

Psychiatry and the media

Beautiful Dreamers. A Rediscovery of Love and Compassion

(Blue Dolphin Film Distributors)

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The National Film Board of Canada has a highly honourable record of making or promoting movies which would have been unlikely to survive through the millstones of commercial production. Although the credits of most films are of such Byzantine complexity that it is virtually impossible to work out who was responsible for anything, 'Beautiful Dreamers' seems to have resulted from a partnership between the Board, other public bodies, and commercial companies, and since a story set in a Canadian mental hospital in 1880 does not strike one as immediately bankable, that may have been just as well.

The film so egregiously has its heart in the right place that it seems bad form to be anything but enthusiastic for it. The story had in fact appeared a few years ago as a book (*Victorian Lunacy* by S. E. D. Shortt, 1986. Cambridge: CUP), although one which made rather little impact, and the scriptwriters – as is their wont – rewrote it all extensively. I understand that it took a very long time to arrive at the agreed plot, which now runs something like this.

Dr Bucke has recently taken charge of the small asylum at London, Ontario; one of his assistants is keen but naive, the other rigid and punitive; there is also an attractive wife, who has little to do but rearrange vases in the drawing room. The local community is unenlightened, particularly as represented by the Anglican minister, who is his wife's relative.

Bucke goes to a meeting (presumably the APA) in Philadelphia, where he is appalled by a lecture recommending the treatment of insanity in females by removing both ovaries. Storming out in disgust, he is approached by Walt Whitman, who was there hoping to learn something helpful for his brother. Whitman takes him home, where the brother seems to have mental retardation of a non-verbal level and to be receiving excellent community care.

Bucke now persuades Whitman to come to the asylum (what will happen to the brother?) and from this point, the film drops into the familiar buddy-buddy formula with a peripheral female. Bucke's



Wendel Meldrum as Jessie Bucke, Marsha Moreau as Birdie Bucke, Rip Torn as Walt Whitman and Colm Feore as Dr Bucke.

return causes some alarm in London, since he has taken off his tie and put on a straw hat with a hole in it; he retains this ensemble for the rest of the film, and anyone wearing a tie is now suspect. In the asylum, Tuke, Pinel, and Conolly are re-invented. Meanwhile, *chez Bucke*, Mrs B. disapproves of Whitman's earthiness and drowns her frustration in an early Canadian version of *Wincarnis*. The plot focuses on two patients – a female admitted in stupor from a farm where the women seem to fare rather worse than the cattle, and a man who has severe spastic deformities and probable mental retardation. In a

tasteless aside, Mrs Bucke finds the two buddies swimming in a pool, and strips off in front of both: the film-makers claim that this shows how Whitman's poetry "celebrated the joy of life, love and partnership", but it lacks all credibility and seems rather the sort of thing male directors put in whenever they can.

Led by their vicar, the local population are increasingly unhappy about the liberalisation going on in the asylum. Mrs Bucke, though, has started reading Whitman's poetry, and this does wonders for the Buckes' sex life; Whitman's own homosexuality is tactfully ignored. In the *dénouement*, Bucke arranges a cricket match between the patients and the town First Eleven: the spastic patient catches out the vicar, and the tea interval is taken after one over, suggesting that Canadians were failing to adopt a serious enough approach to the game. We are left to assume that the Buckes lived happily ever after and that Whitman went back to look after his brother.

Film-makers readily fall into the habit of representing a dispute as a Manichean struggle between good and evil, when reality is nearly always much more complex and messy. What actually went on at the London asylum was not on that heroic scale, but

perhaps a more accurate portrayal would have drawn few punters to the cinema. For a psychiatrist, it is disconcerting to find as the representative male patient someone who almost certainly was not mentally ill. The film-makers' reply that such a person would very likely have been found in the asylum is perfectly true, and one can appreciate that for their dramatic and visual needs, the person they chose performed very well. However, for those who are patiently trying to inform the public that psychiatric illness and mental retardation are two different disorders (even though they sometimes co-exist), this will be one more obstacle to be overcome.

Those who took part in the film generally played their parts convincingly, even if a few were assigned fairly stereotyped roles. However, Whitman (the unbelievably named Rip Torn) is so given to the delivery of lovable, homespun, crackerbarrel philosophy that one suspects he was largely playing himself. Yet in the short scene where he recited a passage from *Leaves of Grass*, he at last attains real credibility and dignity. In general, though, this film seems likely to be, as A. J. Ayer said, "of interest to those of us who are interested in this sort of thing".

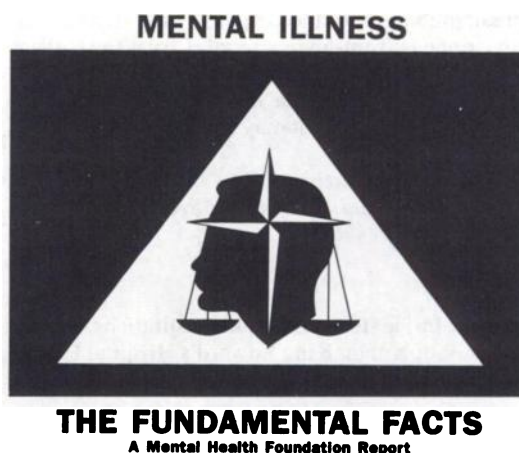
Psychiatric Bulletin (1991), 15, 251–252

Reviews

Mental Illness: The Fundamental Facts.

A Mental Health Foundation Report, 1990.
The Mental Health Foundation, 8 Hallam Street,
London W1N 6DH

There is no doubt that, despite the revolution in *systems* of information, the availability of some of the simplest facts remains variable and frustrating. This paradoxical situation has a number of causes, not least the desire to obscure or deflect criticism of services, as reflected in the government's direct cuts in its own information resources. Nevertheless, the structural changes in the NHS are based upon identifying more accurately how money is spent, and thus demand measures of activity at all clinical levels. If we wish to protect or develop the so-called priority services, we must put forward a well-documented case. Mental illness has long been overshadowed by the shroud-waving pleas of the more appealing charities (e.g. children, cancer, animals), despite its wider prevalence and impact. This booklet, of some



40 pages, from the Mental Health Foundation, sets out to counter such effects by providing some basic, and often startling, facts and comparisons. It is brief,