positive attitude towards them. For some reason, I like them to varying degrees.

I would become a fan of some characters.

I imitate the way they think, speak or behave, consciously or unconsciously.

They confirm some feeling or thought I have and make them stronger.

They are spectacular characters and experience events that am unlikely to encounter in my daily life.

I dislike them/I feel uncomfortable/ I avoid them/I don't understand them/I feel nothing.

I don't know/Not sure/ Other (please provide more detailed information in the box below)

*Optional

Please remember a specific scene/moment/situation about the feelings you mentioned with a character with mental problems. Describe what happened and how that made you feel.

_____

_____

_____

Q10. Which of the following factors most likely affect your feelings towards a character with mental problems in Western TV dramas? （You can select more than one option）

Whether a character with mental problems in Western TV series:

...looks good or not to me.

...has extraordinary intelligence or talent.

...be wealthy.

...be in high social status.

...is morally good or evil to me.

...Is real or surreal to me?

...is in a similar situation to me.

...shows a similar personality trait to me.

...does something I would do.

...does something I wish to do.

...shows a different perspective to me.

...feels the way I feel.

Other

*Optional

Please identify a character from a Western TV series who has dealt with mental health issues and left an impression on you. What about this character stood out to you?

___

Q11. When watching Western TV dramas, how do you think about characters with mental illnesses who are presented as having experienced childhood trauma or traumatic events? (You can select more than one option)

It generally enhances my understanding of their struggles.

It makes me feel more sympathetic.

It makes me more invested in their character development.

It depends on how the character and their trauma are portrayed.

It doesn't substantially impact my feelings about the characters.

I don't think it can be related to their mental problems.

It doesn't make sense to me at all.

I never met such characters.

I don't know/Not sure/ Other (please provide more detailed information in the box below)

_____

*Optional

Can you elaborate on why you feel this way? If possible, provide an example of a character that influenced your perspective.

_____

Q12. Do you think the visual presentation, aesthetic choices and shooting techniques of television affect how you feel about characters with mental issues?

No.

Yes. (Please remember at least one moment/scene that has an impressive visual presentation)

_____

Part 3 Perception of mental health problems

Q13. How do you perceive the depiction of mental health issues in Western TV dramas in relation to real-life situations?

They tend to glamorize or present mental health issues in a positive light.

They slightly exaggerate the positive aspects but remain largely accurate.

They slightly exaggerate the negative aspects but remain largely accurate.

They often magnify the negativity associated with mental health issues.

The representation varies across different TV dramas.

TV dramas are fictional and shouldn't be equated with reality.

Other (please elaborate in the space provided below).

Q14. To what extent has watching Western TV dramas with characters experiencing mental health issues influenced you? (You can select more than one option)

They have heightened my awareness of mental health issues, making me more conscious of them in daily life.

They have deepened my understanding and knowledge of mental health challenges.

They have altered or refined my perception of real-world mental health issues.

They have influenced my attitude towards those with mental health challenges.

They have affected the way I interact or behave with individuals facing mental health issues.

They have enhanced my self-understanding and acceptance.

They haven't had any significant impact on my views or behaviours related to mental health.

Other (please provide more detailed information in the box below)

*Optional

Can you recall a particular character, scene, or series that has left an impression on you? Please describe the moment and share how it influenced you.

_____

Q15. In your opinion, how does the representation of mental disorders differ between Chinese and Western TV series?

There are distinctly different.

There are differences, but also similarities.

There are no major differences in representation.

I haven't observed any differences.

I'm not familiar enough to make a comparison.

Other: (Please specify)

*Optional

Please specify how Chinese and Western TV series portraying characters with mental problems are different or the same? Which dramas or characters can be used as examples?

Q16. In your opinion, how does the perception of mental disorders differ between Chinese and Western cultures?

Vastly distinct in both cultures

Noticeably different but with underlying similarities

Minor differences with many shared views

Almost identical in both cultures

I don't know/Other (please specify)

*Optional

In your perspective, how does the perception of mental disorders differ between Chinese and Western cultures? Please explain your viewpoint and provide any specific examples or experiences that have shaped your understanding.

_____

Q17. Below are statements about perceptions regarding Mental Health Disorders. Please indicate your level of agreement with each statement by ticking the appropriate option.

Items	Strongly Agree	Agree	agree	Disagree	Strongly Disagree
1. Many people have mental problems, but they do not realize them.					

2. Mental disorders are caused by the wrong way of thinking.					
3.Only people who are weak and overly sensitive could be affected by mental illnesses.					
4.People with mental illnesses are commonly dangerous.					
5 Feelings of sadness and depression are the same.					
6 I would avoid or stay away from people with mental problems.					
7 If I have a mental health disorder, I most likely do not tell others.					
8 If any of my friends suffer from mental illnesses, I would advise them not to tell others.					
9 It would be a shame if I had a mental illness.					
10 I have nothing in common with people with mental illness.					

Part 4: Some information about you

You're almost done! I really appreciate you getting this far. I just need to find out a few more things about you.

Q18. What is your age?

0-18

19-24

25-34

35-44

45-54

55-64

above 65

Q19. What is your gender?

Female

Male

I prefer not to say.

Other:

Q20. What is your current work status?

Self-employed or freelance.

Employed full-time.

Employed part-time.

Unemployed

Student

Retired

Other (Please specify)

Q21. How would you describe your educational status:

Primary school

Junior High School

Senior High School

College

University with an undergraduate degree

University with a master's degree

University with a Ph.D. degree

Other (Please specify)

_____

Q22. Have you lived /are you living in a Western country?

No

Yes (Please tell me which country and how long in the box below) _____

Q23. What platforms are the main source for your information on mental health (You can select more than one option)

Books or literature

Healthcare professionals (e.g., therapists, psychologists

Mental health websites, apps or groups.

Social media (e.g., Weibo, Instagram)

Online video websites or apps (eg. Bilibili, YouTube)

News websites and publications

Educational institutions (e.g., universities, online courses)

Television and films

Podcasts and online videos

Other (please specify)

Q24. Do you have any experience with people with mental or psychological health conditions? (You can select more than one option)

Families

Spouse

Friends

One of your acquaintances

Colleague

yourself

no one

Other (please specify)

Q25. I’m very grateful and appreciate the time you’ve spent going through this survey. Would you be interested in participating in a follow-up interview to share more thoughts?

Yes

No

-------- (if yes) Thank you very much for considering the follow-up interview. Please leave your email below and I’ll contact you. Alternatively, email x.li.8@research.gla.ac.uk, and I’ll answer any questions you might have.

If you have any specific TV dramas and characters that you'd like to discuss with me, please also write them down below and I'll be happy to learn about them before the interview.

_____

--------(If no) We thank you for your time spent taking this survey. Your response has been recorded.

Appendices B Interview Questions List

Part A: General Western TV series viewing.

1. What kind of Western TV series do you watch most often?

- e.g. genre, theme

- or give examples of your favourites

2. What kind of characters are you usually interested in?

Part B: Involvement

3. How do you feel about characters with mental issues in Western TV series?

-what characters

-why

4. What would make it easier for you to identify with characters with mental issues in Western TV series?

- character traits:

- personal experience

- aesthetic preference

5. What do you think are the reasons for the popularity of these characters in China?

6. To what extent do you think people share similarities with their favoured characters? Why?

Part C: Influence

7. To what extent do you think audiences could be influenced by these characters in different cultures? Why?

8. How do these characters influence you? (why not?)

9. a question about the differences between people's aesthetic preference on screen and attitudes to mental issues in reality

10. Do you find it easier to be influenced by characters with mental problems in TV or film? Why?

Part D: Perception of mental health / cultural differences

11. What are the differences between Chinese and Western TV dramas in presenting mental problems?

12. What do you think about the general perception or attitude of mental problems in China?

13. What do you think are the differences between Chinese and Western cultures' perceptions of mental issues?

14. Can you talk about your experiences with mental problems in your life?

Appendices C Participant Information Form (Interviews)

Participant Information Form (Plain Language Statement)	
Study title and Researcher Details	
Title	Characters with mental problems in Western TV series and Chinese audiences
Researcher	Xin Li (x.li.8@research.gla.ac.uk)
Supervisor	Ian Goode (ian.goode@glasgow.ac.uk); Ian Garwood (Ian.Garwood@glasgow.ac.uk)
Course:	Film and Television Studies Ph.D. dissertation
Department	College of Arts
Invitation	

You are being invited to take part in a research study. Before you decide it is important for you to understand why the research is being done and what it will involve. Please take time to read the following information carefully and discuss it with others if you wish. Ask us if there is anything that is not clear or if you would like more information. Take time to decide whether or not you wish to take part. Thank you for reading this.

- Advisory: The research project outlined below explores representations and experiences of mental health issues. Please consider any possible impacts on your own well-being before agreeing to take part.

What is the purpose of the study?

In recent years, mental health and Neurodiversity have received increasing attention in China. At the same time, influenced by traditional Chinese culture, Chinese TV dramas rarely mention or depict such issues. Some western TV dramas have more characters struggling with mental illness and enjoy popularity among Chinese audiences in recent years, which offer significant reflections on the problems associated with mental health issues: *Fleabag* (UK), *The end of the fucking world* (UK), *Patrick Melrose* (UK), *Shameless* (US), *You're the worst* (US), *Killing Eve* (UK&US). Some adult animated TV series are also included: *Bojack Horseman* (US), *Rick and Morty* (US), *Harley Quinn* (US).

Western TV series can be a new source for Chinese audiences to acquire information about mental health issues. The popularity of these dramas with Chinese audiences may reflect attitudes on mental problems and may affect or change perceptions of mental health problems. My study aims to explore relations between Characters with mental problems in Western TV series and Chinese audiences.

Do I have to take part?

It is up to you to decide whether or not to take part. If you decide to take part, you are still free to withdraw at any time and without giving a reason.

What will happen to me if I take part?

- Interviews: If you agree, you will be invited to take part in an interview lasting approximately 45 minutes.

Will my taking part in this study be kept confidential?

Please note that assurances on confidentiality will be strictly adhered to unless evidence of wrongdoing or potential harm is uncovered. In such cases the University may be obliged to contact relevant statutory bodies/agencies.
What will happen to the project data and the results of the research study?
The research will be used as part of my doctoral dissertation and any related publications.
Who is organising and funding the research? (If relevant)
None
Who has reviewed the study?
Materials relating to the study have been reviewed and approved by members of the College of Arts Research Ethics panel.

Application reference number:	**Date of approval letter:**
100210035	16/08/2022

How can I access information relating to me or complain if I suspect information has been misused/ used for purposes other than I agreed to?
You can contact the researcher or their supervisor in the first instance if you have any concerns. If you are not comfortable doing this, or if you have tried but don't get a response or if the person in question appears to have left the University, you can contact the College of Arts Ethics Officer (email: arts-ethics@glasgow.ac.uk). Where there appear to have been problems, you can – and indeed may be advised to – submit an 'access request' or an objection to the use of data. As part of the University's obligations under UK General Data Protection

Regulation (UK GDPR), participants retain the rights to access and objection with regard to the use of non-anonymised data for research purposes.

1. Access requests and objections can be submitted via the UofG online proforma accessible at: https://www.gla.ac.uk/myglasgow/dpfoioffice/gdpr/gdprrequests/#.

2. Access requests and objection are formal procedures not because we mean to intimidate participants into not raising issues, but rather because the University is legally required to respond and address concerns. The system provides a clear point of contact, appropriate support and a clear set of responsibilities.

3. Anyone who submits a request will need to provide proof of their identity. Again, this is not to deter inquiries, but rather reflects the University's duty to guard against fraudulent approaches that might result in data breaches.

4. You also have the right to lodge a complaint against the University regarding data protection issues with the Information Commissioner's Office (https://ico.org.uk/concerns/).

Appendices D Participant Agreement Form (Interviews)

PARTICIPANT AGREEMENT FORM

(interviews)

I understand that **Xin Li** is collecting data in the form of **recorded interviews** for use in an academic research project at the University of Glasgow.

I have read the information sheet outlining the project and its methods and had the opportunity to ask any questions arising from that.

I consent to participate in the interviews on the following terms:

1. I can leave any question unanswered.

2. The interview can be stopped at any point.

I agree to the processing of data for this project on the following terms:

1. Use and storage of research data in the University of Glasgow reflects the institution's educational/ research mission and its legal responsibilities in relation to both information security and scrutiny of researcher conduct.

    a. As part of this, under UK legislation (UK General Data Protection Regulation [UK GDPR]), I understand and accept that the 'lawful basis'

for the processing of personal data is that the project constitutes ‘a task in the public interest’, and that any processing of special category data is ‘necessary for archiving purposes in the public interest, or scientific and historical research’.

b. I understand that I have the right to **access** data relating to me or that I have provided and to **object** where I have reason to believe it has been misused or used for purposes other than those stated.

c. Project materials in both physical and electronic form will be treated as confidential and kept in secure storage (locked physical storage; appropriately encrypted, password-protected devices and University user accounts) at all times.

2. Interviews will be transcribed and the recordings deleted when the project is completed.

3. Unless I indicate otherwise, I will not be identified by name in the study. All other names and information likely to identify individuals will be removed or redacted.

4. I have the choice to leave any question unanswered.

5. NAMED PARTICIPATION: If I choose to take part as a named participant, I may withdraw from the project at any time up until its completion date without being obliged to give a reason. In that event all record of my remarks of will be destroyed immediately.

6. ANONYMOUS PARTICIPATION: If I choose to take part as an anonymous participant, I understand that once the data collected has been anonymised, then in accordance with UK legislation (UK GDPR), the data can be used for the purposes of the project without further reference back to me. However, I understand I retain the rights of access and objection where I have legitimate grounds for concern that I remain directly identifiable from the data or that it has been used for purposes other than those stated.

7. Project materials will be retained in secure storage by the University for ten years for archival purposes (longer if the material is consulted during that time). Consent forms will also be retained for the purposes of record.

8. Project materials may be used in future research and be cited and discussed in future publications, both print and online.

TICK AS APPROPRIATE:

☐ I agree to take part in the above study on the condition I remain anonymous.

OR

☐ I agree to take part in the above study on the condition my name is replaced with a pseudonym of my choosing.

OR

☐ I agree to take part in the above study and wish to be cited by name. I understand that I will be allowed to see and approve use of my comments in pre-publication drafts of any outputs.

ALL PARTICIPANTS:

☐ I agree to the terms for data processing as outlined above.

☐ I confirm I have been given information on how to exercise my rights of access and objection.

Name of Participant: _____ Date: _____

Signature: _____

Researcher's name and email:	Xin Li (x.li.8@research.gla.ac.uk)
Supervisor's name and email:	Ian Goode (ian.goode@glasgow.ac.uk) Ian Garwood (Ian.Garwood@glasgow.ac.uk)
Department address:	University of Glasgow, G12 8QQ, Glasgow, Scotland

Appendices E Ethical Approval

16 August 2022

Dear Xin,

Ethics Application 100210035: Approval

With many thanks for your attending to the points raised previously, I am writing to indicate that your application is approved. Good luck with the project and get in touch if you have any questions.

NOTE ON IMPLICATIONS OF UK GENERAL DATA PROTECTION REGULATION (UK GDPR)

What follows is somewhat lengthy and legalistic, but it will have a bearing on the handling of data associated with research projects in the College of Arts. The points outlined below reflect updated guidance approved by the College and by the University Ethics Committee.

1. As regards data processing under UK GDPR, in common with other parts of the University as well as with guidance issued by UKRI and other UK HE institutions, the College's position is that for projects where ethical approval has been granted, the **lawful basis** for processing of **personal data** (name, contact details, age) is given as **public task**, as part of which participants retain only the data subject rights of access and objection. (For UofG guidance on Data Subject Rights, click here.) The basis for processing **special category personal data** (i.e. information relating to racial or ethnic origin, political opinions, religious or philosophical beliefs, trade union membership,

the processing of genetic data, biometric data for the purpose of uniquely identifying a person, health, sex life or sexual orientation, criminal convictions or allegations of crimes) is that such processing is necessary for 'archiving purposes in the public interest, or scientific and historical research'.

2. Provisions associated with 'a task in the public interest' differ markedly from the UK GDPR definition of 'consent' as a lawful basis. Whereas 'consent' guarantees the full range of data subject rights, 'a task in the public interest' allows only for rights to access and objection.

    a. One key point here is that HE institutions, as part of their legal status as public bodies, now ask participants to afford researchers that additional leeway in the handling and retention of data. This is on the basis that research activity is both subject to ethical scrutiny and conducted in a secure environment. (By way of analogy, in medical research contexts, standards of provision aim at the implementation of what are termed 'Trusted Research Environments'.) Thus, in inviting participants to take part, we are also asking them to trust us when we say we commit to safeguarding their interests and to not using data for purposes other than those relating to the project in question. Correspondingly, we also commit to explaining to participants how they can go about challenging any infringement.

    b. The general view is that 'consent' would be unworkable from the point of view of researchers as the rights provided for here would, for instance, allow participants to insist publications be withdrawn without the University having scope to do anything but comply. 'Public interest' is intended to offer a more workable balance between the rights and interests of both participants and researchers.

2. As indicated in the guidelines, information materials should explain how participants can exercise their rights to access and objection.

a. Requests and objections should be submitted via the UofG online proforma accessible at: https://www.gla.ac.uk/myglasgow/dpfoioffice/gdpr/gdprrequests/#.

b. You should explain that the fact that access and objection are formal procedures is not intended to intimidate participants into not raising issues, but rather provides a framework as part of which the University is legally required to respond to requests and address concerns.

c. You should also explain that anyone submitting a request is required to provide proof of their identity. Again, this is not intended as dissuasive, but rather reflects the University's duty to guard against fraudulent approaches that might result in data breaches.

CONDITIONS OF APPROVAL

In addition, you should note the following actions, which are required as part of the process of research monitoring:

- It is your responsibility to inform, as appropriate, your supervisor, advisor or funding body of the outcome of your Ethics application. You should also indicate successful receipt of ethical clearance on all consent and interview information forms as well as on the acknowledgements page of your dissertation project (suggested wording: 'ethical clearance for this project has been granted by the College of Arts Research Ethics committee [date of approval letter]').

- We advise that you emphasise to participants that there will be no impact if they choose either not to participate in the project or to allow use of the resulting materials. Without this reassurance, you are potentially in a coercive position towards them where they may feel that they have no choice about participation.

- An end of project report is required by the Ethics Committee. A brief report should be provided within one month of the completion of the research, giving details of participant numbers, participant withdrawals and any ethical issues which have arisen. A paragraph or two will usually be sufficient. This is a condition of approval and in line with the committee's need to monitor the conduct of research.

In addition, please note that any unforeseen events (particularly personal data breaches) which might affect the ethical conduct of the research – or which might provide grounds for discontinuing the study – must be reported immediately in writing to the Ethics Committee. The Committee will examine the circumstances and advise you of its decision, which may include referral of the matter to the central University Ethics Committee or a requirement that the research be terminated.

Information on the College of Arts Ethics policy and procedures is available for consultation at http://www.gla.ac.uk/colleges/arts/research/ethics.

With best wishes,

Dr James R. Simpson

Research Ethics Officer, College of Arts

Bibliography

Abbott, S. (2018). Not just another serial killer show: Hannibal, complexity, and the televisual palimpsest. *Quarterly Review of Film and Video*, *35*(6), 552-567.

Ang, I. (1985). *Watching Dallas: Soap Opera and the Melodramatic Imagination*. Routledge

American Psychological Association. (n.d.). Posttraumatic stress disorder. In APA Dictionary of Psychology. Retrieved October 3, 2025

Baek, Y. M., & Kim, H. M. (2016). Cultural distance and foreign drama enjoyment: Perceived novelty and identification with characters. *Journal of Broadcasting & Electronic Media*, *60*(3), 527–546.

Bálint, K., Sukalla, F., & Rooney, B. (2022). Personal relevance and state empathy with a character facilitates self-disclosure in film viewers. *Frontiers in Communication*, *7*, 984341.

Bandura, A. (1986). Social foundations of thought and action. *Englewood Cliffs, NJ, 1986*(23-28), 2.

Beirne, R. C. (2019). Extraordinary minds, impossible choices: Mental health, special skills and television. *Medical Humanities*, *45*(3), 235-239.

Beneš, J. (2025). Empathy and the miniseries format: The case of the opioid epidemic drama Dopesick. In M. Samuel & T. Trimmel (Eds.), *Television and empathy* (pp. 221–238). Palgrave Macmillan.

Bennett, T. (1983). The Bond phenomenon: Theorising a popular hero. *Southern Review*, *16*(2), 195-225.

Berlyne, D. E. (1970). Novelty, complexity, and hedonic value. *Perception & Psychophysics*, *8*(5), 279–286.

Bevan, A. (2015). The national body, women, and mental health in Homeland. *Cinema Journal*, *54*(4), 145-151.

Black, A. J. (2020). Pleasure, power, and pathology—between two worlds: *Killing Eve's* queer/feminist post-Cold War appraisal. *Feminist Media Studies*, *21*(7), 1261-1265.

Blumler, J. G., & Katz, E. (Eds.). (1974). *The uses of mass communications: Current perspectives on gratifications research*. Sage.

Bowlby, J. (1980). *Attachment and loss: Vol. III. Loss: Sadness and depression*. Basic Books.

Bowlby, J. (1982). Attachment and loss: Retrospect and prospect. *American Journal of Orthopsychiatry*, *52*(4), 664-678.

Bowlby, J. (1988). *A secure base: Parent-child attachment and healthy human development*. Basic Books.

Brayton, S. (2017). Mental illness, late capitalism, and the socioeconomic "psychopath" in CBS's Elementary. *Popular Communication*, *15*(4), 283-295.

Brennan, K. A., Clark, C. L., & Shaver, P. R. (1998). Self-report measurement of adult attachment: An integrative overview. In J. A. Simpson & W. S. Rholes (Eds.), *Attachment theory and close relationships* (pp. 46-76). The Guilford Press.

Brown, H. (2022). "It's foolish to run the risk of going mad for vanity's sake": The tantalizing effects of post-traumatic stress disorder in Netflix's The Queen's Gambit. *Alpha Kappa Phi Review, 159.*

Caldwell, J. T. (1995). *Televisuality: Style, crisis, and authority in American television*. Rutgers University Press.

Camp, M. E., Webster, C. R., Coverdale, T. R., Coverdale, J. H., & Nairn, R. (2010). The Joker: A dark night for depictions of mental illness. *Academic Psychiatry*, *34*(2), 145-149.

Cantrell, T., & Hogg, C. (Eds.). (2018). *Exploring television acting*. Bloomsbury Academic.

Cao, S. (2012). An unusual path: How American TV series disseminate in China? In H. Yin & S. Cao (Eds.), *Leading edge studies on film & TV in Tsinghua University*. Qinghua University Press.

Casey, B., & Long, A. (2003). Meanings of madness: a literature review. *Journal of Psychiatric and Mental Health Nursing*, *10*(1), 89-99.

Cassidy, J., & Mohr, J. J. (2001). Unsolvable fear, trauma, and psychopathology: Theory, research, and clinical considerations related to disorganized attachment across the life span. *Clinical Psychology: Science and Practice*, *8*(3), 275-298.

Charney, R. (1996, May). *Uses and gratifications of the Internet* [Paper presentation]. Annual Conference of the International Communication Association, Chicago, IL, United States.

Cheema, F., & Wilkinson, P. (2022). Social isolation and alcohol use: Lessons from The Queen's Gambit – psychiatry in television. *The British Journal of Psychiatry*, *221*(3), 537-537.

Chen, M., Bell, R. A., & Taylor, L. D. (2016). Narrator point of view and persuasion in health narratives: The role of protagonist–reader similarity, identification, and self-referencing. *Journal of Health Communication*, *21*(8), 908–918.

Chen, R., & Liu, Y. (2023). A study on Chinese audience's receptive behavior towards Chinese and western cultural hybridity films based on grounded theory—Taking Disney's animated film Turning Red as an example. *Behavioral Sciences*, *13*(2), 135.

Christy, K. R., Minich, M., Tao, R., Riddle, K., & Kim, S. (2022). To tailor or not to tailor: An investigation of narrative tailoring for health communication. *Journal of Health Communication*, *27*(3), 152–163.

Ciarrochi, J., Wilson, C. J., Deane, F. P., & Rickwood, D. (2003). Do difficulties with emotions inhibit help-seeking in adolescence? The role of age and

emotional competence in predicting help-seeking intentions. *Counselling Psychology Quarterly*, *16*(2), 103-120.

Cohen, J. (2001). Defining identification: A theoretical look at the identification of audiences with media characters. *Mass Communication and Society*, *4*(3), 245-264.

Cohen, J. (2018). Defining identification: A theoretical look at the identification of audiences with media characters. In M. B. Oliver, A. A. Raney, & J. Bryant (Eds.), *Advances in foundational mass communication theories* (pp. 253-272). Routledge.

Cohen, J., & Klimmt, C. (2021). Stepping in and out of media characters: Identification and dynamic shifts in users' positioning toward entertainment messages. In P. Vorderer & C. Klimmt (Eds.), *The Oxford handbook of entertainment theory* (pp. 266–284). Oxford University Press.

Cohen, J., & Weimann, G. (2000). Cultivation revisited: Some genres have some effects on some viewers. *Communication Reports*, *13*(2), 99-114.

Coplan, A. (2004). Empathic engagement with narrative fictions. *The Journal of Aesthetics and Art Criticism*, *62*(2), 141-152.

Coverdale, J., Nairn, R., & Claasen, D. (2002). Depictions of mental illness in print media: A prospective national sample. *Australian & New Zealand Journal of Psychiatry*, *36*(5), 697-700.

Creeber, G. (2006). The joy of text? Television and textual analysis. *Critical Studies in Television*, *1*(1), 81-88.

Creswell, J. W. (2014). *Research design: Qualitative, quantitative, and mixed methods approaches* (4th ed.). Sage Publications.

Cross, S. (2010). *Mediating madness: Mental distress and cultural representation*. Springer.

Day, D. M., & Page, S. (1986). Portrayal of mental illness in Canadian newspapers. *Canadian Journal of Psychiatry*, *31*(8), 813–816.

Deming, R. H. (1986). Theorizing television: Text, textuality, intertextuality. *Journal of Communication Inquiry*, *10*(3), 32-44.

Denscombe, M. (2017). *The good research guide: For small-scale social research projects* (6th ed.). McGraw-Hill Education.

Diefenbach, D. L. (1997). The portrayal of mental illness on prime-time television. *Journal of Community Psychology*, *25*(3), 289-302.

Diefenbach, D. L., & West, M. D. (2007). Television and attitudes toward mental health issues: Cultivation analysis and the third-person effect. *Journal of Community Psychology*, *35*(2), 181-195.

Dill-Shackleford, K. E., Vinney, C., & Hopper-Losenicky, K. (2016). Connecting the dots between fantasy and reality: The social psychology of our engagement with fictional narrative and its functional value. *Social and Personality Psychology Compass*, *10*(11), 634–646.

Drescher, J. (2015). Out of DSM: Depathologizing homosexuality. *Behavioral Sciences, 5*(4), 565-575.

Edelstein, R. S., & Gillath, O. (2008). Avoiding interference: Adult attachment and emotional processing biases. *Personality and Social Psychology Bulletin, 34*(2), 171-181.

Elliott, P. (1974). Uses and gratifications research: A critique and a sociological alternative. In J. G. Blumler & E. Katz (Eds.), *The uses of mass communications: Current perspectives on gratifications research* (pp. 249–268). Beverly Hills, CA: Sage.

Eyal, K., & Rubin, A. M. (2003). Viewer aggression and homophily, identification, and parasocial relationships with television characters. *Journal of Broadcasting & Electronic Media*, *47*(1), 77–98.

Figueiredo, C. M., & Diogo, A. R. (2021). Constructed images and the inner self: Reading identities in “The Queen’s Gambit.” In *International Conference on Applied Human Factors and Ergonomics* (pp. 585-592). Springer.

Fischer, R. A. L., Walczuch, R., & Guzman, E. (2021). Does culture matter? Impact of individualism and uncertainty avoidance on app reviews. *Proceedings - International Conference on Software Engineering*, 67–76.

Foucault, M. (2001). *Madness and civilization*. Taylor & Francis Group.

Fraley, R. C., & Waller, N. G. (1998). Adult attachment patterns: A test of the typological model. In J. A. Simpson & W. S. Rholes (Eds.), *Attachment theory and close relationships* (pp. 77–114). The Guilford Press.

Fürsich, E. (2009). In defense of textual analysis. *Journalism Studies*, *10*(2), 238-252.

Fu, X., Zhang, K., & Chen, X. (Eds.). (2021). *Zhongguo guomin xinli jiankang fazhan baogao (2019–2020)* [中国国民心理健康发展报告 (2019–2020)] [Report on national mental health development in China (2019–2020)]. Social Sciences Academic Press.

Gao, Y. (2016). Inventing the ‘authentic’ self: American television and Chinese audiences in global Beijing. *Media, Culture & Society*, *38*(8), 1201–1217.

Gao, Z. (2021). Mental health of Chinese in Canada. In *Mental health in China and the Chinese diaspora: Historical and cultural perspectives* (pp. 211-223). Springer.

Gattoni, A. (2021). Family narratives and mental illness in This Is Us. In M. Johnson & C. J. Olson (Eds.), *Normalizing mental illness and neurodiversity in entertainment media: Quieting the madness* (pp. 37-52). Routledge.

Gerbner, G. (1959). Mental illness on television: A study of censorship. *Journal of Broadcasting*, *3*(4), 293–303.

Gerbner, G., Gross, L., Morgan, M., & Signorielli, N. (1978). Cultural indicators: Violence profile no. 9. *Journal of Communication*, *28*(3), 176–207.

Gerbner, G., Gross, L., Morgan, M., & Signorielli, N. (1986). Living with television: The dynamics of the cultivation process. In J. Bryant & D. Zillmann (Eds.), *Perspectives on media effects* (pp. 17-40). Lawrence Erlbaum Associates.

Gerlach, P., & Eriksson, K. (2021). Measuring cultural dimensions: External validity and internal consistency of Hofstede's VSM 2013 scales. *Frontiers in Psychology*, *12*, 662604.

Gilman, S. L. (1988). *Disease and representation: Images of illness from madness to AIDS*. Cornell University Press.

Giovannelli, A. (2009). In sympathy with narrative characters. *The Journal of Aesthetics and Art Criticism*, *67*(1), 83–95.

Gorton, K. (2009). *Media audiences: Television, meaning and emotion*. Edinburgh University Press.

Gorton, K. (2021). 'Don't let the bastards grind you down': Feminist resilience/resilient feminism in *The Handmaid's Tale* (hulu, 2017–). *Critical Studies in Television*, 16(3), 227-244.

Goffman, E. (1963). *Stigma: Notes on the management of spoiled identity*. Prentice-Hall.

Graham, J., Nosek, B. A., Haidt, J., Iyer, R., Koleva, S., & Ditto, P. H. (2011). Mapping the moral domain. *Journal of Personality and Social Psychology*, *101*(2), 366–385.

Graham, R., Berkowitz, B., Blum, R., Bockting, W., Bradford, J., de Vries, B., & Makadon, H. (2011). *The health of lesbian, gay, bisexual, and transgender people: Building a foundation for better understanding*. National Academies Press.

Green, M. C., Brock, T. C., & Kaufman, G. F. (2004). Understanding media enjoyment: The role of transportation into narrative worlds. *Communication Theory*, *14*(4), 311–327.

Hagelin S (2013) *Reel Vulnerability: Power, pain, and gender in contemporary American film and television.* New Brunswick: Rutgers University Press.

Hall, S. (1980). Encoding/Decoding. In S. Hall, D. Hobson, A. Lowe, & P. Willis (Eds.), *Culture, Media, Language* (pp. 128–138). London, UK: Hutchinson University Librar

Haridakis, P., & Rubin, A. M. (2003). Motivation for watching television violence and viewer aggression. *Mass Communication & Society*, *6*(1), 29–56.

Harper, S. (2009). *Madness, power and the media: Class, gender and race in popular representations of mental distress*. Springer.

Henderson, L. (2017). Popular television and public mental health: Creating media entertainment from mental distress. *Critical Public Health*, *28*(1), 106-117.

Hermann, E., Morgan, M., & Shanahan, J. (2021). Television, continuity, and change: A meta-analysis of five decades of cultivation research. *Journal of Communication*, *71*(4), 515–544.

Herold, S., & Sisson, G. (2024). 'I could see myself doing something like that': US women's engagement with characters who experience abortion, adoption and surrogacy on Little Fires Everywhere. *Culture, Health & Sexuality*, *26*(6), 839-854.

Hewett, R. (2018). Performing Sherlock: A study in studio and location realism. In T. Cantrell & C. Hogg (Eds.), *Exploring Television Acting* (pp. 15–28). Methuen Drama Bloomsbury.

Hoffner, C., & Buchanan, M. (2005). Young adults' wishful identification with television characters: The role of perceived similarity and character attributes. *Media Psychology*, *7*(4), 325-351.

Hoffner, C. A., & Cohen, E. L. (2012). Responses to obsessive compulsive disorder on Monk among series fans: Parasocial relations, presumed media influence, and behavioral outcomes. *Journal of Broadcasting & Electronic Media*, *56*(4), 650-668.

Hoffner, C. A., & Cohen, E. L. (2015). Portrayal of mental illness on the TV series Monk: Presumed influence and consequences of exposure. *Health Communication*, *30*(10), 1046-1054.

Hofstede, G. (1991). Cultures and organizations: Software of the mind. *McGraw Hills*.

Hofstede, G. (1993). Cultures and organizations: Software of the mind. *Administrative Science Quarterly*, *38*(1), 132-134.

Hofstede, G. (2011). Dimensionalizing cultures: The Hofstede model in context. *Online Readings in Psychology and Culture*, *2*(1), 8.

Hoorn, J. F., & Konijn, E. A. (2003). Perceiving and experiencing fictional characters: An integrative account. *Japanese Psychological Research*, *45*(4), 250–268.

Hoskins, C., & Mirus, R. (1988). Reasons for the U.S. dominance of the international trade in television programmes. *Media, Culture & Society*, *10*(4), 499–515.

Huang, H. Y. (2021). Psychiatry and mental health in post-reform China. In *Mental health in China and the Chinese diaspora: Historical and cultural perspectives* (pp. 57-68). Springer.

Huang, K. Y., Fung, H. H., & Sun, P. (2024). The effect of audience–character similarity on identification with narrative characters: A meta-analysis. *Current Psychology*, *43*(8), 7026–7043.

Huang, Y., Wang, Y., Wang, H., Liu, Z., Yu, X., Yan, J., Yu, Y., Kou, C., Xu, X., Lu, J., Wang, Z., He, S., Xu, Y., He, Y., Li, T., Guo, W., Tian, H., Xu, G., Xu, X., ... Wu, Y. (2019). Prevalence of mental disorders in China: A cross-sectional epidemiological study. *The Lancet Psychiatry*, *6*(3), 211–224.

Hyler, S. E., Gabbard, G. O., & Schneider, I. (1991). Homicidal maniacs and narcissistic parasites: Stigmatization of mentally ill persons in the movies. *Psychiatric Services*, *42*(10), 1044-1048.

IMDb. (n.d.). *The End of the F*ing World*. Retrieved December 12, 2022.

Issakainen, M. (2014). Young people negotiating the stigma around their depression. *Young*, *22*(2), 171-184.

Janicke, S. H., & Raney, A. A. (2015). Exploring the role of identification and moral disengagement in the enjoyment of an antihero television series. *Communications*, *40*(4), 485–495.

Janicke, S. H., & Raney, A. A. (2018). Modeling the antihero narrative enjoyment process. *Psychology of Popular Media Culture*, *7*(4), 533–546.

Jiang, Q., & Leung, L. (2012a). Effects of individual differences, awareness-knowledge, and acceptance of internationalization on young viewers' adoption of foreign TV content in China. *Asian Journal of Communication*, *22*(4), 381–399.

Jiang, Q., & Leung, L. (2012b). Lifestyles, gratifications sought, and narrative appeal: American and Korean TV drama viewing among Internet users in urban China. *International Communication Gazette*, *74*(2), 159-180.

Jirattikorn, A. (2021). Between ironic pleasure and exotic nostalgia: Audience reception of Thai television dramas among youth in China. *Asian Journal of Communication*, *31*(2), 124–143.

Johnson, B. K., Slater, M. D., Silver, N. A., & Ewoldsen, D. R. (2016). Entertainment and expanding boundaries of the self: Relief from the constraints of the everyday. *Journal of Communication*, *66*(3), 386–408.

Johnson, D. A. (2008). Managing Mr. Monk: Control and the politics of madness. *Critical Studies in Media Communication*, *25*(1), 28-47.

Johnson, M., & Olson, C. J. (Eds.). (2021). *Normalizing mental illness and neurodiversity in entertainment media: Quieting the madness*. Routledge.

Katz, E. (1959). *Mass communications research and the study of popular culture: An editorial note on a possible future for this journal* (Departmental Papers, ASC 1). Annenberg School for Communication, University of Pennsylvania.

Katz, E., & Foulkes, D. (1962). On the use of the mass media as "escape": Clarification of a concept. *Public Opinion Quarterly*, *26*(3), 377–388.

Katz, E., Blumler, J. G., & Gurevitch, M. (1974). Utilization of mass communication by the individual. In J. G. Blumler & E. Katz (Eds.), *The uses of mass communications: Current perspectives on gratifications research* (pp. 19–32). Sage.

Katz, E., Haas, H., & Gurevitch, M. (1973). On the use of the mass media for important things. *American Sociological Review*, *38*(2), 164-181.

Kilpatrick, D. G., Resnick, H. S., Milanak, M. E., Miller, M. W., Keyes, K. M., & Friedman, M. J. (2013). National estimates of exposure to traumatic events and PTSD prevalence using DSM-IV and DSM-5 criteria. *Journal of Traumatic Stress*, *26*(5), 537-547.

Klin, A., & Lemish, D. (2008). Mental disorders stigma in the media: Review of studies on production, content, and influences. *Journal of Health Communication*, *13*(5), 434–449.

Ko, H., Cho, C. H., & Roberts, M. S. (2005). Internet uses and gratifications: A structural equation model of interactive advertising. *Journal of Advertising*, *34*(2), 57-70.

Kooijman, J. (2021). Double nostalgia in The Queen's Gambit. *16:9 Film-tidsskrift*.

Krcmar, M., & Strizhakova, Y. (2009). Uses and gratifications as media choice. In R. L. Nabi & M. B. Oliver (Eds.), *Media choice: A theoretical and empirical overview* (pp. 53-69). Routledge.

Kroll, J. (2012). The psychology of the anti-hero and the idea of heroism. *Psychiatry*, *75*(2), 101–107.

Kubicka, H. K. (2021). *Seeing yourself in fiction: The theory and practice of identification with TV characters* [Doctoral dissertation, University of Glasgow]. University of Glasgow.

La Pastina, A. C., & Straubhaar, J. D. (2005). Multiple proximities between television genres and audiences: The schism between telenovelas' global distribution and local consumption. *International Communication Gazette*, *67*(3), 271-288.

Lauber, C., & Rössler, W. (2007). Stigma towards people with mental illness in developing countries in Asia. *International Review of Psychiatry*, *19*(2), 157–178.

Lawson, A., & Fouts, G. (2004). Mental illness in Disney animated films. *The Canadian Journal of Psychiatry*, *49*(5), 310-314.

Li, J., Zhang, M. M., Zhao, L., Li, W. Q., Mu, J. L., & Zhang, Z. H. (2018). Evaluation of attitudes and knowledge toward mental disorders in a sample of the Chinese population using a web-based approach. *BMC Psychiatry*, *18*(1), Article 363.

Li, S., Shi, Y., Chen, T., & Zhao, M. (2023). An exploratory study on the 10-year dynamic changes of mental health policy development and media stigma

reporting in China (2011–2020). *International Journal of Social Psychiatry*, *69*(6), 1388–1398.

Liebes, T., & Katz, E. (1993). *The export of meaning: Cross-cultural readings of dallas (2nd ed.)*. Polity Press.

Link, B. G., & Phelan, J. C. (2001). Conceptualizing stigma. *Annual Review of Sociology*, *27*, 363–385.

Livingstone, S. M. (1990). *Making Sense of Television: The Psychology of Audience Interpretation*. Pergamon Press.

Livingstone, S. (1998). Relationships between media and audiences: Prospects for audience reception studies. In T. Liebes & J. Curran (Eds.), *Media, ritual and identity* (pp. 237–255). Routledge.

Loftis, S. F. (2014). The autistic detective: Sherlock Holmes and his legacy. *Disability Studies Quarterly*, *34*(4).

Loo, P. W., & Furnham, A. (2012). Public knowledge and beliefs about depression among urban and rural Chinese in Malaysia. *Asian Journal of Psychiatry*, *5*(3), 236–245.

Lopera-Mármol, M., Jiménez-Morales, M., & Jiménez-Morales, M. (2022). Aesthetic representation of antisocial personality disorder in British coming-of-age TV series. *Social Sciences*, *11*(3), 133.

Lotz, A. D. (2014). *The Television Will Be Revolutionized (2nd ed.)*. New York University Press.

Lu, J., Liu, X., & Cheng, Y. (2019). Cultural proximity and genre proximity: How do Chinese viewers enjoy American and Korean TV dramas? *SAGE Open*, *9*(1).

Lury, K. (2005). *Interpreting television.* Hodder Education: Hodder Arnold.

Mak, W. W., & Chen, S. X. (2010). Illness behaviours. In M. H. Bond (Ed.), *The Oxford handbook of Chinese psychology* (pp. 421-436). Oxford University Press.

Marmar, C. R., & Horowitz, M. J. (1988). Diagnosis and phase-oriented treatment of post-traumatic stress disorder. In J. P. Wilson, Z. Harel, & B. Kahana (Eds.), *Human adaptation to extreme stress: From the Holocaust to Vietnam* (pp. 81-103). Springer.

McGinn, C. (2007). *The power of movies: How screen and mind interact*. Vintage.

McKee, A. (2003). *Textual analysis: A beginner's guide*. Sage Publications.

McMahon-Coleman, K. (2021). An emotional black hole: Representations of mental illness in television's You're the Worst. *Journal of Asia-Pacific Pop Culture*, *6*(1), 148–167.

Mendelson, A. L., & Papacharissi, Z. (2007). Reality television is not "reality": Implications of genre-specific media literacy. In R. Butsch (Ed.), *Media and public spheres* (pp. 251–264). Palgrave Macmillan.

Meng, J. (2015). Prohibition and production of the past: Representation of the Cultural Revolution in TV dramas. *Media, Culture & Society*, *37*(5), 671–685.

Morley, D. (1992). *Television, audiences and cultural studies*. Routledge.

Samuel, M., Trimmel, T. (2025). *Television and empathy*. Springer Nature Switzerland.

Middleton, C. (2013). The use of cinematic devices to portray mental illness. *eTropic: Electronic Journal of Studies in the Tropics*, *12*(2), 1-13.

Miller, A., Atherton, C., & Hetherington, P. (2022). Agents of chaos: The monstrous feminine in Killing Eve. *Feminist Media Studies*, *22*(8), 2117-2132.

Mittell, J. (2006). Narrative complexity in contemporary American television. *The Velvet Light Trap*, *58*, 29–40.

Mittell, J. (2015). *Complex TV: The poetics of contemporary television storytelling*. New York University Press.

Morgan, M., & Shanahan, J. (2010). The state of cultivation. *Journal of Broadcasting & Electronic Media*, *54*(2), 337–355.

Morgan, M., Shanahan, J., & Signorielli, N. (2014). Cultivation theory in the twenty-first century. In R. S. Fortner & P. M. Fackler (Eds.), *The handbook of media and mass communication theory* (pp. 347-365). Wiley-Blackwell.

Moyer-Gusé, E. (2008). Toward a theory of entertainment persuasion: Explaining the persuasive effects of entertainment-education messages. *Communication Theory*, *18*(3), 407–425.

Mueller, T. (2022). Masculinity and PTSD: Violence among veterans in the BBC series Peaky Blinders. *Journal of Contemporary Rhetoric*, *12*(1), 1-15.

Nakken, C. (1996). *The addictive personality* (2nd ed.). Hazelden Publications.

National Health Commission of China. (2020). *Exploring a Work Plan for Depression Prevention and Treatment Services* [探索抑郁症防治特色服务工作方案]

Nelson, R. (2013). State of Play: Contemporary “high-end” TV drama. In *State of play*. Manchester University Press.

O’Sullivan, S. (2021). Bipolar and Shameless: Showtime's portrayal of living and working with bipolar disorder. In M. Johnson & C. J. Olson (Eds.), *Normalizing mental illness and neurodiversity in entertainment media: Quieting the madness* (pp. 177-193). Routledge.

Ogihara, Y., & Bao, H. W. S. (2023). Chinese culture became more individualistic: Evidence from family structure, 1953-2017. *F1000Research*, *12*, 10.

Ozturk, E., & Sar, V. (2006). The “apparently normal” family: A contemporary agent of transgenerational trauma and dissociation. *Journal of Trauma Practice*, *4*(3-4), 287-303.

Padykula, N. L., & Conklin, P. (2010). The self-regulation model of attachment trauma and addiction. *Clinical Social Work Journal*, *38*(4), 351-360.

Parker, G., Gladstone, G., & Chee, K. T. (2001). Depression in the planet's largest ethnic group: The Chinese. *The American Journal of Psychiatry*, 158(6), 857-864.

Parker, L. R., Monteith, M. J., & South, S. C. (2020). Dehumanization, prejudice, and social policy beliefs concerning people with developmental disabilities. *Group Processes & Intergroup Relations*, *23*(2), 262–284.

Parrott, S., & Parrott, C. T. (2015). Law & disorder: The portrayal of mental illness in U.S. crime dramas. *Journal of Broadcasting & Electronic Media*, *59*(4), 640-657.

Peberdy, D. (2012). 'I'm just a character in your film': Acting and performance from autism to Zissou. *New Review of Film and Television Studies*, *10*(1), 46-67.

Peluso, P. R., Peluso, J. P., White, J. F., & Kern, R. M. (2004). A comparison of attachment theory and individual psychology: A review of the literature. *Journal of Counseling & Development*, *82*(2), 139-145.

Perse, E. M., & Lambe, J. L. (2017). *Media effects and society* (2nd ed.). Routledge.

Pescosolido, B. A., Medina, T. R., Martin, J. K., & Long, J. S. (2013). The "backbone" of stigma: identifying the global core of public prejudice associated with mental illness. *American journal of public health*, 103(5), 853–860.

Pirkis, J., Blood, R. W., Francis, C., & McCallum, K. (2006). On-screen portrayals of mental illness: Extent, nature, and impacts. *Journal of Health Communication*, *11*(5), 523–541.

Polletta, F., & Redman, N. (2020). When do stories change our minds? Narrative persuasion about social problems. *Sociology Compass*, *14*(4), e12778.

Potter-Efron, R. (2006). Attachment, trauma and addiction. *Journal of Chemical Dependency Treatment*, *8*(2), 71-87.

Qianshui. (2021, February 4). *After YYeTs are seized, who will receive the "American TV Refugees"?* NetEase News.

Rajan, B. (2021). Popular culture and the (mis)representation of Asperger's: A study on the sitcoms Community and The Big Bang Theory. In M. Johnson & C. J. Olson (Eds.), *Normalizing mental illness and neurodiversity in entertainment media: Quieting the madness* (pp. 66-82). Routledge.

Raney, A. A. (2004). Expanding disposition theory: Reconsidering character liking, moral evaluations, and enjoyment. *Communication Theory*, *14*(4), 348–369.

Raney, A. A. (2011). The role of morality in emotional reactions to and enjoyment of media entertainment. *Journal of Media Psychology: Theories, Methods, and Applications*, *23*(1), 18–23.

Rickwood, D. J., Deane, F. P., & Wilson, C. J. (2007). When and how do young people seek professional help for mental health problems? *Medical Journal of Australia*, *187*(S7), S35-S39.

Riles, J. M., Miller, B., Funk, M., & Morrow, E. (2021). The modern character of mental health stigma: A 30-year examination of popular film. *Communication Studies, 72*(4), 668-683.

Rogers, E. M., & Bhowmik, D. K. (1970). Homophily-heterophily: Relational concepts for communication research. *Public Opinion Quarterly, 34*(4), 523–538.

Rohm, S., Hopp, F. R., & Smit, E. G. (2022). Exposure to serial audiovisual narratives increases empathy via vicarious interactions. *Media Psychology*, *25*(1), 106–127.

Rohr, S. (2015). Screening madness in American culture. *Journal of Medical Humanities*, *36*(3), 231–240.

Rose, D. (1998). Television, madness and community care. *Journal of Community & Applied Social Psychology*, *8*(3), 213-228.

Rose, N. (2003) 'Neurochemical Selves', *Society*, 41(1), pp. 46-59.

Rubin, A. M. (1983). Television uses and gratifications: The interactions of viewing patterns and motivations. *Journal of Broadcasting*, *27*(1), 37–51.

Ruggiero, T. E. (2000). Uses and gratifications theory in the 21st century. *Mass Communication & Society*, *3*(1), 3–37.

Sar, V., & Ozturk, E. (2006). What is trauma and dissociation? *Journal of Trauma Practice*, *4*(1-2), 7-20.

Schiappa, E., Gregg, P. B., & Hewes, D. E. (2005). The parasocial contact hypothesis. *Communication Monographs*, *72*(1), 92–115.

Schneider, F. (2022). *Visual political communication in popular Chinese television series*. Brill.

Segrin, C., & Nabi, R. L. (2002). Does television viewing cultivate unrealistic expectations about marriage? *Journal of Communication*, *52*(2), 247–263.

Shafer, D. M., & Raney, A. A. (2012). Exploring how we enjoy antihero narratives. *Journal of Communication*, *62*(6), 1028–1046.

Shain, R. E., & Phillips, J. (1991). The stigma of mental illness: Labeling and stereotyping in the news. In L. Wilkins & P. Patterson (Eds.), *Risky business: Communicating issues of science, risk, and public policy* (pp. 61–74). Greenwood Press.

Shanahan, J., & Morgan, M. (1999). *Television and its viewers: Cultivation theory and research*. Cambridge University Press.

Shaver, P. R., & Mikulincer, M. (2007). Adult attachment strategies and the regulation of emotion. In J. J. Gross (Ed.), *Handbook of emotion regulation* (pp. 446-465). The Guilford Press.

Shi, W., Shen, Z., Wang, S., & Hall, B. J. (2020). Barriers to professional mental health help-seeking among Chinese adults: A systematic review. *Frontiers in Psychiatry*, *11*, 442.

Shrum, L. J., Lee, J., Burroughs, J. E., & Rindfleisch, A. (2011). An online process model of second-order cultivation effects: How television cultivates materialism and its consequences for life satisfaction. *Human Communication Research*, *37*(1), 34-57.

Shuster, M. (2021). New television and film. In D. Carr, M. Munslow, & S. C. E. S. Writing (Eds.), *The Routledge companion to historical theory* (pp. 446–461). Routledge.

Sieff, E. M. (2003). Media frames of mental illnesses: The potential impact of negative frames. *Journal of Mental Health*, *12*(3), 259-269.

Signorielli, N. (1989). The stigma of mental illness on television. *Journal of Broadcasting & Electronic Media*, *33*(3), 325-331.

Silverman, D. (2017). *Doing qualitative research* (5th ed.). Sage Publications.

Silvia, P. J. (2006). *Exploring the psychology of interest*. Oxford University Press.

Smith, M. (2023) 'Forward: Empathy Redux', in Mezzenzana, F., & Peluso, D. (eds.) *Conversations on Empathy*. 1st edn. London; New York: Routledge, pp. x–xviii.

Sroufe, L. A. (1988). The role of infant-caregiver attachment in development. In J. Belsky & T. Nezworski (Eds.), *Clinical implications of attachment* (pp. 18-38). Lawrence Erlbaum Associates.

Stadler, J. (2017). The empath and the psychopath: Ethics, imagination, and intercorporeality in Bryan Fuller's Hannibal. *Film-Philosophy*, *21*(3), 410-427.

Stafford, T. F., Stafford, M. R., & Schkade, L. L. (2004). Determining uses and gratifications for the Internet. *Decision Sciences*, *35*(2), 259–288.

State Administration of Press, Publication, Radio, Film and Television. (2014a). *Notice on further implementing the regulations concerning the administration of online overseas film and television dramas*.

State Administration of Press, Publication, Radio, Film and Television. (2014b). *The State Administration of Radio, Film and Television reiterated the relevant regulations on the management of online overseas film and television dramas*.

Stuart, H. (2006). Media portrayal of mental illness and its treatments. *CNS Drugs*, *20*(2), 99–106.

Sun, B. (2014a, May 12). 35 years of American series. *China Economic Weekly*.

Sun, B. (2014b, May 12). The business of American series in China. *China Economic Weekly*.

Sun, K. S., Lam, T. P., & Wu, D. (2018). Chinese perspectives on primary care for common mental disorders: Barriers and policy implications. *International Journal of Social Psychiatry*, *64*(5), 417–426.

Tan, S. K. (2011). Global Hollywood, narrative transparency, and Chinese media poachers: Narrating cross-cultural negotiations of Friends in South China. *Television & New Media*, *12*(3), 207–227.

Tang, Y., Dou, X., & Oliver, M. B. (2018). "Harmonious Middle Kingdom and dangerous beautiful country?" Exploring cultivation effects of domestic and U.S.-made TV programs on Chinese college students. *International Journal of Communication*, *12*, 3379–3400.

Taylor, S. M., & Dear, M. J. (1981). Scaling community attitudes toward the mentally ill. *Schizophrenia Bulletin*, *7*(2), 225–240.

Taylor, W. L. (1957). Gauging the mental health content of the mass media. *Journalism Quarterly*, *34*(2), 191–201.

Thomas, R. M. (2003). Blending qualitative & quantitative research methods in theses and dissertations. Sage Publications.

Thompson, R. J. (1996). *Television's second golden age: From Hill Street Blues to ER*. Syracuse University Press.

Tian, Q., & Hoffner, C. A. (2010). Parasocial interaction with liked, neutral, and disliked characters on a popular TV series. *Mass Communication and Society*, *13*(3), 250-269.

Tirasawasdichai, T., Obrenovic, B., & Alsharif, H. Z. H. (2022). The impact of TV series consumption on cultural knowledge: An empirical study based on gratification–cultivation theory. *Frontiers in Psychology*, *13*, 1061850.

Tulloch, J. (2000). *Watching television audiences: Cultural theories and methods*. Oxford University Press.

Vaage, M. B. (2015). *The antihero in American television*. Routledge.

Vorderer, P., Klimmt, C., & Ritterfeld, U. (2004). Enjoyment: At the heart of media entertainment. *Communication Theory*, *14*(4), 388–408.

Wahl, O. F. (1995). *Media madness: Public images of mental illness*. Rutgers University Press.

Wahl, O. F. (2003). Depictions of mental illnesses in children's media. *Journal of Mental Health, 12*(3), 249–258.

Wang, Q., Ding, F., Chen, D., Zhang, X., Shen, K., Fan, Y., & Li, L. (2020). Intervention effect of psychodrama on depression and anxiety: A meta-analysis based on Chinese samples. *The Arts in Psychotherapy*, *69*, 101661.

Wen, W. (2017). *Fans of American drama: Media consumption and identity construction*. Beijing Book Co. Inc.

Wieder, H., & Kaplan, E. H. (1969). Drug use in adolescents: Psychodynamic meaning and pharmacogenic effect. *The Psychoanalytic Study of the Child*, *24*(1), 399-431.

Wilson, C., Nairn, R., Coverdale, J., & Panapa, A. (2000). How mental illness is portrayed in children's television: A prospective study. *The British Journal of Psychiatry*, *176*(5), 440-443.

Wisdom, J. P., & Green, C. A. (2004). "Being in a funk": teens' efforts to understand their depressive experiences. *Qualitative health research*, 14(9), 1227–1238.

Wood, H. (2009). *Talking with television: Women, talk shows, and modern self-reflexivity*. University of Illinois Press.

Wu, Y. (2015). *The influence of American drama series on Chinese online viewers* [Doctoral dissertation, University of Connecticut]. UConn Stacks.

Xiang, Y. T., Ng, C. H., Yu, X., & Wang, G. (2018). Rethinking progress and challenges of mental health care in China. *World Psychiatry*, *17*(2), 231-232.

Xie, Y., Yasin, M. A. I. B., Alsagoff, S. A. B. S., & Hoon, L. (2022). An overview of Stuart Hall's encoding and decoding theory with film communication. *Multicultural Education*, *8*(1), 190-198.

Xu, M. (2018). *American TV series in China: How online viewing impacts perceptions of reality, cultural values and identity* [Doctoral dissertation, University of Canterbury]. UC Research Repository.

Yin, H., Wardenaar, K. J., Xu, G., Tian, H., & Schoevers, R. A. (2020). Mental health stigma and mental health knowledge in Chinese population: A cross-sectional study. *BMC Psychiatry*, *20*(1), 323.

Yu, H. (2024). Why do people use Metaverse? A uses and gratifications theory perspective. *Telematics and Informatics*, *89*, 102110.

Yu, T., Yang, W., Wu, R., Xu, J., & Yang, J. (2025). A multidimensional exploration based on Hofstede's cultural theory: An empirical study on Chinese audience acceptance of American animated films. *Behavioral Sciences*, *15*(2), 164.

Zelenko, M. A., & Benham, A. (2002). Attachment theory, loss and trauma: A case study. *Clinical Child Psychology and Psychiatry*, *7*(2), 199-209.

Zhang, J., & Han, T. (2023). Individualism and collectivism orientation and the correlates among Chinese college students. *Current Psychology*, *42*(5), 3811–3821.

Zhang, X., & Su, C. C. (2021). Transnational media consumption dissonance and ambivalent sexism: How American and Korean television drama consumption shapes Chinese audiences' gender-role values. *The International Communication Gazette*, *83*(5), 428-450.

Zhang, X., Lewis, S., Firth, J., Chen, X., & Bucci, S. (2021). Digital mental health in China: A systematic review. *Psychological Medicine*, *51*(15), 2552-2570.

Zhang, Y. B., & Harwood, J. (2002). Television viewing and perceptions of traditional Chinese values among Chinese college students. *Journal of Broadcasting & Electronic Media*, *46*(2), 245-264.

Zhu, Y. (2021, February 3). *YYeTs involved in piracy of more than 20,000 films and TV works, Shanghai police arrested 14 people*. The Paper.