How contemporary Disney film can be used for mental health teaching in schools: a case study of Winnie the Pooh (2011) and Inside Out (2015)

Charlotte Caves, Dr Robin Basu-Roy

Abstract

Mental health disorders can be a burden on both patients and the National Health Service. With the majority of lifetime mental health problems emerging in childhood and the prevalence of childhood mental illness increasing, the need for effective mental health education is more important than ever before. This project explores a novel educational concept: 'edutainment’, to see if it has use in mental health education. This project provides a quantitative coding analysis and a qualitative artistic analysis of two contemporary Disney films, Winnie the Pooh (2011) and Inside Out (2015) for ICD-10 depression symptoms. It aimed to answer two questions: do these films provide an accurate representation of depression, and can they be a useful resource for teaching mental health and developing emotional awareness in the classroom? This analysis found that these films do provide accurate representations of depression, in line with ICD-10 guidelines, and thus, could be useful in education. This project highlights a need for accurate mental health education resources and suggests that film may be an effective way to do this.
Introduction

Aims and objectives

The mental illness burden in the United Kingdom is growing, currently costing our economy an estimated 94 billion a year (Independent, 2018). With half of all lifetime mental health problems starting before age 14 (Kessler, 2005), tackling these problems early is imperative. This project aims to highlight the importance of childhood mental health teaching and fostering healthy socio-emotional development. This will be done by: exploring why childhood mental health matters; why mental health teaching in schools effective teaching resources; and why film may be the way to do this.

In this project, depression has been chosen as an example of a mental health disorder as it is one of the most common mental health problems and the leading cause of disability worldwide, with an estimated 300 million people experiencing it (World Health Organisation, 2018). By analysing two contemporary Disney animated films, Winnie the Pooh (2011) and Inside Out (2015), for depressive symptoms, this project will answer two questions: do these films provide accurate portrayals of depressive symptoms? Therefore, can they be a useful tool for teaching mental health and developing emotional awareness in the classroom?

Why is children’s mental health important?

The NHS Mental Health of Children and Young People in England 2017 (NMHCYPE) survey, published in November 2018, is the most recent publication providing data on children’s mental health in England. In October 2016, a stratified multistage random probability sample of children aged 2 to 19 was drawn from the NHS Patient Register. The survey used reports from children, their parents and teachers, collecting information on 9,117 children from January to October 2017 (NHS Digital, 2018).

The NMHCYPE survey found that one in twelve 5 to 19 year olds had an emotional disorder, which encompasses anxiety disorders, depressive disorders, mania and
bipolar affective disorders. Emotional disorders increase in prevalence as age increases: from 1% in 2 to 4 year olds to almost 15% in 17 to 19 year olds, as seen in figure 1. Emotional disorders in 5 to 15 year olds have also become more common in recent years: up from 4.3% in 1999 and 3.9% in 2004, to 5.8% by 2017 (NHS Digital, 2018). Thus, mental health education is becoming increasingly more crucial.

![Figure 1] A graph showing prevalence of emotional disorders in children, information from the NMHCYPE survey (NHS Digital, 2018)

The NMHCYPE survey also outlines why mental health in children is important. Those with a mental disorder were found to be more likely to be bullied and bully others, miss school and engage in risky behaviour, including smoking tobacco, e-cigarettes, drinking alcohol and illicit drug use. Self-harm or suicide attempt were seen in one in four 11 to 16 year olds with a mental disorder (NHS Digital, 2018). Despite these risks, a quarter of children with a mental disorder were found to have no support (NHS Digital, 2018).

Mental health education is not just valuable for children with mental disorders, it is important for all children to help cultivate emotional awareness. Healthy socio-emotional development increases likelihood of positive outcomes in children; they have better academic performance, inter-personal relationships and social competence. By recognising emotions within themselves, they are able to seek help
if needed (Raver, 2002). Children with improved emotional awareness have also been found to have greater cognition and decision-making processes later in life (Barrett, 2007). Teachers are an important source of emotional support for children; with 48.5% of children citing teachers as a point of contact, they were found to be the most common professional service children seek (NHS Digital, 2018). Teachers spend a significant amount of time with their pupils and are not only trained to handle children’s emotional needs, but to also help support children’s emotional development. It has been found that teachers that educate their pupils about emotions also foster the development of their pupils emotional intelligence, enabling them to be aware of and express their emotions appropriately (Denham, 2012). This highlights the importance of schools for mental health support and education.

Why should mental health be taught in schools?

There is good evidence of the benefits of school-based mental health teaching strategies (Banerjee, 2016). The National Institute of Health and Care Excellence recommends that teaching should start at primary education, with a curriculum that integrates the development of social and emotional wellbeing (NICE, 2008). Section 78 of the Education Act 2002 states that state-funded schools must follow a curriculum that: “promote[s] the spiritual, moral, cultural, mental and physical development of pupils at the school”.

In the past, school-based mental health teaching was not a priority. Many teachers feel they lack the training and resources to deliver effective teaching; a survey found that 71% of Scottish teachers felt they did not have enough mental health training. In a four-year teacher-training course, some universities deliver less than fifteen hours of health and wellbeing teaching (Mental Health Foundation, 2018). In 40% of PSHE-teaching schools, Ofsted has found that this teaching is ‘inadequate’ or ‘needs improvement’ (Shaw Mind Foundation, n.d.). Momentum regarding effective mental health teaching in schools has increased in recent years. One possibility is increased mental health awareness and reduction in stigma, making it easier to talk about mental health than in previous years (Time to Change, 2016). A survey conducted by charity Mental Health Today between 2018 and 2019 showed that almost nine in ten
people believe that mental health should be taught in UK schools, as seen in figure 2 (Mental Health Today, 2019). Although the majority of people feel that teaching should start in secondary school, it could be argued that mental health teaching should start even earlier. It is now understood that young children are capable of understanding and eliciting deep, complex emotions and have the capacity to use their emotional awareness to better manage everyday situations (National Scientific Council on the Developing Child, 2011). However, over 10% of surveyed people believe that mental health should not be taught in schools, so there is still some controversy. Despite this, UK Education Secretary Damian Hinds has recently said that parents cannot veto what is taught in schools (BBC News, 2019), with the UK Government has introducing compulsory mental health education in schools from this year (TES, 2019). However, the UK Government has proposed that “it will be left up to schools to decide exactly how they teach the new content” (gov.uk, 2019). With 85% of teachers believing that mental health teacher training would not only benefit their pupils, but also their own mental health, it is imperative that we look for effective, innovative ways of delivering UK mental health education (Mental Health Foundation, 2018).

![Figure 2] A pie chart showing the percentage of people that believe mental health should be taught in UK primary or secondary schools, information from the Teach Me Well survey conducted on 1200 people (Mental Health Today, 2019)
Most mental health teaching resources are from charities. Some examples are: activity plans from Mentally Healthy Schools, devised by the Anna Freud National Centre for Children and Families (Mentally Healthy Schools, n.d.); a teacher guide from the Mental Health Foundation (Mental Health Foundation, n.d.); and assembly guides from Time to Change (Time to Change, n.d.). Some available resources come in the form of educational short films, provided by Nip in the Bud (Nip in the Bud, n.d.) and BBC Learning (BBC Media Centre, 2017). Film has been shown to be a notable educational tool; if educational films can be useful for mental health teaching, perhaps major motion pictures could be as well.

**Film as an educational tool**

A concept that has gained momentum recently is ‘edutainment’: a portmanteau of ‘education’ and ‘entertainment’. Not only does edutainment increase student’s enthusiasm and excitement, film has been shown to enhance memorability (Aksakal, 2015). Children learn in diverse ways and video engages different learning styles: verbal, visual and musical. Often children can be more receptive to learning through film, as it is familiar (Steffes, 2012). Not only is film familiar to children, it is also recognisable to adults. With the growing video streaming landscape, it is easier to access than ever before. Film is a universal language: making teaching transparent and helping children with learning difficulties and disabilities (The Guardian, 2013).

Animation as a genre is growing in popularity, being one of the most popular television categories children in the United Kingdom watch in 2019 (Ofcom, 2019). It can be useful for conveying emotion, giving the director and producers complete creative control. Disney may be one of the most familiar animated film producers to adults and children alike. Walt Disney’s first animated film was released in 1927. He achieved great success with *Snow White and the Seven Dwarves* (1937), one of the first widespread, successful feature-length animated films. Disney’s success with both animated and live-action film has continued ever since; producing 97 feature-length animated films to date (Encyclopaedia Britannica, 2019). Presently, The Walt Disney Company, owner of both the Walt Disney and Pixar Animation Studios, holds
seven of the top ten highest grossing animated films of all time, as shown in table 1 (Box Office Mojo, n.d.)

<table>
<thead>
<tr>
<th>Film title</th>
<th>Worldwide gross ($)</th>
<th>Production company</th>
</tr>
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<tbody>
<tr>
<td>Frozen</td>
<td>1.29 billion</td>
<td>Walt Disney Animation Studios</td>
</tr>
<tr>
<td>Incredibles 2</td>
<td>1.24 billion</td>
<td>Pixar Animation Studios</td>
</tr>
<tr>
<td>Minions</td>
<td>1.16 billion</td>
<td>Illumination Entertainment</td>
</tr>
<tr>
<td>Toy Story 3</td>
<td>1.07 billion</td>
<td>Pixar Animation Studios</td>
</tr>
<tr>
<td>Despicable Me 3</td>
<td>1.03 billion</td>
<td>Illumination Entertainment</td>
</tr>
<tr>
<td>Finding Dory</td>
<td>1.03 billion</td>
<td>Pixar Animation Studios</td>
</tr>
<tr>
<td>Zootopia</td>
<td>1.02 billion</td>
<td>Walt Disney Animation Studios</td>
</tr>
<tr>
<td>Despicable Me 2</td>
<td>970.76 million</td>
<td>Illumination Entertainment</td>
</tr>
<tr>
<td>The Lion King</td>
<td>968.48 million</td>
<td>Walt Disney Feature Animation</td>
</tr>
<tr>
<td>Finding Nemo</td>
<td>940.34 million</td>
<td>Pixar Animation Studios</td>
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[Table 1] Highest grossing animated films of all time, as of May 2019 (Box Office Mojo, n.d.)

Disney and mental health

Historically, researchers have discovered that Disney animated films often depict negative and stereotypical connotations of mental health. Many older Disney films, including *Dumbo* (1941) and *Beauty and the Beast* (1991), portray an eccentric, misunderstood character as ‘mad’: something to fear and someone to lock away (Beveridge, 1996). Common mental illness references in these older films are “crazy / madness / nuts”, which were shown to reinforce prejudicial attitudes in young viewers (Lawson, 2004). As mental illness has become less stigmatised in modern society, Disney films have become less problematic. Modern Disney films, such as *Frozen* (2013), where the character ‘Elsa’ is seen to portray many symptoms of
depression, have been praised for their accurate representation of mental illness (Miller, 2014; Kowalski, 2018).

Contemporary Disney films, namely *Inside Out* (2015), are thought to be a useful portrayal of mental health, thus researchers have looked into how they can be used in a clinical setting to develop psychiatric patient’s emotional intelligence (Ali, 2017; Kanjilal, 2019). Some teachers have even considered whether *Inside Out* would be a valuable classroom tool to likewise aid the emotional intelligence of students and start discussions about depression. This project will therefore analyse representations of mental illness in *Inside Out* by focusing on the character ‘Sadness’. Although Sadness represents sadness and not depression, she is said to exhibit symptoms of depression, and thus may still be a useful teaching tool in schools. While research on the utilisation of this film in a clinical setting is prevalent, the evidence base for the film’s impact when used in a classroom setting is limited to online teaching forums (Marsh, 2015; TES, 2018; Project School Wellness, n.d). Subsequently, to discover if this film will be useful in the classroom, this project aims to analyse whether the depressive symptoms portrayed through Sadness are accurate.

Another post-2010 animated Disney film, *Winnie the Pooh*, has been chosen as a comparison. This project focuses on contemporary films, as they would be most familiar to modern-day children. Disney released 31 animated films during this time period (disneymovieslist.com, n.d), but *Winnie the Pooh* has been chosen as mental health within A.A Milne’s book series has been previously explored in literature such as ‘Pooh and the Psychologists’ (Williams, 2002). It has been argued that depressive symptoms are seen in ‘Eeyore’, a persistently glum donkey. He has been described as sad, pessimistic and self-pitying (Williams, 2002). This project, therefore, explores this depiction of depression in the 2011 animated film, as it adds a new dimension to Eeyore; film is a medium that can be analysed in depth to conceptualise artistry and body language that could illustrate depressive symptoms. As *Winnie the Pooh* is not primarily about emotions the film arguably portrays mental illness less explicitly than *Inside Out*. Consequently, research discussing the use of *Winnie the Pooh* as a mental health teaching resource is limited.
A comparison is used as *Inside Out* is explicitly about emotions, is more complex and thus may be difficult for young children to fully understand. The protagonist is an eleven-year-old girl, possibly the film’s target audience age. *Winnie the Pooh* may be more suited to a younger audience, presenting a fun, musical storyline following the classic characters through a day in the Hundred Acre Wood, whilst not overtly referencing mental health.

**Methodology**

**Diagnosing depression**

Childhood depression is notoriously difficult to diagnose. Psychiatric disorders are usually self-presenting, but childhood depression relies on caregivers to recognise abnormal behaviour. Pre-pubertal depression is also very rare, so caregivers are less likely to consider this as the cause of the child’s atypical behaviour. Another complication is that childhood depression can present with abnormal symptoms, such as aches, pains and hallucinations (Carlson, 2000). UK clinicians use the World Health Organisation’s ICD-10 Classification of Mental and Behavioural Disorders to diagnose depression and assess severity in children and adults (NICE, 2005). Diagnosis can come from interviewing the child, as well as parents/carers, teachers or other professionals who know the child well (Zuckerbrot, 2007). Interviews may include the use of questionnaires with child-friendly language that have been adapted from ICD-10 guidelines.

The World Health Organisation’s ICD-10 Classification of Mental and Behavioural Disorders (WHO, 2016) outlines common symptoms of depression, shown below in table 2. For a diagnosis of mild depression, two ‘core’ symptoms are needed, as well as two further symptoms from either category, for a minimum of two weeks. These symptoms do not have to be intense; the child may be distressed and have difficulty continuing normal activities, but still remains to function properly. In moderate depressive episodes, the patient would have two ‘core’ symptoms and three additional symptoms for a minimum of two weeks. Consequently, they may
experience considerable difficulty in participating in day-to-day activities. A severe depression diagnosis would require all three ‘core’ symptoms, plus at least four added symptoms. These symptoms can be intense, to the point where the child struggles to continue with any normal activity at all (WHO, 2016).

To ascertain whether *Winnie the Pooh* and *Inside Out* depict useful and accurate portrayals of depressive symptoms, the ICD-10 guidelines will be used to examine these films.

<table>
<thead>
<tr>
<th>Core</th>
<th>Cognitive</th>
<th>Biological</th>
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<tr>
<td>Depressed mood</td>
<td>Reduced concentration</td>
<td>Disturbed sleep</td>
</tr>
<tr>
<td>Loss of interest/enjoyment</td>
<td>Reduced self-esteem/confidence</td>
<td>Diminished appetite</td>
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<tr>
<td>Increased fatigability</td>
<td>Ideas of guilt and unworthiness</td>
<td>Changes in weight</td>
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<td></td>
<td>Bleak or pessimistic views of the future</td>
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<tr>
<td></td>
<td>Ideas or acts of self-harm or suicide</td>
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[Table 2] Symptoms of depression, categorised by ‘core’, cognitive and biological symptoms. Adapted from the World Health Organisation’s ICD-10 Classification of Mental and Behavioural Disorders (WHO, 2016)

**Animated film techniques**

‘The Art of Animated Film’ (Giesen, 2017) outlines key ways in which animators create a complex, nuanced character. The first of these is character design. Animation gives complete creative control to animators, allowing them to inject personality into a character’s look. However, there can be a fine line between cliché and caricature. Characters can often be stereotypically categorised into four fundamental types of temperament. These are derived from Hippocrates humour theory, which claims that the balance of four bodily fluids influences behaviour and personality. These are: sanguine, optimistic and social individuals; phlegmatic types, who are relaxed and easy-going; choleric, ambitious and hot-headed; and melancholic, who are introverted and emotional (Giesen, 2017).
Using facial expression to show character emotion is a technique that is increasingly being used, with the growing popularity of realistic 3-D computer animation allowing more facial close-ups. Paul Ekman’s ‘Facial Action Coding System’ outlines six emotions that transcend culture: anger, joy, sadness, fear, disgust and surprise. Eyes, often described as ‘windows to the soul’, can be imperative in depicting emotion. This effect can be exaggerated in animation as cartoon characters typically have big eyes and therefore a greater canvas to portray this emotion (Giesen, 2017).

Body language is quintessential in any film, as it is one of the first forms of social interaction and accounts for over 65% of communication (Birdwhistell, 1970). It can therefore be considered to be the non-verbal essence of a character, allowing expression of inner, hidden feelings. Additional techniques used are: score, which can underline emotion; staging, which can emphasise scene connotations; dialogue; and symbolism (Giesen, 2017). These devices will be used to critique Winnie the Pooh and Inside Out in the context of depressive symptoms, using ICD-10 guidelines.

Coding words

To analyse both films in a quantitative way, coding words were used. On the first watch of each film, dialogue was used to compose a list of words that correlate with the depressive symptoms outlined in ICD-10 (WHO, 2016). Upon watching again, a tally was made of how many times each word was said in the duration of each film. Coding results will be compared to artistic representations of depression to see if depression representation is more explicit or inherent.

Results

Winnie the Pooh (2011)

Winnie the Pooh (2011) compiles stories from A.A. Milne’s classic book, following a day through the Hundred Acre Wood. It starts with a competition to find a new tail for
Eeyore, who seems to have lost his. Amidst this, Owl misinterprets a note left by Christopher Robin. Believing that a monster named ‘Backson’ has abducted Christopher, the characters go on a hunt to rescue him.

We are introduced to Eeyore for the first time between 00.05.21-00.08.47, where Pooh visits Eeyore to see if he has any honey. The first thing we notice about Eeyore is his character design. Staying true to E.H. Shepard’s original book illustrations, he is a blue-grey hue. Grey has been shown to be associated with depression (Carruthers, 2010) and low feelings are often described as “feeling blue”. The staging of the scene also reflects Eeyore’s mood; Eeyore’s home is gloomier and darker than the rest of the Hundred Acre Wood. Body language is also important in this first encounter. Eeyore’s movements are continuously slow, his gaze lowered (as seen in image 2) and his voice low and monotonic. This could be due to lack of energy or reduced confidence, both common symptoms of depressive episodes (WHO, 2016).

In a later scene (00.25.16-00.28.54) we see that his slowness and diminished activity seems to affect his life.

Tigger: “What are you doing out here?”
Eeyore: “Too slow. Got left behind.”
Tigger: “Left behind? What a horrendous thing to do to a guy.”

Another symptom of depression is apparent between 00.05.21-00.08.47: pessimism (WHO, 2016). This is shown in dialogue between Pooh, Owl and Eeyore.

Pooh [to Owl]: “You must be catching a cold”
Eeyore: “I’ll probably catch it too.”
Between 00.13.12-00.15.21, we are shown a contest between Pooh, Piglet, Rabbit, Owl and Kanga to find a replacement for Eeyore’s missing tail. Eeyore’s lowered mood continues in this scene, reflected in his body language and facial expression. Eeyore’s head is dropped and shoulders slouched, again possibly showing diminished energy. His eyes are lowered and mouth turned downwards, looking sad, despite Pooh presenting Eeyore with a cuckoo clock as a replacement tail. Whilst the other characters dance and celebrate Eeyore’s new tail, Eeyore appears forlorn (as seen in image 3). A loss of interest and enjoyment is also noted in depressive episodes (WHO, 2016). Eeyore’s pessimism is shown again in this scene, when Eeyore sits on his new cuckoo clock tail and it breaks.

Eeyore: “I knew it was too good to be true.”

Depression can also cause feelings of guilt and unworthiness, as well as reduced self-esteem (WHO, 2016). This is noted through dialogue when Kanga presents Eeyore with an orange knitted scarf to use as a tail.

Eeyore: “It’s an awful nice tail, Kanga. Much nicer than the rest of me.”
This is also shown in a later scene (00.25.16-00.28.54).

[Tigger pounces on Eeyore]

Eeyore: “I probably deserved that.”

One of the main symptoms of a depressive episode is reduced mood. Other characters notice this, shown between 00.25.16-00.28.54.

[It’s Going To Be Great song] Tigger: “Stop that gloomy rumination.”

In a later scene, 00.49.04-1.03.00, Eeyore explicitly says that he is unhappy.

[Pooh returns Eeyore’s tail]

Pooh: “So – are you happy Eeyore?”

Eeyore: “No. But I sure do like this new tail.”

Symbolism is another important piece of artistry in animated films (Giesen, 2017). A piece of symbolism that runs throughout is thistles. In the ‘Winnie the Pooh’ book series, it is noted that Eeyore’s favourite food is thistles (Milne, 2016). In *Winnie the
Pooh (2011) during the contest scene, Eeyore suggests a thistle as a prize for whoever finds a replacement for his missing tail. Later on, Pooh discovers Eeyore’s missing tail hanging on Owl’s door.

[Owl explaining where he found Eeyore’s tail]

Owl: “…hanging over a thistle bush”

Pooh: “What sort of place was this particular thistle bush in?”

Owl: “Certainly not a very cheery place. One might say it was rather gloomy.”

Traditionally, Milk thistle extract has been used as a herbal remedy for the treatment of depression and melancholia. However, recent studies have found that silymarin, a secondary metabolite of Milk thistle acts on a serotonin receptor, causing a depressogenic effect (Yaghmaei, 2012).

Inside Out (2015)

When eleven-year-old Riley moves from Minnesota to San Francisco, her life becomes upended. The film switches from Riley to the Emotions in her head, which help guide her through life. The difficulty of the move highlights Sadness, who is brought to the forefront. Later, Joy and Sadness get lost in the depths of Riley’s mind and have to find their way back to headquarters; whilst Fear, Anger and Disgust are left in charge.

At 00:02:44 we first see Sadness on screen. Not unlike Eeyore, the artistry of Sadness’ character design is evident straight away: she is entirely blue. A study showed that a significant number of US study participants associated sadness with the colour blue (Barchard, 2017). Score is also important in this scene. As Sadness is first introduced, we hear a low brass number in the background intertwined with baby Riley crying. Low pitch music is correlated with conveying sadness (Vuoskoski, 2014). This is possibly due to the low physical energy of the piece, paralleled with the low physical energy seen in depressive episodes (WHO, 2016). Crying reinforces that Sadness is the embodiment of Riley’s unhappiness.
Between 00.11.23-00.15.46, Riley and her mother reminisce over their drive from Minnesota to San Francisco. Sadness touches a happy memory orb, which turns from yellow to blue. Blue is once again used as a tool to show melancholy; the memory orb tinting blue shows that the memory has turned sad. Sadness’ eyes dart down, her head lowers and her hands clasp together. Her body language reflects feelings of guilt and diminished self-confidence, seen in depressive episodes (WHO, 2016). This is also reflected in dialogue between Joy and Sadness.

Sadness: “Something’s wrong with me. It’s like I’m having a breakdown.”
Joy: “You’re not having a breakdown. It’s stress.”
Sadness: “I keep making mistakes like that. I’m awful…”
Joy: “No, you’re not.”
Sadness: “…and annoying.”

A reduction is self-esteem is also seen later in the film, between 01.15.39 and 01.15.50.

Sadness [crying]: “I only make everything worse.”

In this scene, Sadness passes by Joy in Imagination Land, floating on a rainy cloud. Rain is often used to symbolise low mood, possibly because the falling water of rain is similar to tears (Forceville, 2018). Another explanation is that rain clouds are grey; grey being associated with depression (Carruthers, 2010). Rain clouds also block the sun, associated with joy and happiness. Studies have also shown that rain can reduce people’s mood and reported life satisfaction (Connolly, 2013). This could be related to Seasonal Affective Disorder, a type of depression that is correlated with seasons and weather (MIND, 2019).

Staging is a useful tool to convey emotion (Giesen, 2017). In a scene between 00.22.13-00.25.21 we see Riley at her first class in her new school. Blue is heavily used in this scene: the blue classroom door; blue chairs; classmate’s blue clothes; and Riley’s blue notebook, possibly foreshadowing later events in this scene. As Riley stands up to introduce herself, Sadness touches another memory orb, which turns blue. As this happens, Riley’s speech becomes slower and quieter, perhaps
showing reduced energy. Her facial expression changes; she looks down, her eyes begin to tear up and her brow becomes furrowed (as seen in image 4). This could indicate a lowered mood and reduced confidence. This is the first time we see this in Riley, demonstrating the effect that Sadness has on Riley’s demeanour.

Staging is also used later in the film, between 01.15.00-01.19.54, as Riley is running away from home. Riley is seen wearing a grey sweater, black jeans and black boots, her outfit representing the dark mood she is experiencing. The bus station is all in grey hues, including the bus, which is grey-blue with grey seats. All passengers are wearing muted colours, making the setting seem darker and duller, reflecting Riley’s mood. One shot pauses on red traffic lights: red meaning ‘stop’. This possibly symbolises that Riley may not have realised it yet, but she does not truly want to leave. Riley’s lowered mood is also conveyed through facial expression and body language. Her eyes and eyebrows lower and her lips become downturned. She slumps her face into her hand and stares out the window of the bus (as seen in image 5). When she changes her mind about running away, the scene setting completely changes: colours become more vivid and the scene brightens to a pink tint, perhaps symbolising hope.
Similarly to Eeyore in *Winnie the Pooh*, Sadness also displays a pessimistic, bleak outlook on life that is frequently seen in depression (WHO, 2016). In *Inside Out* between 00.32.43-00.34.06, Joy and Sadness become lost in long-term memory.

Sadness: “You could get lost in there.”
Joy: “Think positive.”
Sadness: “I’m positive you will get lost in there.”

This scene also demonstrates Sadness’ reduced energy and increased fatigability. During her pessimistic outburst, Sadness falls to the floor. Whilst later attempting to get up, she falls back down again.

Sadness: “Only I’m too sad to walk. Just give me a few… hours.”

This is also demonstrated at 00.44.40.

Sadness: “Is it all going to be so interactive?”
Although presented in a humorous way, this shows a marked symptom seen in depressive patients (WHO, 2016). Potentially, the use of humour makes discussions about Sadness more light-hearted. This may aid classroom teaching; the film helps to reduce the stigma surrounding Sadness, allowing the topic to become more approachable.

*Inside Out* can also be used to explore the importance of developing emotional awareness. At the start of the film Joy shuns Sadness for making Riley upset. However, when Joy and Sadness get stuck in the depths of Riley’s mind, Joy starts to realise the importance of Sadness. Looking at an old memory of a lost hockey match, Joy sees that Riley’s parents and friends came to comfort her because she was upset, ultimately leading to a happy moment.

Joy: “*Mom and Dad, the team… they came to help because of Sadness.*”

The relationship between Joy and Sadness in this film is quite unique. Joy is not entirely yellow: she has blue eyes. This represents how Joy cannot exist without Sadness. Thus, the film highlights that while feelings of sadness are unpleasant, they are essential.

This realisation that all emotions are important leads to the Emotions working together later on. We see more complex memories made of multiple emotions (see image 6), and an expanded emotions console. *Inside Out* not only shows depressive symptoms, but the value of healthy socio-emotional development.
Coding

Findings from the coding analysis are shown in table 2. As hypothesised, *Winnie the Pooh* does not feature many words associated with depressive symptoms; one explanation is that it is not explicitly about emotions. Although not much is said about depression, it is shown in more implicit ways, such as through sighing. Sighing is associated with depressed mood and weariness, both signs of depressive episodes (WHO, 2016).

*Inside Out* features sighing seven times within the 102-minute run-time, comparative to *Winnie the Pooh*, in which it appears six times within 69 minutes. Additionally, *Inside Out* also features a lot of dialogue associated with depression, mostly from Sadness. It is not surprising that the most commonly featured words are ‘cry / cries / crying’ and ‘sad’, considering the hallmark of depression is lowered mood (WHO, 2016). However, when teaching it is important to note that there is a difference between sadness and depression: depression being a prolonged period of sadness, associated with other symptoms. Other common words, such as ‘awful’ and
‘annoying’, show pessimism and reduced self-esteem. These symptoms are also shown through artistry, but dialogue is a useful way to hone in on these important concepts.

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<td>Annoying</td>
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<td>1</td>
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<td>Awful</td>
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<td>4</td>
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<td>Breakdown</td>
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<td>2</td>
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<td>Upset</td>
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[Table 2] Coding words for Winnie the Pooh (2011) and Inside Out (2015)

Discussion

Winnie the Pooh shows a more inherent demonstration of depressive symptoms than Inside Out. Although not many coding words appeared, depressive symptoms were portrayed through: character design, staging, body language, facial expression and symbolism. Despite the lack of coding words, depressive symptoms, such as pessimism and unworthiness, still came through in dialogue between Eeyore and other characters. Not only does Inside Out feature a multitude of coding words, depression is also portrayed through artistic means. Similarly to Winnie the Pooh, many animated film techniques were used to convey emotion. Symbolism appeared more in Winnie the Pooh, either coincidentally or due to the fact that emotions underlay the story rather than comprise it. Body language and facial expression were the most frequently used devices in both films. An explanation for this is that most depressive symptoms, as shown in table 2, would be seen through the face and body. Overall, when comparing emotional expression with ICD-10 guidelines (WHO, 2016), it is fair to say that these films provide an accurate representation of common depressive symptoms.
Winnie the Pooh is aimed at primary school children and could be a good tool to teach them about mental health. As previously mentioned, depression portrayal is not as explicit or complex as in Inside Out; therefore young children may find it easier to understand. However, younger children would need guided discussion, as they may not understand the concept of ‘depression’. Whilst only a small percentage of this age group are reported to have an emotional disorder, learning about depression is important for all children as it is something every child is likely to come across in their lifetime either directly or indirectly, as one in four of the UK population will experience a mental health problem each year (MIND, 2017).

Both Winnie the Pooh and Inside Out are seen to portray many of the core and cognitive depressive symptoms outlined by ICD-10 guidelines (WHO, 2016). The most common symptoms that appear in both films are: reduced energy, lowered mood, pessimistic outlook, and diminished self-confidence. It is likely that biological symptoms are not represented as these films are primarily entertainment and not made to show depression. Furthermore, the time-scale of these films means that showing symptoms such as weight change and sleep disturbance is difficult.

Although Inside Out’s Sadness shows depressive symptoms more explicitly, it could be argued that this is a less accurate portrayal of depression. This is because Sadness is portraying sadness, which despite many parallels, does not equate to depression. Sadness is an emotion inside Riley’s head and is more exaggerated, whereas Riley’s symptoms are subtle and a more accurate portrayal of depression. It has been found that over half of young people feel embarrassed about mental illness, thus perhaps the less literal portrayal of depressive symptoms seen in Riley and Winnie the Pooh’s Eeyore may be more realistic (MQ, 2016). On the other hand, this could be a limitation in using this film to teach primary school children, as they may not recognise these subdued symptoms. However, this could be overcome with teacher-led discussion.

These films could also be useful in reducing mental health stigma in students. Around half of young people associate mental illness with isolation, believing that they would be treated differently and lose friends with a mental illness diagnosis.
(MQ, 2016). Inside Out shows this is not the case: the film resolves with Joy realising the importance of Sadness, and Riley surrounded by friends playing hockey. In Winnie the Pooh, Eeyore is surrounded by friends that care about him. This shows how openness with friends can be a positive reinforcement; for both characters, their friends are supportive, as opposed to ostracising. This may reduce stigma associated with mental health problems. Reducing stigma among children can be beneficial in two ways: it would help them understand mental illness, and therefore not alienate a peer who is suffering; and help them seek support earlier, if needed.

Inside Out could be seen as a more useful tool for developing emotional intelligence and awareness; the final scene showing the parallel between Riley’s contentment and the collaboration of the Emotions. Nonetheless, by supplementing both films with active class-based discussion about the importance of recognising one’s emotions and expressing these appropriately, both films can be effective in helping develop these skills (Marsh, 2015).

Conclusion

Overall, this project illuminates the importance of effective mental health teaching in schools. All mental illnesses are important to discuss, but depression is the most common mental disorder in the United Kingdom (NICE, 2011). Depression is not limited to adults: over 80,000 UK children reported to have depression (Young Minds, n.d). Despite this, access to support can be limited. A quarter of children were found to have no support at all: professional nor informal, such as family and friends (NHS Digital, 2018).

Due to the difficulty in diagnosing depression in children, many children do not get a formal diagnosis. Young children may not know what depression is, or struggle to differentiate normal sadness with depressive symptoms. Therefore, diagnosis may rely on carers recognising these depressive symptoms and seeking help for the child, which can be difficult when childhood depression may present with abnormal symptoms (Carlson, 2000). Children may be reluctant to ask for help themselves, as they may think that they will be treated differently by their peers (MQ, 2016). Even if
a problem is identified, professional help can be challenging to obtain. Unless a problem is severe, a child is unlikely to be referred to Children and Adolescent Mental Health Services (CAMHS). Recent results found that of those that did get a referral, sixty-five percent were either not allocated a provision, or were placed on a waiting list (Children’s Commissioner, 2016).

If discussions were interlinked with teaching on emotional awareness and intelligence, the whole class would benefit. Developing emotional intelligence may increase positive outcomes in all students, such as better interpersonal relationships and academic success (Barrett, 2007). By exploring depression, it would allow children to recognise these symptoms within themselves, seek support if needed and also help to eliminate the deep-rooted social stigmatisation of mental illness. Additionally, there is evidence that school-based interventions work and could benefit the mental health of teachers, as well as pupils (Banerjee, 2016; MHF, 2018).

School-based mental health teaching is still in early stages, only becoming compulsory from this year, so identifying accurate, effective teaching resources is crucial. Film is a good medium for teaching; learning through film increases memorability (Aksakal, 2015). All students can benefit from film learning as it incorporates different learning styles. Animated films can be particularly useful for showing emotion as they give the animators complete creative control. The more familiar the film, the more receptive students can be, which is why this project has focused on two contemporary Disney films (Steffes, 2012). It was discovered that these portrayals are accurate representations of the core and cognitive symptoms outlined in ICD-10 and thus, could be useful in mental health teaching.

The next step in the research of this topic would involve creating teaching guides for both *Winnie the Pooh* and *Inside Out*. These may include: some key scenes to focus on; ICD-10 symptoms; and useful techniques for teaching children about difficult topics, such as open classroom discussion (Indiana University, n.d). Furthermore, the same techniques for analysis used in this project could be combined with ICD-10 diagnosis guidelines for other mental disorders to see if these films, or other films, accurately represent other mental health conditions. For example, Tigger in the *Winnie the Pooh* book series is thought to represent Attention Deficit and
Hyperactivity Disorder (Williams, 2002). Additionally, perhaps future campaigns will show the UK Government the importance of standardised mental health teaching guidelines and teaching resources.
Filmography


References


