International Journal of Adolescence and Youth

ISSN: (Print) (Online) Journal homepage: www.tandfonline.com/journals/rady20

# An initial grounded theory of how young people with mental health problems experience and are affected by fictional representation

Lizzie Driscoll, Charlotte Hartley-Jones & Fergal W. Jones

**To cite this article:** Lizzie Driscoll, Charlotte Hartley-Jones & Fergal W. Jones (2025) An initial grounded theory of how young people with mental health problems experience and are affected by fictional representation, International Journal of Adolescence and Youth, 30:1, 2442033, DOI: 10.1080/02673843.2024.2442033

**To link to this article:** https://doi.org/10.1080/02673843.2024.2442033



Published online: 17 Dec 2024.

INTERNATIONAL JOURNAL OF ADOLESCENCE AND YOUTH
2025, VOL. 30, NO. 1, 2442033
https://doi.org/10.1080/02673843.2024.2442033

Routledge
Taylor & Francis Group



# An initial grounded theory of how young people with mental health problems experience and are affected by fictional representation

Lizzie Driscoll [a,b], Charlotte Hartley-Jones [a,c] and Fergal W. Jones [a]

[a]Salomons Institute for Applied Psychology, Canterbury Christ Church University, Tunbridge Wells, UK; [b]Psychological Medicine Department, University College London Hospital, London, UK; [c]School of Psychology and Counselling, The Open University, Walton Hall, Kents Hill, Milton Keynes, UK

**ABSTRACT**

Young people with mental health problems (MHPs) are increasingly exposed to representations of MHPs within fiction, but little is known about this process. This study used grounded theory to develop a preliminary understanding of how 16- to 25-year-olds with MHPs experience and are affected by fictional media representation of MHPs. Fourteen individual interviews were conducted with nine young people. The developed theory suggests that fiction was experienced as a reflection on participants' own reality, a process made up of two key stages, identification with fiction and transferring beyond fiction, whereby the representative portrayals led to both helpful and harmful impacts. Such effects seemed to depend on both personal context and the nature of the fiction. Findings are discussed in terms of relevant theory and outcomes for wellbeing, with study limitations and implications for practice and research considered.

**ARTICLE HISTORY**
Received 25 August 2024
Accepted 9 December 2024

**KEYWORDS**
Fiction; media; mental health problems; young people; representation; identification

## Introduction

There is a long history of representation of mental health problems (MHPs) within fiction, dating at least back to 450 BC, where such difficulties were central to Ancient Greek mythology and narratives including Ajax and Narcissus (Fink, 1992). Today, this representation is increasingly commonplace, with fictional characters shown dealing with MHPs across various mediums (Durham & Wilkinson, za 2020; Knapp & Knapp, 2020). Representation within fiction refers to how social groups or ideas are presented to audiences through fictional media, and it has been demonstrated to have powerful effects on young people's attitudes and the wellbeing of those portrayed (McInroy & Craig, 2017; Muhammad & McArthur, 2015). Understanding how such representation may affect individuals with MHPs may be useful for clinicians supporting those affected.

Psychotherapeutic theories could be drawn on to consider how fiction may impact those with MHPs. From the perspective of cognitive behavioural theories (e.g. Bandura, 1997; Beck, 1993), fiction can present alternatives to audiences' negative automatic thoughts and beliefs, potentially aiding with cognitive re-evaluation (Furukawa et al., 2013). Furthermore, it could provide audiences with social models they can identify with and imitate the behaviours of (Yılmaz & Yılmaz, 2019). As may be the case with representative portrayals, these processes are likely stronger when there are perceived similarities between characters and audiences (Schunk & Usher, 2012).

**CONTACT** Fergal W. Jones fergal.jones@canterbury.ac.uk

Fictional stories may also offer inspiration for the form and content of alternative, preferred stories thickened within systemic and narrative therapy (Androutsopoulou, 2001; White, 1998). The development of such altered perspectives through fiction is theorized to be stronger when stories contain similar themes to audience members' lives (Androutsopoulou, 2001), suggesting a significant influence of representative fiction. From a psychodynamic perspective, representative fiction has been theorized to offer the opportunity for identification and resultant catharsis, which Shrodes (1950) perceives are integral in enabling individuals to approach their own difficulties (Morawski, 1997). Depending on the nature of storylines and their impact on cognitions, alternative stories, or the extent to which individuals feel ready to approach difficulties, representation could – when considered from these different perspectives, be helpful or harmful for audiences' mental health and wellbeing.

Identification may be a particularly important concept when considering the impact of representation on those with MHPs. Present across different academic disciplines and psychological theories (Grusec, 1994; Meuret et al., 2016), identification has been considered key in driving media effects on audiences (Morley, 1992). It refers to the process by which portrayals are internalized and experienced from one's own perspective (Cohen, 2001), and is considered one of the main mechanisms by which self-perception, identity and attitudes are developed (Cohen, 2014; Erikson, 1968). Identification is encouraged by story creators to maintain engagement and tends to occur most often when individuals perceive similarities between themselves and the other (Igartua, 2010; Maccoby & Wilson, 1957). Thus theoretically, through identification, representative fictional characters could have long-term effects on how audiences see themselves and the world.

Turning to the empirical literature on the effects of such representation, a small number of studies have explored the impact of representative fiction on adults with MHPs (Hoffner & Cohen, 2018, Troskianko, 2018; Roberts et al., 2018). Across these studies, participants have reported both helpful and harmful effects of engagement with fiction. For example, whilst some participants experienced increased self-acceptance from identifying with characters, some found content to trigger and exacerbate their distress (e.g. Roberts et al., 2018; Troskianko, 2018). Whilst such findings support the suggestion that representation can have varying effects on individuals' mental health, it is striking that no studies to the authors' knowledge have explored the experiences of young people (i.e. 16- to 25-year-olds).

Arguably, exploring this topic in relation to young people is particularly important as this group is especially vulnerable to MHPs. Specifically, 75% of MHPs begin before individuals turn 25, and affect more 16–24-year-olds than other age-groups (Kessler et al., 2005; McManus et al., 2016). Young people tend to engage in a range of fictional content, and fictional depictions of MHPs targeted towards this group have increased in recent decades (Monaghan, 2016; Roberts & Foehr, 2008). Whilst fictional representations of MHPs have historically been considered more frequently negative (Pirkis et al., 2006), evidence suggests content has changed, with efforts to move away from stigmatizing stereotypes, and story advisors consulted more regularly to increase portrayals' realism (Carter, 2015; Johnson & Olson, 2021). Thus, portrayals young people are engaging with may differ to those of previous generations.

Furthermore, the process of identification and its effects on identity may be particularly powerful for young people (Erikson, 1968). Whilst a comprehensive theory of this process in relation to fictional portrayals is lacking, identity development theories can be drawn on to provide a framework for understanding its role for young people with MHPs. For example, within Erikson's developmental stage theory (Erikson, 1994), identity construction and consolidation are viewed as key tasks of adolescence and young adulthood. Identifying with and imitating characteristics of others are considered part of the process of building a stable identity (Erikson, 1968; Mead, 1934). Within McAdams's narrative identity theory (McAdams, 2011), identity reflects an internalized and evolving life story consisting of a reconstructed past and imagined future, developed through telling and sharing stories. This sense of self is considered to develop during late adolescence and early adulthood and may be influenced by external narratives the individual relates to, including those from fiction (Cohler & Hammack, 2007).

For young people with MHPs, challenges associated with their experience, including stigma, isolation and missed opportunities, can make developing a coherent identity more challenging (Leavey, 2009). Finding positive images depicting their situation is thus considered key in building or rebuilding a positive sense of self (Davidson & Strauss, 1992). Therefore, engaging with fictional characters with relatable experiences may be especially impactful for this group, with the helpfulness (or otherwise) of the impact depending on their perception of the portrayal (Cohen, 2001; Kokesh & Sternadori, 2015). Engaging with portrayals perceived positively may foster the development of a healthier sense of self, whilst stigmatized representations may be damaging for developing identity, and thus young people's overall mental health and psychosocial development (Leavey, 2009).

## Current study

Whilst fictional representation of MHP could theoretically be helpful or harmful for young people who have experienced MHPs, there is an absence of empirical literature examining these experiences, and little is known about how young people are affected by such content. Given the nuance, complexity and heterogeneity that likely characterize such experiences, their exploration would benefit from a qualitative approach, such as grounded theory (Corbin & Strauss, 2015). Therefore, the current study aimed to develop an initial grounded theory of how 16- to 25-year-olds, with current or previous MHPs, experience and are affected by the representation of MHPs within fiction, across media types including books, films and television. For pragmatic reasons, the study was relatively small in scope, though within the range of published grounded theory studies (e.g. Cormack et al., 2018; Langdon et al., 2011). Our hope was that this initial work would lay the foundations for subsequent, larger scale studies on this topic.

## Method

The study was granted ethical approval by a Canterbury Christ Church University research ethics committee. Ethical practice within the study was guided by the British Psychological Society's Code of Human Research Ethics (Oates et al., 2021).

### *Design*

The qualitative research design comprised individual, semi-structured interviews and took a grounded theory approach (Corbin & Strauss, 2015). Due to the relatively small scale of the study, some aspects of the grounded theory process were applied on a limited scale, in particular theoretical sampling and the point at which recruitment was ended. These are detailed further below.

### *Sampling strategy*

Following grounded theory principles, sample size was not determined prior to recruitment. Data collection and analysis were conducted concurrently until the analysis had a degree of conceptual depth (Nelson, 2017). This is a more limited criterion than theoretical saturation, which is more commonly employed with a grounded theory approach (Corbin & Strauss, 2015). The limitations of the sample size are returned to in the discussion.

Table 1 details the inclusion criteria. After opportunistic sampling was used to recruit the first four participants, theoretical sampling was employed in two ways. First, it influenced who was subsequently targeted for recruitment. For example, the emerging theory suggested that contextual factors may differ between older and younger participants within the age range. With the first four interviewees 23–25 years old, the views of younger participants were then sought out. Second, interview questions were revised to theoretically sample theoretically relevant aspects of the

**Table 1.** Inclusion criteria.

| Inclusion Criteria |
|---|
| Aged between 16–25 years old |
| Current or previous experience of mental health problems |
| Feel comfortable and stable enough to talk openly about experiences |
| Fluent in spoken and written English. |
| Live in the UK |
| Have watched television programmes, films, heard radio programmes or read books including fictional stories of mental health difficulties. |

participants' experiences, with some participants interviewed twice. This enabled areas that have emerged as theoretically important, after a participant's first interview, to be explored in their second.

### *Participants and recruitment*

Fourteen interviews were conducted with niner participants (Table 2). All the participants were interviewed individually, with five being interviewed for a second time, again individually. In line with theoretical sampling (Corbin & Strauss, 2015), these five 'second-interviews' focussed in greater depth on topics that the concurrent data analysis suggested would benefit from further exploration. Recruitment occurred through advertisements posted on Twitter, Instagram, Facebook and Reddit. The charity Anxiety UK posted the advertisement on their social media platforms following contact from the lead researcher. Respondents to the advertisements were sent an email including the participant information sheet and the eligibility criteria. Interviews were then set up with those who were interested and able to participate. All participants provided informed consent.

### *Interviews*

Semi-structured, individual interviews were employed to protect participant anonymity and enable exploration of individual experiences in greater depth than would be permitted by methods such as focus groups. Interviews took place remotely via video link. Following a questionnaire regarding demographic and mental health history, participants were asked about their experiences engaging with fiction, including examples of mental health representation that had been striking or absent. Prompts were employed to explore experiences and their impact in depth (see Supplemental Materials for the full schedule). Where participants had a second interview, the focus was in greater detail on topics that were emerging as relevant to the grounded theory and that had not been covered in sufficient depth in the first interview. Interviews were audio-recorded and transcribed.

### *Data analysis*

Transcribed data were imported into NVivo, which facilitated data analysis. In line with Corbin and Strauss (2015), data analysis involved three stages of coding, as follows. Initially, the interviews were 'open-coded' line-by-line, breaking down the transcripts into segments. During open-coding, care was taken to stick closely to the data when developing codes (Corbin & Strauss, 2015). For example, the text 'I think it's definitely helped me learn about myself, erm, and the ways my anxiety manifest and it's definitely helped me accept that about myself. And to feel less alone because you know if other people are so clearly putting to words what I've been feeling then they must have been feeling it too' was coded as 'learning about self' and 'feel not alone'. Subsequent to open coding, 'axial coding' was used to group the open codes into categories which represented the data at a more abstracted level (Corbin & Strauss, 2015). Categories and subcategories were developed through

**Table 2.** Participant characteristics.

| Pseudo-nym | Age | Gender | Ethnicity | Mental health problems | Problems past or ongoing | Current or past treatment | Fiction preferences | Number of interviews |
|---|---|---|---|---|---|---|---|---|
| Alice | 25 | Female | White British | OCD | Ongoing | Past | Books and TV | 2 |
| Jess | 25 | Female | White British | Anxiety | Ongoing | Current | TV and online fiction (fanfiction, gaming) | 2 |
| Fiona | 23 | Female | White British | Anxiety, Depression, Panic, Anorexia | Ongoing and Past | Current | Books and TV | 2 |
| Eesha | 23 | Female | British Indian | Anxiety, Panic, OCD, Disordered Eating, Low Mood | Ongoing and Past | Past | TV (online streaming) | 2 |
| Cassie | 20 | Female | Black British | Depression, Anxiety, PTSD, OCD, EUPD, ADHD | Ongoing | Current | TV (online streaming) | 2 |
| Declan | 17 | Male | White British | Anxiety, Depression | Ongoing and Past | None | Books | 1 |
| Ben | 19 | Male | White British | Depression, Anxiety | Past | Past | TV (online streaming) and gaming | 1 |
| Grace | 20 | Female | White British | Anxiety, Depression, Eating Disorder, BPD | Ongoing | Current | Books and TV (online streaming) | 1 |
| Lucas | 22 | Male | White Other | Depression, Anxiety | Ongoing | Past | Books and Films | 1 |

exploring links between open codes which seemed related in terms of their properties (Goede & Villiers, 2003). For example, the subcategory 'reappraisal of self, others and society' was developed from the open codes: 'acceptance', 'feel not alone', 'feel understood', 'not at fault', 'provides hope', 'questioning own presentation', 'reappraisal of self' and 'validation'. Connections between and within categories were explored by considering the relationship between them, leading to the linking of categories into an emerging theory (Corbin & Strauss, 2015). Finally, 'selective coding' was employed to establish the core category through observing links between the existing categories (Corbin & Strauss, 2015). Diagramming and the storyline technique was applied to facilitate the conceptual development of the core category and overall theoretical integration (Corbin & Strauss, 2015; Birks & Mills, 2015)

Throughout the data analysis, the ground theory process of constant comparison was followed, whereby experiences were compared and contrasted across interviews, and codes and categories were repeatedly reviewed to ensure that they reflected the underlying data as well as possible (Corbin & Strauss, 2015). To support the process of analysis, memos were written throughout that recorded thoughts about and relationships between the concepts raised during the interviews. Diagramming was used to assist with conceptual analysis and consider the relationships between defined categories.

Following grounded theory principles, the above-described process of data analysis occurred concurrently with data collection. Specifically, data analysis begun after the first four interviews, with subsequent theoretical sampling guided by the process of coding and memo-ing. Theoretical sampling primarily focused on adjusting the questions and prompts used in interviews with participants, so that areas of emerging theoretical interest were explored in greater detail and depth in subsequent interviews. For example, following the analysis of the first few interviews, questions were added around the impact of lockdown and other life contexts on fiction engagement, as well as how experiences of fictional representation compared to that in non-fiction sources. As part of this process of theoretical sampling, some participants were interviewed on a second occasion. In addition, as detailed above in sampling strategy section, some theoretical sampling was undertaken in terms of participant recruitment. However, pragmatic considerations meant that it was not possible to conduct extensive theoretical sampling of this second type (cf. Corbin & Strauss, 2015). The implications of this are considered in the limitations section of the discussion.

### *Reflexivity and study quality*

Researcher reflexivity, namely sensitivity to the effects of the researchers' assumptions and biases on the research process, was considered throughout (Mays & Pope, 2020). Procedures were undertaken to raise awareness of the researchers' assumptions, so that these were held in mind during the analytic process to ensure findings were grounded in the data rather than the researchers' assumptions. These included the first author (who led the analysis) participating in a bracketing interview prior to interviews and recording thoughts and responses to data in a research diary. Theoretical memos were recorded, capturing thoughts and ideas in relation to developing categories and the emerging theory. Codes, categories and diagrams of the developing theory were shared and discussed with the other authors throughout the analytic process, to ensure the emerging theory was grounded in the data.

## Results

Figure 1 and Table 3 illustrate the developed model with categories and subcategories highlighted in bold.

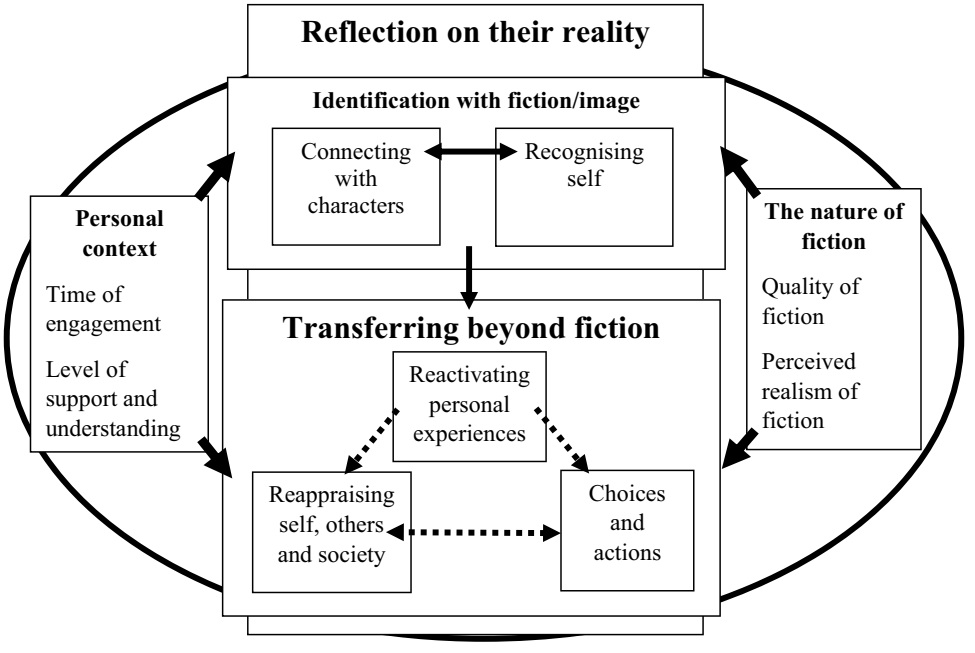


**Figure 1.** The developed theory: fiction as a reflection on their reality. Arrows reflect directions of influence. Categories in bold and subcategories in plain font. Broken lines signify links not described by all participants.

**Table 3.** Categories and subcategories of the theory: fiction as a reflection on their reality.

| Categories | Subcategories |
|---|---|
| Contextual category: Personal context | Time of engagement |
| | Level of support and understanding |
| Contextual category: The nature of fiction | Quality of fiction |
| | Perceived realism of fiction |
| Main category: Identification with fiction | Connecting with characters |
| | Recognizing self |
| Main category: Transferring beyond fiction | Reappraising self, others and society |
| | Choices and actions |
| | Reactivating personal experiences |

### *Core category: reflection on their reality*

The core category linking the data together was fiction as a **reflection on their reality**. This referred to participants perceiving fiction to mirror their actual or potential life and experiences. As this reflection may reveal things participants had not considered before, it showed alternative possibilities and could change how they saw their future and acted within their lives. The overall process by which fiction was experienced as a 'reflection' had two stages represented as main categories. First, participants experienced *identification with fiction*, emotionally connecting with characters and recognizing their own experiences within them. This led to a process of *transferring beyond fiction*, whereby the impact of this identification transferred into participants' lives. This impacted their experiences and actions, with consequences for their wellbeing. The effects of this 'reflection' on their experience of fiction and subsequent wellbeing seemed dependent on two contextual categories: participants' *personal context*, and *the nature of the fiction* presented to them. Categories are now considered in detail.

> I was like oh my god I actually am going through something, that I'm feeling so much like this girl in the book. I'm feeling this same way as her and then she's going through this and doing this. (Grace)

### *Contextual categories: personal context and the nature of fiction*

Across fiction types, representation acted for participants as a **reflection on their reality**. The effects of this reflection occurred within the wider context of participants' personal experiences and the nature of the fiction engaged with. There were two contextual categories reflecting this.

### *Contextual main category: personal context*

Whilst the fiction they engaged with remained the same, participants' personal context and thus their interpretation of stories changed over time, thus changing their impact. This main category comprised two subcategories.

#### *Time of engagement*

Many participants described being particularly affected by fiction engaged with during their early-mid teenage years, often when they were initially experiencing MHPs. For both portrayals perceived as helpful and harmful, there was a sense that if engaged with at different times, the story's impact may have been different.

> I haven't read it in a really long time but if I were to read it now I'd probably, would still feel understood, but I think I would potentially feel slightly different. (Eesha)

Day-to-day changes in their mental health could also impact the way participants interpreted and were thus affected by portrayals.

> When I'm more down in like, in my life, like I'll look at things in a, like generally just more negative. (Ben)

#### *Level of understanding and support*

The effect of fiction was influenced by the extent to which participants felt supported, accepted and understood in relation to their MHPs at the time of engagement. Whilst some described valued support from those close to them, '*my step-mum was on it, read loads of books, really like really supportive.' (Alice)*, most participants described feeling isolated and misunderstood.

> . . . when I first was realising I was not really, I don't really feel right, my family, like my family don't, I don't think in the old days they really saw mental health as a thing. It was kind of like 'you're just being weak so just get on with it'. (Cassie)

Isolation amongst peers seemed to be reflective of a culture of silence about MHPs in school environments. Some older participants wondered whether this was a function of their age, noting that conversations about mental health were more prevalent today.

> many of my peers were anxious or depressed . . . it just wasn't talked about. But then looking at my brothers who are 15 and 17, one of them has been doing an online course about mindfulness and managing anxiety and resilience. (Jess)

The younger participants described how mental health was talked about at school, with assemblies and classes raising awareness and promoting help-seeking, *'we'd always have like PSHE or whatever and these sorts of social lessons' (Declan)*. However, such conversations did not transfer outside the classroom, and participants described a similar silence amongst peers, and subsequent sense of isolation.

> I've spoke to people who I'd known from sixth-form again, and literally they'd all been through the same thing … everyone was so uncomfortable to talk about it … There was this community of fear that had just formed when no one wanted to open up, no one wanted to be vulnerable. (Ben)

Thus, for many participants, mental health representation within books, TV and film seemed to be the first place where they felt supported and understood.

> to feel understood in a way that you maybe aren't getting from elsewhere. It's nice. It's comforting, it's kind of like oh well if I can't get comfort from so-and-so when I'm feeling a bit crap, then I'm gonna read this book and I'm gonna feel better. (Eesha)

## *Contextual main category: the nature of fiction*

### *Quality of fiction*

The quality of fiction, that is, participants' perceptions of whether it was *'well written … well acted'* (Eesha), seemed key in determining its effects. Whilst high-quality portrayals may not always have been perceived as realistic (cf. subcategory *perceived realism of fiction*), quality seemed necessary for drawing participants' engagement and interest, and thus the extent to which they identified with characters. Contrastingly, realistic portrayals within poor-quality fiction seemed to have minimal impact on how participants saw themselves and their experiences, perhaps through reducing the extent that fiction was perceived as a reflection on their reality.

> if I'm watching something that like, you know I, like a Hallmark Rom-Com like, if it was like "oh well I have anxiety", I wouldn't go into that like expecting it to be a good representation, so it doesn't, it doesn't even bother me. (Jess)

### *Perceived realism of fiction*

The extent to which participants perceived portrayals of mental health to reflect reality also varied. Some portrayals were perceived as realistic.

> I think that show does a very very good job of describing what that is and, and how it manifests, and the work that needs to be done in order to you know, manage it. (Jess)

Other portrayals lacked realism and this sometimes intersected with other aspects of identity, such as ethnicity.

> if it's a black woman she's crazy, she's deranged, she's psychotic. Or she's really strong and independent. And it's like well that's not what black woman are like (Eesha)

Unrealistic portrayals seemed more detrimental than those of poor quality. In contrast to poor-quality, realistic portrayals which seemed to not engage participants and thus not affect them, unrealistic portrayals that were 'well-acted' or 'well-written' seemed to present them with a distorted mirror that they expected their life to reflect. Whether through being *'extreme'* (Eesha), or '*missing out elements of it*' (Cassie), these representative portrayals could provide participants with false messages and expectations around their own future with an MHP (see main category *transfers beyond fiction*).

> it shows this picture that everyone that has mental illness, oh my god they're gonna be sectioned … causes fear for people who have mental health, of speaking to anyone … I used to be scared, I used to be very scared of talking to anyone and letting anyone know. (Cassie)

Whilst most participants described realistic portrayals to be most helpful in enabling identification and understanding, two reflected on the damaging effects of uncensored, realistic depictions, through triggering painful emotions (see also main category *transfers beyond fiction*).

> I watched the show and it really like, I don't know just the final scene where she actually kills herself, really really affected me because it was so graphic. (Grace)

Whilst fiction could be experienced as a reflection on their reality, participants did reflect on the challenges that came with realistic storytelling when the overall aim of the medium was to be marketable.

> I'd love to see something that, that's, there is no resolution at the end. But I understand that that is not well it is still story-telling, but I wouldn't imagine they'd sell many copies. (Fiona)

## *Main category: identification with fiction*

For all participants, it seemed that identification with the characters (i.e. caring about what happened to them, connecting with their emotions and relating to their experiences) was key in engaging them and impacting their lives. Two subcategories, emotional connection and recognizing self, reflected this process.

### *Emotional connection*

Central to the process of identification seemed to be participants' ability to build emotional connections with and an understanding of the fictional characters. Whilst the characters were not real, participants empathized with them and cared about what happened to them.

> when people die, I cry … if I'm invested in the tv show or the book. And I've you know gone 20 hours in, I'm there. I'm you know, they have died for me(Fiona)

Fiction offered the opportunity to *'get inside the characters head' (Fiona)*, gaining insight into their lives and the reasons behind their actions in a way that may not be possible from hearing others' accounts in real life. This ability to understand the characters *'from the inside looking out' (Alice)* seemed to strengthen this connection.

> you tend to follow one person around for a whole series or a whole book. And erm, you, you're the whole time you're learning more and more about them. And gradually you become just emotionally invested in the characters. (Declan)

The perceived quality of fiction (a subcategory of *the nature of the fiction*) seemed important in determining the extent to which this connection was felt by participants, and consequently, how impactful it was on their lives.

> I think fiction is, depending on how it's written, is probably going to be more impactful, emotionally. But then if it's written really badly, then maybe not. (Eesha)

### *Recognizing self*

In addition to emotionally connecting to characters, all participants described that recognizing themselves and their experiences in characters was a powerful part of engagement. The perceived quality and realism of fiction (subcategories of *the nature of the fiction)* were key in this recognition, strengthening the extent to which the story reflected their experience.

> "I remember watching that I remember going 'yeah, you've got that spot on'. Yeah, it's more gratifying to, to see it and go 'yeah I know what you're feeling, love'. (Fiona)

Recognizing themselves seemed to enhance the *emotional connection* participants felt with characters, with empathy perhaps being more natural when stories aligned with their own experience.

> She's getting stressed eating, feeling bad about it and puking. . .I was like this is it they've nailed, this is what it's like … I empathised so much with the character. (Eesha)

### *Main category: transferring beyond fiction*

Participants' accounts suggested the effects of identifying with representative fiction continued after they had finished the stories. The experience of fiction as a 'reflection' transferred beyond the page or the screen, and impacted participants' lives outside it. Three subcategories, *reactivating personal experiences, reappraisal of self, others and society* and *choices and actions* described this process.

### *Reappraisal of self, others and society*

All participants described experiences of representative portrayals leading to them reappraising how they saw themselves, others in their lives and wider society. This process seemed to lead on from identification with characters, as they used characters' experiences as a reflection on how they saw their reality and visualized their future.

All participants described how a key benefit of engaging with representative portrayals was realizing they were *'not alone' (Ben)*. For many, it came alongside a reappraisal of themselves as *'not crazy' (Grace)* and not having done things '*that badly' (Lucas)*.

Through recognizing themselves in characters and viewing portrayals as reflections of reality, they learnt they were not alone in their experience and were thus ok; '*she's doing it and she's ok. So maybe I could be ok.' (Cassie)*. Therefore, representation served as a source of validation and hope for their lives. *Personal context* was important in this experience, as this reappraisal came within a context of feeling alone and different from others.

> I grew up thinking that I was like, I dunno just like a bit odd . . . it made me just feel like, like it's ok, like you're not the odd duck . . . Like ok you're a bit different but different is not the worst. It's not, you know completely condemned. Cassie)

> Maybe I accept myself a little bit more. Seeing like this is like normal. (Lucas)

Forming *emotional connections* with characters by getting into their heads and following their journey seemed important in this reappraisal. Connecting with characters' stories in this way seemed to provide a powerful source of validation for participants who may have felt isolated in their experience amongst peers (cf. contextual category *personal context*).

> that realisation that you're not the only one in this. Even if someone tells you that, if someone tells you you're not alone, you can take so much from it. But until you experience that in someone else or in a story, then I don't think you can truly accept that. (Declan)

Reappraisal was not always positive for participants' wellbeing. Mental health portrayals that differed from their experience were stigmatized, or poorly received could lead to worries about their own experience and behaviours, thus negatively impacting on their wellbeing. This was the case even when participants acknowledged such portrayals were unrealistic (cf. contextual category *the nature of fiction*).

> in the show, they talk about her being really selfish. . . . I think that also had an effect on me. Because I was like, am I being really selfish too? Does everyone hate me because of what I'm going through . . . now I feel even worse because everyone hates me as well. (Grace)

For one participant, who had well-established support outside of fiction, and thus perhaps a sense of community, representative fiction did not have such a powerful impact on their self-appraisal.

> I can't get much out of a fictional book. I, don't get me wrong I like, I'm like "oh my god, look someone else who feels like me, feel less alone", but arguably I could get that from a self-help group, book or whatever experience. (Alice)

### *Choice and actions*

Most participants reflected on how identifying with fictional portrayals led to evaluations of and changes in their choices and actions. *Personal context* seemed key in determining the ways

participants evaluated and acted in response to portrayals. Their mental health state (cf. subcategory *time of engagement*) and level of support (cf. subcategory *level of support and understanding*) affected their interpretations of representative portrayals, and thus their choices and actions. For some participants, these actions seemed detrimental to their overall wellbeing.

> in the book she talked about kind of cutting herself with glass and how it made her feel so much better. How it made her feel a bit more free. And I was holding in all these really horrible emotions … I want to now do the same because I want to emulate what this character's doing. Cos clearly she's got it figured out. (Grace)

Whilst some participants emulated characters' actions, others recognized themselves in characters' experiences but did not want their own lives to reflect the characters'. In these cases, portrayals acted as a reflection of what not to do, allowing them to choose a different path.

> you see them doing something really dangerous. Really, you know, harmful, and you think oh god I can't, I couldn't do something like that, I mustn't do something like that, I must get help. (Eesha)

Many participants described how engaging with representative fiction was '*like a gateway' (Eesha)* to initiating conversations about their mental health with those close to them. With many participants having felt isolated, such conversations were valued by participants and beneficial to their wellbeing. Reappraising themselves as 'not alone' and not 'at fault' in their experience (cf. subcategory *reappraisal of self, others and society*) may have helped increase their confidence in having these conversations.

> it usually just helps as a conversational bridge … Like [tv show] I was watching, I convinced some of my mates to watch that. And we all sat down and had a big talk about that like over a couple of drinks, a couple of weeks ago. And that was nice just to talk about that, like just our own personal experience and how we related to the show … it just felt I suppose, you know it was emotional but fun. (Ben)

### *Reactivating personal experiences*

For many participants, engaging and identifying with representative portrayals had a triggering effect, reactivating personal experiences associated with MHPs. This seemed to be a step beyond empathizing with characters' emotions, as participants moved from the fictional story into reliving their own struggles.

> it kind of pushes you into feelings like that again. Even if it's not a genuine feeling of that, it makes you think "oh my god, am I spiralling again" (Eesha)

The perceived realism of the portrayal (cf. contextual category *the nature of the fiction*) seemed key in the extent and effects of the reactivation. When experiences were reactivated around self-harm, being presented with portrayals that were graphic, and perhaps too realistic, could trigger urges to emulate those behaviours (cf. subcategory *choices and actions*). This had a detrimental impact on wellbeing through exacerbating their difficulties.

> if I see something that's kind of very much about kind of like self-harm, or anything like that, it brings back kind of those feelings. And when it's such a graphic image … it triggers something in me where I'm like oh my god look at that. I want to do the same, I need to do the same. (Grace)

However, an identifiable, realistic portrayal with a story arc that seemed possible and positive seemed to provide a blueprint for participants' possible future, leading to a reappraisal of themselves in line with that experience (cf. subcategory *reappraisal of self, others and society*). Whilst the reactivation of personal experiences was challenging, the reappraisal could be one of hope and validation, which seemed beneficial to participants' wellbeing.

> if they're having a panic attack and you know what that feels like, it can bring up that phantom feeling. If y'know, if it's done well. And that, that obviously doesn't feel good in that very moment, but then y'know when you come away from it … this is a person who's going about their life and they'll be ok, that's like a "ahh yeah. Yeah I'll be ok". (Jess)

## Discussion

For the young people in this study, fictional representations of MHPs appeared to be experienced as reflections on their reality – mirroring their actual or potential lives and experiences. The effects of these reflections seemed to depend on participants' personal context and the nature of the fiction engaged with. This reflection process appeared to have two stages: (i) identification with fiction, whereby participants emotionally connected with characters and recognized themselves within them; and (ii) transferring beyond fiction, whereby identification led to processes with implications for how participants experienced their own lives.

In reappraising themselves, others and society, participants seemed to used characters' experiences to reconfigure their understanding of who they were and how others saw them. This appeared to impact their choices and actions, e.g. a sense of validation increasing their confidence in discussing their experience with others. Furthermore, in recognizing themselves in characters, participants' subsequent choices could be based on wanting to emulate characters' actions or avoid them. This seemed to depend on participants' appraisal of the consequences for characters, and extent to which they wanted their lives to follow suit.

These processes fit well within cognitive-behavioural perspectives, with representative content serving as an alternative to existing thoughts and beliefs. This appeared to facilitate cognitive re-evaluation and subsequent changes in behaviour following identification with characters (Beck, 1993; Furukawa et al., 2013). Social learning was also apparent, as participants used relatable characters as models to imitate or deviate from based on perceived consequences (Bandura, 1997). This study adds to these perspectives, suggesting it is not just perceived similarity to characters that informs the identification process, but also the emotional connection developed with characters. Study participants noted how this emotional connection developed from being able to get inside characters heads and follow their lives closely. As this is not as possible when connecting with people in real life, such a connection may be a unique and important aspect of audience engagement with representative fiction.

From an identity perspective, the grounded theory aligns with McAdam's (2001) narrative identity theory, with participants incorporating the external fictional narratives into their own stories and using such narratives to inform their responses. When new narratives disconfirmed their current story or presented an unwanted narrative for their future, they appeared to reappraise their past narrative, and developed a new story for their present and future.

This study adds to this perspective by suggesting the extent of this impact may depend on the contexts within which participants were engaging. One aspect of this was the level of support and understanding they experienced in their everyday lives. Despite participants noting increases in conversations about MHPs, they described an ongoing sense of silence and stigma amongst peers, and many felt isolated (cf. Leavey, 2009). Thus, fiction could serve as a rare place where participants felt seen and understood. With limited other 'reflections' to draw on, representation within fiction may have been particularly important and impactful for participants, thus having a stronger impression on their lives.

For some participants, the identification process seemed to transfer into their life by reactivating personal experiences related to MHPs. This triggering effect of fiction fits well with Shrode'ss (1950) psychodynamic model, whereby emotional tension is released in response to characters' struggles. Whilst some participants appeared to find this cathartic and thus helpful, for others, the process seemed damaging through triggering emotions that were too painful to manage, or behaviours associated with their mental health struggles. Differences in response may have related to whether such emotions were repressed or related to experiences of trauma (Holdsworth, 2011), and demonstrate that fiction may act as a powerful trigger for emotions and experiences.

As described above in relation to the reactivation process, the ways that identifying with fictional content transferred into participants' lives seemed to have both helpful and harmful implications for their wellbeing. For some, it led to self-acceptance and validation, providing them with a sense of

hope for the future. For others, it invited new worries about who they were and how others saw them. Similarly, choices and actions in response to identification ranged from help-seeking and sharing experiences, to emulating characters' self-harm behaviours. Whilst this helpfulness or harmfulness seemed to depend in part on participants' history and experiences, the nature of fiction engaged with also seemed key. Stigmatizing, overly dramatic portrayals, or those which minimized experiences of MHPs were harmful to participants in triggering painful memories and giving themselves and others false and distorted reflections of their lives and futures. Consequently, such portrayals could incite fear, silencing and disappointment, amongst other detrimental outcomes. Such effects were still felt when participants were aware portrayals lacked realism.

Although stigmatized portrayals were not reported as extensively within this study as in previous research, such unrealistic, stigmatized portrayals were still described and were detrimental to how participants perceived themselves. The current finding that stigmatized messages were apparent in portrayals of non-white characters with MHPs is consistent with findings from existing literary analyses highlighting fiction's role in perpetuating harmful stereotypes that people of colour are dangerous, overly strong, or unaffected by MHPs (Golder, 2020).

Whilst being mindful of the potential for graphic portrayals to have a triggering effect, more realistic fictional portrayals of MHPs may help to reduce the above harmful effects and increase the helpfulness that can be drawn for them. However, the variation in people's experiences of MHPs, and the necessity of fiction to entertain and maintain audience interest may make this more challenging. Portrayals which lack realism may generate more profit by being pacey and fitting into traditional story arcs, and narratives cannot reflect everyone's experiences through one character's story (Henderson, 2007, 2018). However, when young people do not feel seen elsewhere, such portrayals may be their only source of representation and thus more impactful. Therefore, it seems important that alongside a range of realistic and non-stigmatizing fictional portrayals to engage with, young people can access support and understanding from those around them and professional services.

For mental health practitioners and other professionals working with young people with MHPs, it is important to consider that outside sources of representation, including fiction, have the potential to have real implications for how they understand themselves and their experiences. Furthermore, given that all participants in the current study described experiencing some fiction as helpful and validating, well-chosen representative fiction may have the potential to provide a helpful adjunct to therapeutic work aimed at supporting young people to understand and manage their MHPs.

It is of note that, after the study had been completed, the authors became aware of work from a different discipline by Rudine Sim Bishop, in which she argued that: 'Books are sometimes windows, offering views of worlds that may be real or imagined, familiar or strange. . . . When lighting conditions are just right, however, a window can also be a mirror. Literature transforms human experience and reflects it back to us, and in that reflection we can see our own lives and experiences as part of the larger human experience' (Bishop, 1990). These ideas appear influential and widely accepted in the field of children's literature (e.g. JCL Editors, 2023). The similarity between them and the grounded theory developed here arguably adds weight to the credibility of both and speaks to the potential value of inter-disciplinary collaboration in future research in this area.

### *Limitations and future research*

Pragmatic considerations meant that the application of grounded theory principles was limited in terms of the theoretical sampling of participants and the point at which recruitment was terminated. The approach taken was within the scope of some published grounded theory studies (e.g. Cormack et al., 2018; Langdon et al., 2011) and the limited application of these principles does not undermine the credibility of the resulting theory as it applies to the current sample. However, it does mean that this initial grounded theory can only be applied more

broadly with appropriate tentativeness and should only be seen as a first step towards developing a more widely applicable model. For example, while the sample of participants interviewed contained some diversity, most participants were white and female. Furthermore, by necessity, only those interested in, and comfortable with, being interviewed about this topic were included. Therefore, caution needs to be exercised when transferring these findings to other young people, and further research to explore MHP representation in fiction with other samples, perhaps with additional data collection methods (e.g. opportunities to participate anonymous via online survey), would be helpful. Relatedly, the identity of the research team, who were white, middle-class, trainee or qualified clinical psychologists, will have influenced their perspectives on the interviews and analysis, and likely also who volunteered for the study and what participants felt comfortable sharing. Therefore, future research on this topic by researchers from other backgrounds would be worthwhile. Despite these limitations, the extent to which the current findings fit with existing theory and literature, discussed above, suggests they may have some transferability beyond the study's sample.

## Conclusions

The initial grounded theory developed in this study suggested that whilst young people knew that fiction was not real, it was experienced as a reflection of their reality, a process whereby identifying with fictional characters led to real consequences for their lives, through its impact on their emotions, identity and actions. The effects of this identification and extent to which it was helpful or harmful for those engaging, seemed to depend on aspects of their personal context and the fiction itself, with such portrayals being particularly impactful when young people had minimal other reflections to draw on for representation and support. Whilst further research, with larger and more diverse samples, is required to develop stronger understanding of how such factors may affect outcomes, findings suggest that well-chosen fiction could perhaps act as a useful adjunct to traditional support, as a source of validation and hope for the future.

## Acknowledgments

The authors would like to thank the study participants. This research was completed as part of the first author's doctorate in clinical psychology, under the supervision of the second and third authors.

## Disclosure statement

No potential conflict of interest was reported by the authors.

## ORCID

Lizzie Driscoll http://orcid.org/0000-0002-7031-254X
Charlotte Hartley-Jones http://orcid.org/0009-0005-9804-1787
Fergal W. Jones http://orcid.org/0000-0001-9459-6631

## References

Androutsopoulou, A. (2001). Fiction as an aid to therapy: A narrative and family rationale for practice. *Journal of Family Therapy*, *23*(3), 278–295. https://doi.org/10.1111/1467-6427.00184
Bandura, A. (1997). *Self-efficacy: the exercise of control*. Worth Publishers.
Beck, A. T. (1993). Cognitive therapy: Past, present, and future. *Journal of Consulting & Clinical Psychology*, *61*(2), 194. https://doi.org/10.1037/0022-006X.61.2.194
Birks, M., & Mills, J. (2015). *Grounded theory: A practical guide*. Sage.

Bishop, R. (1990). Mirrors, windows, and sliding glass doors. *Perspectives: Choosing and Using Books for the Classroom*, *6* (3). Ohio State University.
Carter, R. (2015). How to stop making a crisis out of a drama: Towards better portrayal of mental ill health in television and film. *BMJ*, *350*(may01 5), h2307–h2307. https://doi.org/10.1136/bmj.h2307
Cohen, J. (2001). Defining identification: A theoretical look at the identification of audiences with media characters. *Mass Communication & Society*, *4*(3), 245–264. https://doi.org/10.1207/S15327825MCS0403_01
Cohen, J. (2014). Mediated relationships and social life: current research on fandom, parasocial relationships, and identification. In. *Media and Social Life* Routledge, (pp. 142–156). doi:10.4324/9781315794174.
Cohler, B. J., & Hammack, P. L. (2007). The psychological world of the gay teenager: Social change, narrative, and "normality". *Journal of Youth & Adolescence*, *36*(1), 47–59. https://doi.org/10.1007/s10964-006-9110-1
Corbin, J., & Strauss, A. (2015). *Basics of qualitative research: Techniques and procedures for developing grounded theory* (4th ed.). Sage Publications Inc.
Cormack, D., Jones, F. W., & Maltby, M. (2018). A "collective effort to make yourself feel better": The group process in mindfulness-based interventions. *The Qualitative Health Research*, *28*(1), 3–15. https://doi.org/10.1177/1049732317733448
Davidson, L., & Strauss, J. S. (1992). Sense of self in recovery from severe mental illness. *The British Journal of Medical Psychology*, *65*(2), 131–145. https://doi.org/10.1111/j.2044-8341.1992.tb01693.x
Durham, R., & Wilkinson, P. (2020). Joker: How 'entertaining' films may affect public attitudes towards mental illness – psychiatry in movies. *British Journal of Psychiatry*, *216*(6), 307–307. https://doi.org/10.1192/bjp.2020.56
Erikson, E. H. (1968). *Identity: Youth and crisis (no. 7)*. WW Norton & company.
Erikson, E. H. (1994). *Identity and the life cycle*. WW Norton & Company.
Fink, P. J. (1992). *Stigma and mental illness*. American Psychiatric Pub.
Furukawa, V., Moore, T. H., Caldwell, D. M., Hunot, T. A., Jones, P., Davies, H., Churchill, R., Furukawa, T. A., & Churchill, R. (2013). 'Third wave' cognitive and behavioural therapies versus other psychological therapies for depression. *Cochrane Database of Systematic Reviews*, *2013*(10). https://doi.org/10.1002/14651858.CD008696.pub2
Goede, R., & de Villiers, C. (2003, September). The applicability of grounded theory as research methodology in studies on the use of methodologies in is practices. Proceedings of the 2003 annual research conference of the South African institute of computer scientists and information technologists on Enablement through technology (pp. 208–217).
Golder, C. L. (2020). A content analysis of Olivia Pope: How scandal reconfirms the negative stereotypes of black women.
Grusec, J. E. (1994). *Social learning theory and developmental psychology: The legacies of Robert R*. Sears and Albert Bandura.
Henderson, L. (2007). *Social issues in television fiction*. Edinburgh University Press.
Henderson, L. (2018). Popular television and public mental health: Creating media entertainment from mental distress. *Critical Public Health*, *28*(1), 106–117. https://doi.org/10.1080/09581596.2017.1309007
Hoffner, C. A., & Cohen, E. L. (2018). A comedic entertainment portrayal of obsessive–compulsive disorder: Responses by individuals with anxiety disorders. *Stigma and Health*, *3*(2), 159. https://doi.org/10.1037/sah0000083
Holdsworth, A. (2011). *Television, memory and nostalgia*. Springer.
Igartua, J. J. (2010). Identification with characters and narrative persuasion through fictional feature films. *Communications*, *35*(4). https://doi.org/10.1515/comm.2010.019
JCL Editors. (2023). The enduring impact of Rudine Sims Bishop. *Journal of Children's Literature*, *49*(2), 56–60.
Johnson, M., & Olson, C. J. (Eds.). (2021). *Normalizing mental illness and neurodiversity in entertainment media: Quieting the madness*. Taylor & Francis.
Kessler, R. C., Chiu, W. T., Demler, O., & Walters, E. E. (2005). Prevalence, severity, and comorbidity of 12-month DSM-IV disorders in the national comorbidity survey replication. *Archives of General Psychiatry*, *62*(6), 617–627. https://doi.org/10.1001/archpsyc.62.6.617
Knapp, Z., & Knapp, R. (2020). Crazy ex-girlfriend and the trajectories of mental illness in musicals. *Music and the Moving Image*, *13*(3), 5–14. https://doi.org/10.5406/musimoviimag.13.3.0005
Kokesh, J., & Sternadori, M. (2015). The good, the bad, and the ugly: A qualitative study of how young adult fiction affects identity construction. *Atlantic Journal of Communication*, *23*(3), 139–158. https://doi.org/10.1080/15456870.2015.1013104
Langdon, S., Jones, F. W., Hutton, J., & Holttum, S. (2011). A grounded-theory study of mindfulness practice following mindfulness-based cognitive therapy. *Mindfulness*, *2*(4), 270–281. https://doi.org/10.1007/s12671-011-0070-5
Leavey, J. E. (2009). Youth experiences of living with MHPs: Emergence, loss, adaptation and recovery (ELAR). *Canadian Journal of Community Mental Health*, *24*(2), 109–126. https://doi.org/10.7870/cjcmh-2005-0018
Maccoby, E. E., & Wilson, W. C. (1957). Identification and observational learning from films. *The Journal of Abnormal and Social Psychology*, *55*(1), 76. https://doi.org/10.1037/h0043015
Mays, N., & Pope, C. (2020). Quality in qualitative research. In Pope, C., Mays, N. eds., *Qualitative research in health care* (Wiley), 211–233. https://doi.org/10.1002/9781119410867.ch15.
McAdams, D. P. (2011). Narrative identity Schwartz, Seth, Luyckx, Koen, Vignoles, Vivian. In *Handbook of identity theory and research* (pp. 99–115). Springer.

McAdams, D. P. (2011). Narrative identity. In S. J. Schwartz, K. Luyckx, & V. L. Vignoles (Eds.), *Handbook of identity theory and research: volume 1 structures and processes* (pp. 99–115). New York: Springer.

McInroy, L. B., & Craig, S. L. (2017). Perspectives of LGBTQ emerging adults on the depiction and impact of LGBTQ media representation. *Journal of Youth Studies*, *20*(1), 32–46. https://doi.org/10.1080/13676261.2016.1184243

McManus, S., Bebbington, P. E., Jenkins, R., & Brugha, T. (2016). *Mental health and wellbeing in England: The adult psychiatric morbidity survey 2014*. NHS digital.

Mead, G. H. (1934). Mind, self, and society from the standpoint of a social behaviorist. By JR Kantor. *Ethics*, *45*(4), 459. https://doi.org/10.1086/208258

Meuret, A. E., Chmielewski, M., Steele, A. M., Rosenfield, D., Petersen, S., Smits, J. A., Hofmann, S. G., Otto, M. W., Marques, L., Pollack, M. H., & Hofmann, S. G. (2016). The desire to belong: Social identification as a predictor of treatment outcome in social anxiety disorder. *Behaviour Research and Therapy*, *81*, 21–34. https://doi.org/10.1016/j.brat.2016.03.008

Monaghan, A. S. (2016). Evaluating representations of mental health in young adult fiction: The case of Stephen Chbosky's the perks of being a wallflower. *Enthymema*, *16*, 32–42. https://doi.org/10.13130/2037-2426/7400.

Morawski, C. M. (1997). A role for bibliotherapy in teacher education. *Reading Horizons: A Journal of Literacy and Language Arts*, *37*(3), 6.

Morley, D. (1992). Populism, revisionism and the 'new' audience research. *Poetics*, *21*(4), 339–344. https://doi.org/10.1016/0304-422X(92)90012-R

Muhammad, G. E., & McArthur, S. A. (2015). "Styled by their perceptions": Black adolescent girls interpret representations of black females in popular culture. *Multicultural Perspectives*, *17*(3), 133–140. https://doi.org/10.1080/15210960.2015.1048340

Nelson, J. (2017). Using conceptual depth criteria: Addressing the challenge of reaching saturation in qualitative research. *Qualitative Research*, *17*(5), 554–570. https://doi.org/10.1177/1468794116679873

Oates, J., Carpenter, D., Fisher, M., Goodson, S., Hannah, B., Kwiatowski, R., & Wainwright, T. (2021, April). *BPS code of human research ethics*. British Psychological Society.

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. https://doi.org/10.1080/10810730600755889

Roberts, D. F., & Foehr, U. G. (2008). Trends in media use. *Future of Children*, *18*(1), 11–37. https://doi.org/10.1353/foc.0.0000

Roberts, L., Berrisford, G., Heron, J., Jones, L., Jones, I., Dolman, C., & Lane, D. A. (2018). Qualitative exploration of the effect of a television soap opera storyline on women with experience of postpartum psychosis. *British Journal of Psychiatry Open*, *4*(2), 75–82. https://doi.org/10.1192/bjo.2018.9

Schunk, D. H., & Usher, E. L. (2012). Social cognitive theory and motivation. In Ryan, R. M. ed., *The Oxford handbook of human motivation*. OUP (pp. 13–27). https://doi.org/10.1093/oxfordhb/9780195399820.013.0002.

Shrodes, C. (1950). *Bibliotherapy: A theoretical and clinical-experimental study* [Doctoral dissertation]. University of California. *Dissertation Abstracts Online*.

Troscianko, E. T. (2018). Fiction-reading for good or ill: Eating disorders, interpretation and the case for creative bibliotherapy research. *Medical Humanities*, *44*(3), 201–211. https://doi.org/10.1136/medhum-2017-011375

White, M. (1998, August). Narrative therapy. *Workshop presented at Narrative Therapy Intensive Training,* Dulwich Centre, 345 Carrington Street, Adelaide SA 5000.

Yılmaz, U., & Yılmaz, M. (2019). The relation between social learning and visual culture. *International Electronic Journal of Elementary Education*, *11*(4), 421–427. https://doi.org/10.26822/iejee.2019450837