

An Investigation of the Portrayal of Mental Health Issues  
in Comics Books from 1939 to the Present

by

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## ABSTRACT

Since 1939, Batman has been a staple character of the comic book industry. He has been used throughout the last 80 years as a conduit through which to portray mental health content. This thesis analyzes how mental health content has changed in Batman comic books from 1939 to today. Based on existing research, I identified that mental health content has been present in Batman comic books for as long as they have existed. According to my research results, content can be traced back to the Golden Age of comic books (1939-1956), with a decrease in content in the Silver Age of comic books (1956-1970) due to the emergence of the Comics Code Authority. In the Bronze Age of comic books (1970-1986), mental health content reached its peak. In the Modern Age of comic books (1986-Present), content once again dropped, but not as low as in the Golden and Silver Ages. Identifying how mental health representation has changed since 1939 can help researchers to better understand how comic books can be used to communicate with readers.

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## CHAPTER 1

### INTRODUCTION

The goal of my research was to build off of the growing body of knowledge in the realm of comic book analysis. According to Alcântara's and Bezerra's journal article, comic books are increasingly becoming pedagogically relevant because they reflect our culture and values (Sales de Alcântara & Bezerra, 2016). Comic book analysis has grown as consumers and educators alike have seen that comic books can be used to portray complex topics such as mental health issues.

#### Research Question

My research aimed to identify how mental health conditions are portrayed in comics books. Specifically, my research will be looking at how Batman comic books from 1939 to today represent anger, depression, mania, and anxiety as outlined by DSM-5 checklists from the American Psychological Association.

My thesis research question is: "How does the portrayal of mental health conditions change across the four main eras of comic books as portrayed through Batman comic book series from each era?"

#### Background

Many consider 1938 to be the beginning of the American superhero. Though comics existed prior to 1938, the introduction of Superman in "Action Comics" #1 made the medium much more popular, leading to great increases in publications and sales ("The Golden Age of Comics", n.d.).

From the introduction of Superman up to current time, comic books have undergone many changes in terms of the types of content produced by publishers. These changes have been in large part due to the Comics Code Authority. Founded in 1954 and disbanded in 2011, the Comics Code Authority outlined rules that comic book publishers needed to adhere to. The Authority was founded by comic book publishers after many accusations arose that comic books caused delinquency in children (Martin, 2017). In order to avoid government intervention and regulation, comic book publishers formed the Comics Code Authority to begin regulating their own content.

The four main eras of comics are Golden (approximately 1938-1956), Silver (approximately 1956-1970), Bronze (approximately 1970-1986), and Modern (approximately 1986-Present). These eras of comic books are marked by drastic changes in the rules issued by the Comics Code Authority, which led to changes in tone and content by comic book publishers (Martin, 2017).

Because the Authority often enacted rules that forced comic book publishers to publish more lighthearted content, portrayals of mental health issues in comic books may have been affected beginning in approximately 1954 up until the twenty-first century. In 2011, DC Comics and Archie Comics were the final two publishers to stop adhering to the rules of the Comics Code Authority in favor of self-regulation (Martin, 2017).

Despite rules enacted by the Authority, comic books have managed to address difficult subjects in deep and poignant manners. One such topic, that of mental health issues, has been an ongoing theme in comic books for many years. The unique combination of art and writing in comic books allows them to display mental health

issues in ways that other mediums cannot. As a form of technical communication, comic books act as both an efficient and insightful method of portraying mental health issues.

Batman has been selected as the main comic book character to be analyzed for two reasons. First, he has appeared in all four comic book eras, allowing for analysis dating as far back as his debut in 1939. Second, Batman exhibits the symptoms of several mental health conditions including depression, anger, mania, and anxiety. It is not currently known if all comic book eras use Batman as a conduit for presentations about mental health issues. This thesis aimed to explore all four comic book eras and identify which ones use Batman as a mental health icon.

### Overview

In order to analyze all four eras, I used simple random sampling of preselected Batman series from each comic book era. Based on the data collected, I identified which data points displayed mental health content and how using DSM-5 checklists from the American Psychological Association.

After identifying where mental health content did and did not exist, I interpreted the data on an era-by-era scale, considering how and why the amount of content changed from one era to another. Then, I was able to identify how my research applies to the larger body of research about comic books.

To begin my research, I identified existing research about comic books and how mental health content research overlaps with it. In the next chapter, I review existing literature in order to identify where additional research can be conducted.

## CHAPTER 2

### LITERATURE REVIEW

#### Introduction

Comic books have become a growing field of research as their popularity in mainstream popular culture has increased. Existing research addresses how comic books are a form of technical communication, how comic books have influenced popular media, the existence of mental health content in comic books, how comic books serve as a negative influence, and how comic books serve as a positive, educational influence. Based on this existing research, I was able to identify trends of how perceptions of comic books and the content within them have changed over time, and how this can be linked to mental health content in them.

#### Comic Books as Technical Communication

Comic books have faced an uphill battle throughout their history because of a stigma that they are only for children. In Thierry Groensteen's essay entitled "Why Are Comics Still in Search of Cultural Legitimization?" he notes that comic books are defined by four traits: "Hybrid ... Subliterature ... Caricature ... and Childlike," (Groensteen, 2009, para. 2). He reduces comic books to what are seen as its base elements to belittle their legitimacy as an art form.

Groensteen also notes that after adults have turned to "more sophisticated, supposedly more noble, pleasure", comics "have a way of giving rise to some strongly nostalgic emotions," (Groensteen, 2009, para. 5). Groensteen, who acts as a voice for



many an exasperated parent who says “you still read comics?”, paints comic books as childish escapism.

Despite these negative claims, comic books are a legitimate and powerful form of technical communication. In his book *See What I Mean: How to Use Comics to Communicate Ideas*, Kevin Cheng describes comic books as “like a trojan horse for information.” He posits that comics are a fun diversion from monotonous business and educational communication that teach and entertain. When a researcher used comics to display her research results, “she found that more people actually spent time reading her findings,” (Cheng, 2012, 165).

By standing in the realms of both education and entertainment, comic books can do what other forms of communication struggle to. In Han Yu’s *The Other Kind of Funnies: Comics in Technical Communication*, the author aims to point out just how many things comic books can do, including identifying with readers, allowing readers to participate in the reading, and helping enhance reading comprehension (Yu, 2015).

As a form of participatory reading, comics rely on humans’ need to seek out closure. Comics are presented as static images and word balloons, as opposed to television and movies, which contain talking, moving pictures. Comics force readers to fill in the blanks with their imagination (Yu, 2015, 49). This leads to a feeling of inclusion and participation on the part of the reader.

Reader identification in comic books stems from the, in general, more simplistic nature of images as compared to a photograph. Take Scott McCloud’s “The abstraction of the human face” as an example. It contains a gradient of five images, ranging from a photograph to a stick figure. Simpler, more abstract images create an opportunity to see

ourselves in the stories we read. These simpler images allow us to fill in the blanks with our own likeness, traits, desires, and fears (McCloud, 1994).

Comic books also offer enhanced comprehension, meaning that readers will put the time and effort in to read something in which they have a vested interest. Comic books serve as a form of rich communication, which pertains to how fast and meaningfully they are able to convey information to readers (Yu, 2015).

By telling stories with morals, realistic, identifiable characters, and colorful images, comic books pull readers in quickly. As a result, comic books serve as a definitive form of technical communication.

### Influence of Comic Book Characters in Popular Media

In 1966, comic books reached a new height when the Adam West-led television show “Batman” began. For the following 50+ years, comic book-related television shows, movies, and toys have invaded pop culture in increasing numbers.

According to an article published by the New York Times in 2018, seven out of the eleven highest grossing movies in 2017 were superhero movies. According to the article, comic book movies and other mediums like it are so popular because they highlight exceptionalism and the limits of the human body and psyche. Another phenomenon, known as the “Cult of Self”, is one in which humans look up to “unique, supremely talented beings who transcend laws, even those of nature,” (Bowden, 2018, para. 2).

Comic book movies and television shows have also gathered such a large audience because of their framing as large, momentous events. When watching a trailer

for a superhero movie or television show, phrases like “fate of the world” are often used. According to Bruno Heller, an Executive Producer for the Fox television show “Gotham”, “You're dealing with a huge property, in corporate terms, and it demands to be seen by the largest possible audience. This is a stadium rock show, not a cabaret act,” (Jurgensen, 2014, para. 15).

By capitalizing on the “wow factor” and the human “Cult of Self”, comic book characters in other mediums have reached staggering heights. According to the movie database website “The Numbers”, the ten most profitable comic book movies as of December, 2019 have amassed \$12 billion (“The Numbers”).

#### Existence of Mental Health Content in Comic Books

By demonstrating the wide berth of comic book characters’ reach, it is easy to note the influence that they have over millions of people across the world. This far-reaching influence gives comic book writers and artists a platform through which they can cover otherwise sensitive and taboo topics.

One of the topics that is increasingly being covered by comic books is that of mental health. In 2013, comic book artist Tony Kinnard used the outlet of a new comic book to both cope with his own depression and social anxiety and show others what it’s like to have a mental illness. According to the National Alliance of Mental Health executive director Mike Boticki, “most teens appreciate comics and I think teens also learn when they can identify with an adult who has been there before,” (Shaver, 2013, para. 11).

One thing to note about Kinnard is that he created an indie, or independent, comic, which are generally produced outside of the large comic book publishers such as DC Comics and Marvel Comics. Mental health has begun moving into the mainstream publishers after following indie publishers' success. DC Comics writer Tom King used his platform as the "Batman" comic writer from 2016 to 2020 to show the broken side of a well-known superhero. According to King, he wanted to pull back the curtain on characters that we idolize: "I wanted to show that the people we worship go through the same things [as the rest of us]," (Lawrencece, 2019, para. 8).

King's work on the "Batman" comic series has served as the inspiration for my research. He has portrayed Batman as a flawed, broken person that's just trying to do his best. King's portrayal of mental health conditions in comic books was expanded in 2018 during his work on two additional series, "Mister Miracle" and "Heroes in Crisis". In "Mister Miracle", King writes about Scott Free, an escape artist/superhero who struggles with ideations of suicide due to Post-Traumatic Stress Disorder (PTSD) from his childhood. The series "Heroes in Crisis" expanded beyond the scope of "Batman" and "Mister Miracle" by showcasing many struggling superheroes at once. In the series, King depicts a private sanctuary for superheroes to live at to cope with mental illnesses brought on by their jobs as heroes. According to King, he wanted to display that "Showing that you're vulnerable is not a weakness ... [it's] a strength," (Burlingame, 2019, para. 24).

Through his work with mental illnesses in comic books, King aims to normalize discussions and education about mental health struggles. By making superheroes as human as everyone else, it can help readers cope with their own mental health.

## Comic Book Characters as Negative Portrayals of Mental Health Content

Despite positive experiences by some writers, artists, and publishers, not all comic book content is seen as beneficial. In 1954, comic books began to be scrutinized because of their content and lack of regulation (Kidman, 2015). In response to the public outcry, the comic book industry imposed a set of rules upon themselves as a form of self-regulation. The Comics Code Authority's rules would be used until the Authority's official disbanding in 2011.

Rules from the Comics Code Authority ranged from the banning of explicit content such as "seduction and rape shall never be shown or suggested," to non-explicit content such as "Although slang and colloquialisms are acceptable, excessive use should be discouraged and, wherever possible, good grammar shall be employed," ("The Comics Code of 1954", n.d.).

With the new set of rules, it was the goal of the comic book industry to continue publishing their content without government interference. This censoring of content would come to be known as the Silver Age of comics. During this age, comic book characters and storylines became more lighthearted and fun.

Even though the Silver Age of comics would only last until approximately 1970, it represented a problem that the comic book industry would continue to face through the rest of the twentieth century up to today. Even moving past violence and bad influences, researchers like Steven Hawley demonstrate how characters like Batman can have negative effects on readers and viewers. In his study, he identified that 27% of his studied comic books had some instance of mental health content in them, and that the majority of them were negative portrayals. He states that the study revealed that "persons with mental

illness [are] overwhelmingly unattractive, unsympathetic, cruel, and dangerous.”

Depictions such as these can lead to “feelings of insensitivity and a lack of empathy for persons with mental illness,” which is opposite of the goal of writers like Tom King (Hawley, 2016, 64).

### Comic Books as Educational Exposure Tools

With plenty of evidence to support both claims that comic books and their characters like Batman are positive and negative influences, what are readers to take from this?

In the study “What Would Batman Eat?”, researchers discovered that depicting pop culture role models like Batman and Spider-Man as eating healthier items at popular restaurants, for example choosing apple slices over french fries, lead to 45% of children choosing the healthier food options (Wansink, Shimizu, & Camps, 2011). This is in comparison to the priming tactic of offering healthy food as being the healthier option by a regular adult. In this study, the comic book characters were used to influence children for the better.

Another study that sought to look at the influence of comic book characters was conducted in 2013. In the study, researchers looked at how muscular superheroes affect men’s body images. The results of the study showed that, although muscular superheroes make non-muscular men have lower body esteem, it only occurs when the men don’t have a parasocial relationship with the superhero (i.e. a one-sided bond with a figure that the observer cannot interact with directly) (Young, Gabriel, & Hollar, 2013).

In the end, comic book creator and icon Stan Lee puts it best: “[comic book] entertainment is one of the most important things in people’s lives. Without it they might go off the deep end. I feel that if you’re able to entertain people, you’re doing a good thing,” (Reslen, 2018, para. 8).

### Conclusion

Based on the current research surrounding comic books, it can be surmised that comic books can have messages that go deeper than what’s on the page. These multifaceted books can be used to prove a point, address a popular topic, and even shed light on complex ideas. It is through comic books that conversations about mental health content can be had without needing to detract from a story. They can show a powerful superhero struggle, thus normalizing mental health conditions in those who read about them.

Current research has identified that mental health content exists in comic books, so this thesis’s focus is on how the prevalence of mental health content changes from 1939 to today. In the next chapter, I identified how the amount of mental health content has changed between comic book ages, and identified if the existence of mental health content has been trending up or down across these ages.

## CHAPTER 3

### METHODS

The goal of my thesis was to identify how prevalent mental health conditions are in Batman comic books. The data collected in this thesis observes how mental health conditions are portrayed in Batman comic books across the four main comic book ages.

#### Data Collection

Data for this thesis was collected in order to identify how common it is for writers and artists of Batman comic books to include mental health content in their material. Data collected across the four eras of comic books was compared for analysis.

#### *Sampling Strategy*

My thesis employed a mixed methods approach and simple random sampling. The data was analyzed using DSM-5 mental illness charts from the American Psychological Association. The quantitative portion of my thesis consists of spreadsheets of collected data from multiple comic book sources. The collected data was then analyzed in bar charts. The qualitative portion of my thesis consists of the determinations made by me regarding the existence and type of mental health content for each data point. Using the DSM-5 checklists, I determined what types of mental health content exist for each data point, if any.



### *Sampling Data Pool*

For each comic book age, the below procedure was used to select the issues and pages that were used for analysis. Note that 50 issue/page combinations were selected per comic book age. The Bronze Age was split in half for the two separate series/story arcs and the Modern Age was split into quarters for the four separate series/story arcs.

The following comics were used as sampling elements. I own all of the texts that were used for sampling in a digital format. Each story arc (i.e. the third-level bullets) is a sampling element (i.e. there are 8 sampling elements).

- Golden Age (1938-1956)
  - Series: Batman (1940-2011), Batman: Detective Comics (1939-2011)
    - The Batman Chronicles Vol. 1 (issues- Batman 1. Issues- Detective Comics- 27-38.)
- Silver Age (1956-1970)
  - Series: Superman (1939-2011), Batman & Superman: The World's Finest (1941-1986)
    - Batman & Superman: The World's Finest Vol. 1 (issues- Superman: 76. Issues- Batman & Superman: The World's Finest: 71-94.)
- Bronze Age (1970-1986)
  - Series: The Dark Knight Returns (1986)
    - The Dark Knight Returns (issues 1-4)
  - Series: Batman (1939-2011)
    - A Death in the Family (issues 426-429)

- Modern Age (1986-Present)
  - Series: Batman (1940-2011), Batman: Detective Comics (1939-2011)
    - Knightfall (issues- Batman: 491-500. Detective Comics: 659-666.)
  - Series: Batman (2016- )
    - I am Suicide (issues 9-15)
    - I am Bane (issues 16-20, 23-24, Annual #1)
    - Cold Days (issues 51-57)

### *Sampling Procedure*

1. In an Excel spreadsheet, I entered the comic issue numbers in one column (separate rows).
2. In a separate cell, I entered the following formula, where A3 and A9 are the range of issues: =INDEX(\$A\$3:\$A\$9,RANDBETWEEN(1,COUNTA(\$A\$3:\$A\$9)),1).
3. In a separate column, I entered the range of page numbers in the issue (varies depending on the series).
4. I used the same formula as in step 2 to generate a random page number,
5. Using the same formula from steps 2-4, I repeated the method to get a total of 50 pages.

### *Coding Method*

Once an issue/page combination was selected, the resulting page was analyzed for content about mental health issues. This content was separated into one of four categories:

- Mental health in dialogue
- Mental health in image
- Mental health in exposition (usually in the form of a narrator)
- No mental health content

A determination about whether mental health content existed was made based on the following DSM-5 checklists created by the American Psychological Association:

- Level 2 Depression - Adult
- Level 2 Anger - Adult
- Level 2 Mania - Adult
- Level 2 Anxiety - Adult

If the selected issue/page combination displayed content (i.e. exposition, dialogue, or an image) in the form of a behavior listed in the checklist for Level 2 Depression, Anger, Mania, or Anxiety, it was considered to contain mental health content.

### Data Analysis

Once 50 page/issue combinations were obtained for each comic book age, I used the following process to determine what kind of mental health content exists in each. The resulting coding spreadsheet information can be found in Appendix B.

### *Coding Process*

1. I looked at the entire page to determine if there was potential mental health content.
  - a. If there was no mental health content, I entered “N/A” in the coding spreadsheet for whether mental health content existed in dialogue, exposition, or image.
2. I determined whether each issue displayed mental health content in dialogue, exposition, image, or a combination of the three, and noted that in the coding spreadsheet.
3. I used the four DSM-5 checklists from the American Psychological Association to determine what type of mental health content was being displayed—anger, depression, mania, or anxiety—and added it to the coding spreadsheet.
4. Using the selected checklist, I chose the applicable point(s) listed within and added them to the coding spreadsheet. I selected more than one checklist item where applicable.

The collected data was made into bar charts using Tableau, a data analysis and plotting software. When the data was entered into Tableau, multiple graphs were created in order to analyze the results:

- How many data points displayed mental health content and how many did not
  - X-axis: Displays mental health content? Y/N
  - Y-axis: Number of instances
- The breakdown of the appearances of mental health content by type

- X-axis: Narration, dialogue, or image
  - Y-axis: Number of instances
- The prevalence of each type of diagnosis
  - X-axis: Level 2 Depression, Anger, Mania, or Anxiety
  - Y-axis: Number of instances

### Research Limitations

My research presents data that answers my research question, but it is not without limitations. The main limitations of my research are lack of character diversity, small sampling pool, and lack of knowledge in psychology.

My first limitation occurs in only using one comic book character. In order to keep the data pool for this research thesis manageable, Batman was selected as the only research subject. When one thinks of damaged superheroes, Batman is a common first thought. As a result, the results may have been skewed. Because Batman is a well-known damaged superhero, mental health content was probably more likely to appear than for other characters such as Superman or Wonder Woman.

Another limitation occurred in my research because of the small sampling dataset size. I used only a select number of comic book titles for each era, and each was deliberately selected. Each title that was selected was chosen because of their prevalence in other media. They are some of the most often discussed Batman titles. Additionally, the Modern Age titles selected that were written by Tom King were only released since 2016. Their closeness to current time may skew how they are perceived, as scholars have not had very much time to analyze them.

The final limitation that I encountered was in my lack of psychological training. My designations of the existence of mental health content and their types were all based on the information provided in the DSM-5 checklists from the American Psychological Association without formal Psychological training. I have no degrees in psychology, and as a result, the determinations that I made are not as accurate as they would be if I were a mental health professional.

### Conclusion

The methods above were used in order to determine how often mental health content appears in the selected Batman titles. Content was divided by dialogue, exposition, and image in order to determine what the most common method of representation is. Content was further divided into mental health conditions based on the DSM-5 behavioral checklists for Level 2 Anger, Depression, Mania, and Anxiety. The data collected is represented in graphical format and compared/contrasted in the “Results” section.

## CHAPTER 4

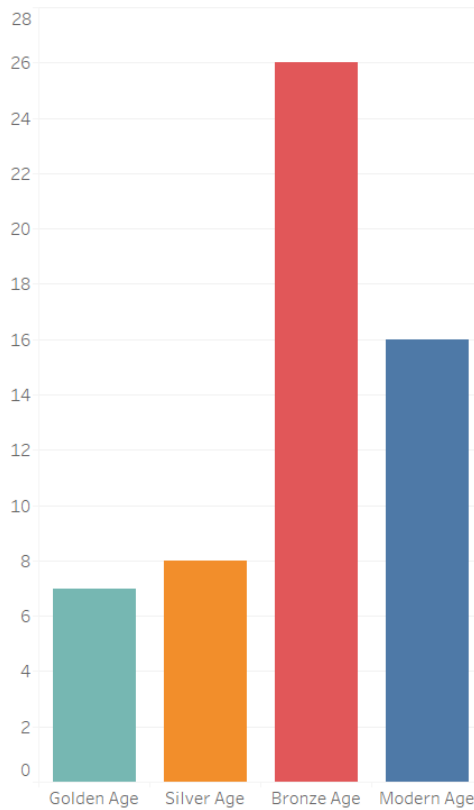
### RESULTS

The goal of this research thesis was to identify how mental health issues have been portrayed in Batman comic books from 1939 to today. After completing my research, I compiled my findings in the “Research Analysis” section below. These graphic results demonstrate how prevalent mental health conditions are in comic books; how often mental health issues appear in dialogue, exposition, and images; and how many instances there are of anger, depression, mania, and anxiety in the selected comic books. The results are presented for each of the four comic book ages and for all ages combined.

#### Results Analysis

##### *Existence of Mental Health Content*

According to the data collected, which is represented below in Figure 1, 28.5% of the issue/page combinations that were selected displayed mental health content. With mental content appearing in over one out of four issue/page combinations, it is clear that mental health content is common in Batman comic books. Based on the general upward trend of the existence of mental health content, it can be stated that its prevalence has become more common from 1939 to today.



*Figure 1. Existence of Mental Health Content by Comic Book Era*

The Golden Age of comics displayed mental health content in 14% of all issue/page combinations. This percentage can be seen as a sort of baseline for the existence of mental health content in comics. American comics had just begun to become prevalent in 1938 due to the creation of Superman, one year before Batman’s creation, and continued until approximately 1954 (Chambliss, Svitavsky et. al., 2013). Comics were just starting out in the United States, so creators in the 1940s and early 1950s established the standard for how often mental health issues would be covered, whether directly or indirectly.

The Silver Age of comics, which began in 1954, is marked by the creation of the Comics Code Authority. Comics during the Golden Age were not regulated like other



types of popular culture content, so in order to avoid government intervention, comic book publishers such as DC Comics and Marvel Comics formed the Comics Code Authority to set their own rules for regulation (Kidman, 2015). It would be expected that with the crackdown on content, comic books would cover taboo topics such as mental health less often. Despite this, the prevalence of mental health content actually rose to 16% in my research data. Though only a slight uptick from the Golden Age, this can potentially be attributed to the sampling data's lack of diversity in characters and publishers.

In approximately 1970, comic book creators began to turn away from the rules set forth by the Comics Code Authority in favor of creating darker, grimmer, and grittier comics. It was in this age that bold creators such as Marvel's Stan Lee would outright defy the Comics Code Authority and create what they wished. It was also during this age that comics started common tropes including shirtless men, scantily-clad women, and overt sexuality in characters' actions ("The Bronze Age of Comics Books", n.d.). Because of this second shift in comic book content, it is expected that mental health content would be displayed more frequently. In my research findings, 52% of issue/page combinations displayed mental health content in some form. This follows the pattern of content shift that creators enacted beginning in 1970 in titles such as "The Dark Knight Returns" and "A Death in the Family".

Comic books again moved into a new era in approximately 1986, entering the Modern Age of comics. This Modern Age is the one we are currently in, and the longest era to date. During this era, comic books have made two shifts, one internal and one external. The comic industry's internal shift occurred when creators began to write and

draw more realistic heroes. This era saw the emergence of social superheroes, which are defined as “individuals whose misfortunes push them to levels of social activism that touch so many lives, find new purpose in life and make their losses meaningful by striving to keep others from suffering the same,” (Langley, 2012, 50). The external shift during this era occurred as scholars began regarding comic books in a more positive light. By tackling more serious subjects, many people began to realize that comic books could be used as an avenue for portraying difficult subjects. As one scholar puts it, comic books can cover a wide range of cultural topics in order to remain relevant (Hatfield, 2013). Both of these shifts, especially the one that has created more realistic superheroes, would indicate that even more mental health content would exist than in the Bronze Age of comics. Despite this, only 32% of issue/page combinations displayed mental health content. This is significantly higher than the Golden and Silver Ages of comics, but noticeably lower than the Bronze Age.

#### *Existence of Mental Health Content in Dialogue, Exposition, and Image*

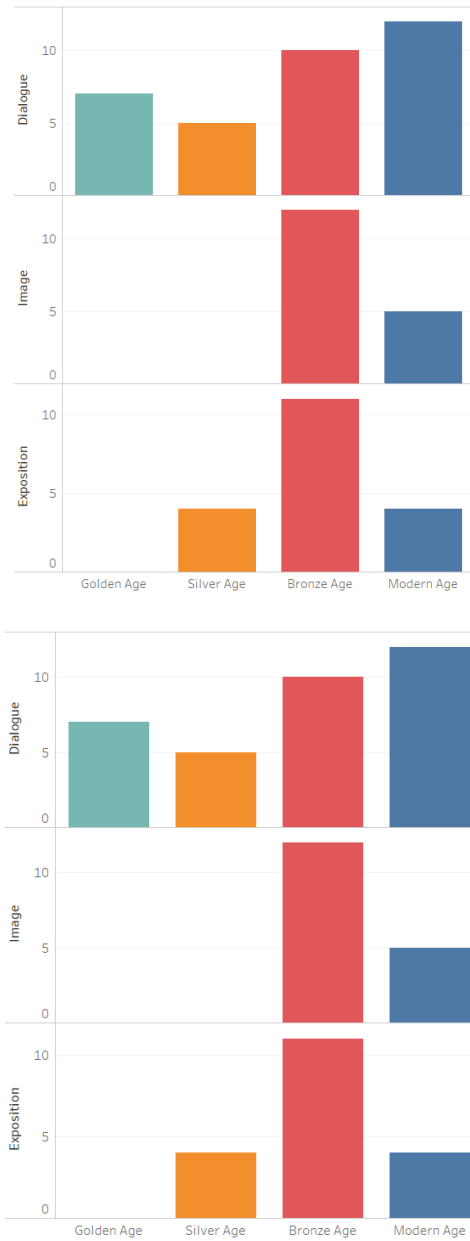
The second angle of data analysis aimed to identify how often mental health content appeared in dialogue, exposition, and image, which are the three main components of a comic book. For all eras, 48.6% of content appeared in dialogue. The breakdown of how many instances of mental health content appeared in dialogue for each era can be seen below in Figure 2.



*Figure 2. Breakdown of How Mental Health Content is Presented by Comic Book Era in Dialogue*

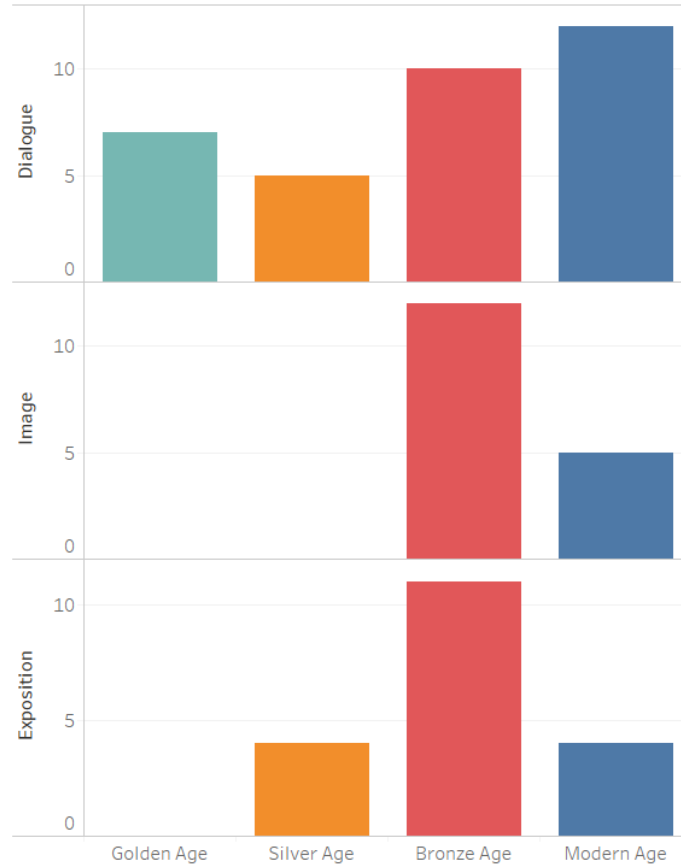
For all eras, 25.7% of content appeared in images. The breakdown of how many instances of mental health content appeared in dialogue for each era can be seen below in

Figure 3. Note that no mental health-related images appeared in the data for the Golden and Silver Ages.



*Figure 3. Breakdown of How Mental Health Content is Presented by Comic Book Era in Image*

For all eras, 24.3% of content appeared in images. The breakdown of how many instances of mental health content appeared in dialogue for each era can be seen below in Figure 4. Note that no mental health-related images appeared in the data for the Golden Age.



*Figure 4. Breakdown of How Mental Health Content is Presented by Comic Book Era in Exposition*

In the Golden Age of comics, 100% of mental health content appeared in the form of dialogue. This can be attributed to the fact that exposition at the time often did not include private narration, and that images were often more simplistic during the era.

In the Silver Age of comics, 55.6% of mental health content appeared in dialogue and 44.4% of mental health content appeared in exposition. During this era, more narration was used as exposition, which then makes sense that there was a split between dialogue and exposition. As for the continued lack of mental health content in images, this can be attributed to the fact that the Comics Code Authority was cracking down on explicit content. Images quickly grab readers' attention, so comic creators probably aimed to tone down violent and otherwise negative images.

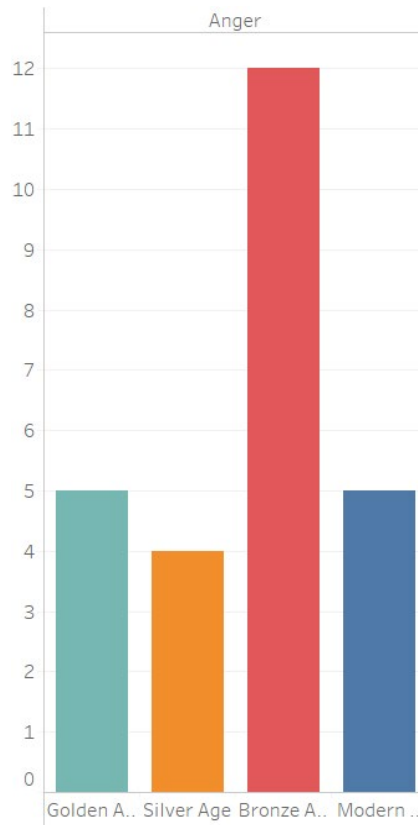
In the Bronze Age of comics, 30.3% of mental content appeared in dialogue, 33.3% of mental health content appeared in exposition, and 36.4% of mental health content appeared in images. With the development of darker stories and images in the Bronze Age, it makes sense that there would be an almost three-way tie between mental health content displayed in dialogue, exposition, and images.

In the Modern Age of comics, 57.1% of mental health content appeared in dialogue, 19% of mental health content appeared in exposition, and 23.8% of mental health content appeared in images. This once again moves away from the predicted path. With the emergence of social superheroes, it would be expected that there would be an even balance of content like in the Bronze Age. Instead, dialogue accounts for over half of all mental health content. However, this could be contributed to the fact that characters are more comfortable talking about mental health in comics in this Modern Age.

#### *Existence of Anger, Depression, Mania, and Anxiety*

The final data analysis was of the prevalence of anger, depression, mania, and anxiety. For all comic book eras, anger appeared in 27.3% of instances of mental health

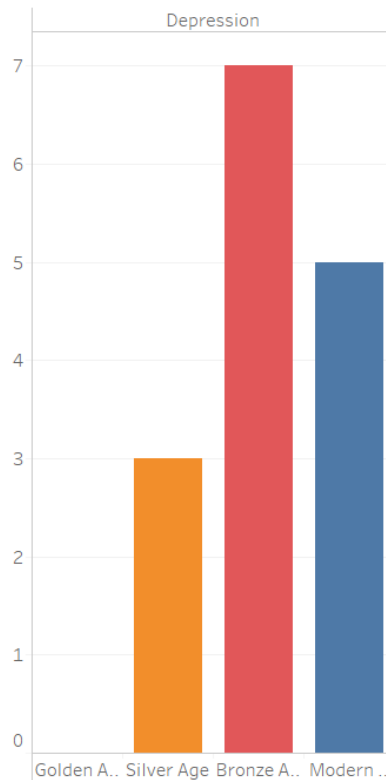
content. As seen below in Figure 5, anger was most prevalent in the Bronze Age of comics. Additionally, the Golden and Modern Ages presented an equal number of instances of anger.



*Figure 5. Breakdown of Appearances of Anger by Comic Book Era*

For all eras, depression appeared in 47.3% of instances of mental health content. Depression was the most prevalent form of mental health conditions across the four eras. As seen in Figure 6 below, it did not appear at all in the Golden Age, and the Modern Age showed a higher prevalence than anger as compared to both the Golden and Silver

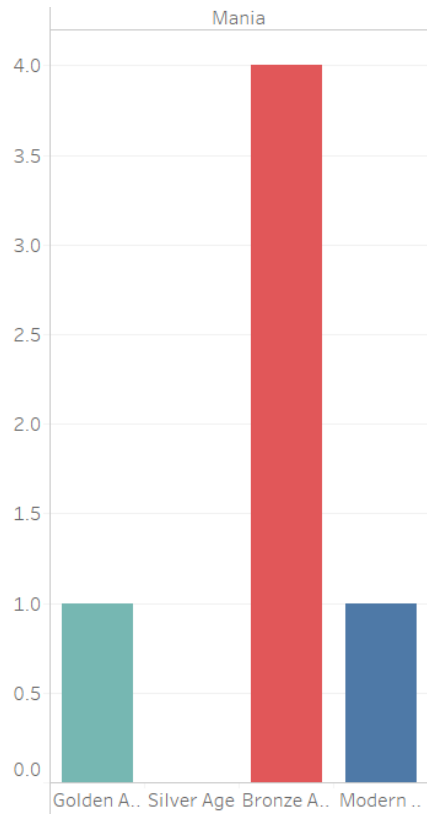
Ages. Once again, the Bronze Age contained the most instances of mental health content.



*Figure 6. Breakdown of Appearances of Depression by Comic Book Era*

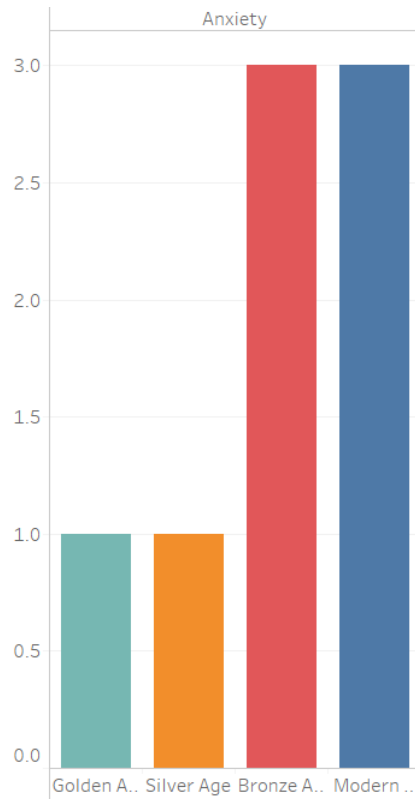
For all eras, mania appeared in 10.9% of instances of mental health content. Mania was the least prevalent of the mental health conditions that were analyzed. According to Figure 7 below, both the Golden and Modern Ages of comics presented only one instance of mania. Even the Bronze Age, which contained the most instances of mania, only contained four examples.





*Figure 7. Breakdown of Appearances of Mania by Comic Book Era*

For all eras, anxiety appeared in 14.5% of instances of mental health content. As seen in Figure 9 below, it was most prevalent in the Bronze and Modern Ages. The Golden and Silver Ages once again presented the least number of instances of mental health content, and as a result, only one instance of anxiety is seen in each.



*Figure 8. Breakdown of Appearances of Anxiety by Comic Book Era*

According to my research data, depression occurred the most often of all mental health conditions. It was the most common condition in three of the eras and tied for the most common in the final era. Mania appeared the least number of times, with the Golden and Silver Ages not presenting any mania-related mental health content.

Despite the limitations presented by my research, my research question can still be answered by my thesis. To begin, mental health content is portrayed across all four eras of comic books. The prevalence of mental health content rises from the Golden Age into the Silver and Bronze Ages. Though it dips in the Modern Age, it remains more prevalent than the Golden and Silver Ages combined. As a result, it can be stated that the presence of mental health content has generally increased from 1939 to today. While

current research focuses on the existence of mental health content and how it affects readers, this research may help researchers to observe patterns in how mental health content is presented. For example, they may find that, while the Modern Age of comics doesn't present mental health content as often as the Bronze Age, it may be more/less educational to readers than the Bronze Age representation.

In terms of how mental health content is presented, dialogue was the main avenue of presentation. Occupying 100% of the sampling data in the Golden Age, dialogue was originally the only method through which mental health content was portrayed. The balance between presentation through dialogue, exposition, and images shifted in the Silver and Bronze Ages, which was almost equally split in the Bronze Age.

In terms of the types of mental health conditions presented, depression was the most prevalent in all four eras of comics (in the Modern Age, it was tied with anger). Anxiety and mania are much less often covered, with mania not appearing at all in the Golden and Silver Ages. This may provide insight on the types of mental health content that comic book creators are comfortable writing/drawing about. For example, in general, comic book creators may have more experience with depression than mania and anxiety.

## Conclusion

Across the four comic book eras, mental health content existed in 28% of the sampled data. Additionally, there is a general upward trend in the existence of mental health content in Batman comic books from 1939 to today. Based on the data that was collected, connections can be drawn to existing research. Additionally, the data can help provide insight into research gaps.

## CHAPTER 5

### DISCUSSION

The goal of my research thesis has been to identify how often mental health content appears in Batman comic books from 1939 to today. As seen in the data in the previous section, mental health content appeared in 28.5% of all collected data. Below I will address how the results answer my research question, the limitations that appeared in my research, and what future research can be conducted.

#### Research Discussion

For this thesis, I explored the question “How does the portrayal of mental health conditions change across the four main eras of comic books as portrayed through Batman comic book series from each era?”.

As observed in the data, mental health content was not very prevalent in the Golden and Silver Ages of comics. The Golden Age’s lack of content can potentially be tied to the fact that it was the beginning of the American comic book. In the beginning years, comic book writers and artists may have been more focused crafting the character of Batman than using him as a symbol for other subjects. Despite this, comic books were still used at a minimal level to display mental health conditions. As stated in Cheng’s research, comic books are an excellent way to insert important messages as subtext (Cheng, 2012). Perhaps writers and artists of the Golden Age realized this and used it to their advantage, even if only a few times.

In the Silver Age, the emergence of the Comics Code Authority can be tied to the drop in mental health content. The goal of the Comics Code Authority was to control

inappropriate content in comic books. In Wasink, Shimizu, and Camps' experiment regarding superheroes and healthy food choices, it was apparent that superheroes have an influence over children (Wasink, Shimizu, & Camps, 2011).

The Comics Code Authority aimed to limit depictions of sexual acts, death, and uses of violence in order to protect the readers. Based on Groensteen's analysis of comic books, those outside the group that engage with comic books are often of a belief that comic books are only for children (Groensteen, 2009, para. 2). The Comics Code Authority potentially fit into this group of people who don't read comic books and thus were worried about protecting children. Because mental health content is linked to anger, depression, mania, and anxiety, it is quite possible that the Comics Code Authority's emergence forced comic book publishers to reduce the amount of mental health content that was covered in their comics. Even back in the Silver Age of comics, it was easy to see that superheroes are beings that readers look up to (Bowden, 2018, para. 2). Bowden's analysis of modern superheroes as pop culture celebrities combined with Wasink, Shimizu, and Camps' experiment about superheroes' influence on children offer plenty of credibility to the decisions made by the Comics Code Authority and the subsequent decline in the amount of mental health content in comic books. The existence of content began dropping at the same time that the Comics Code Authority was enacted, and it continued until the 1970s.

In the 1970s, creators began writing and drawing comics that were darker and in stark contrast to the rules set forth by the Comics Code Authority. This Bronze Age of comics displayed the most amount of mental health content by a wide margin as compared to the other ages. The reasons for this could potentially be tied to Yu's analysis

of comic books as a cathartic escape for readers. Yu posits that comic books identify with readers because they display real human struggles, and allow the readers to fill in the blanks with their imagination. Using their imagination provides the readers with a more personal connection to the material (Yu, 2015).

During the Bronze Age of comics, creators began creating more realistic stories by writing three dimensional characters. More fleshed out characters would inevitably show superheroes struggling with mental health issues, as it is a common part of life for many people. This, combined with Yu's analysis of the relationship that readers have with comic books would potentially lead to a further increase in the amount of mental health content displayed in comic books. At the beginning of the Bronze Age, creators may have seen how readers reacted to their new writing and artistic displays, thus convincing them to continue to write and draw mental health conditions as a way to speak to readers.

Mental health is seen by some as a taboo topic, so displaying comic characters as their most vulnerable and broken would exist well within the lane of the dark nature of the Bronze Age of comics. Additionally, by ignoring the rules set forth by the Comics Code Authority, writers and artists were free to write about the subject matter that was made unpublishable by them. According to Lawrence's interview with Batman writer Tom King, comic books allow writers and artists to reach audiences on a personal level (Lawrence, 2019). Writers and artists of the Bronze Age may have been attempting to do just that by ignoring the rules of the Comics Code Authority.

Though the amount of mental health content in Batman comics was higher in the Modern Age than the Golden and Silver Ages, it was significantly lower than in the

Bronze Age. This could potentially be attributed to the changing world of superheroes in the 21st century. As stated in Bruno Heller's interview about the television show "Gotham", the portrayal of comic book properties is a "stadium rock show, not a cabaret act," (Jurgensen, 2014, para. 15). Creators may have found that mental health content limits their audience size and opted for a different approach in this new age of comics.

With the prevalence of the internet and social media, comic book characters have been able to reach new audiences outside of the traditional comic book format. Just look at Wasink, Shimizu, and Camps' experiment on how superheroes can be used to convince children to eat healthy foods (Wasink, Shimizu, & Camps, 2011). The influence of comic book characters over audiences has a renewed power, and comic book creators and publishers alike may have decided that mental health content in comic books isn't as important as it once was.

Despite the drop in the prevalence of mental health content in the Modern Age of comics, it is still important to note that mental health content exists today. Batman authors like Tom King strive to make the character real and relatable. One way to accomplish this is to show characters like Batman experiencing real human emotions. However, another more commercially viable option is to use comic book characters to reach wider audiences by having them endorse products and movements. As seen in Wansink, Shimizu, and Camps's research experiment, popular comic book characters greatly influence children (Wansink, Shimizu, & Camps, 2011). Even if comic book characters can be used as avenues for the voiceless that are struggling with mental health issues, commercial campaigns have the potential to pull in more money for the publisher.

In addition, comic books can continue to be used as educational tools. Writers such as Tom King strive to teach others about mental health conditions in his comic books. The results of my research show that mental health content, though changing, still exists in comic books. As a result, educators could use them as an avenue to reach their students. Comic books are a relatable form of communication, and educators can use them to approach difficult topics such as mental health.

### Future Research

Future researchers can expand on this work in many ways. They could analyze how the changes mapped in the data are affected by American history and culture during the respective eras. Additionally, they could hone in on the Bronze Age, the era with the most appearances of mental health content, and identify how content can benefit readers.

Other research expansions include the addition of more comic book characters and analyzing content created in other countries. The research presented in this thesis offers many avenues through which additional research can be conducted, whether by technical communicators, mental health experts, comic book researchers, or a new field of comic book research.

### Conclusion

The research presented in this thesis provides clarity on some of the existing research in the study of the presence of mental health content in Batman comic books. Though it has already been proven that mental health content exists in comic books, this research shows that mental health content has generally increased in presence from 1939



to today, with its most common appearances from 1970 to 1986. Additionally, this research shows that dialogue is the most common avenue through which mental health content is presented, and that depression is the most common type of mental health condition presented from the four that were analyzed. After 1986, the existence of mental health content declined, but not to the levels of the Golden or Silver Ages of comic books.

## REFERENCES

Bowden, M. (2018, July 8). *Hollywood's Booming Comic Book Age*. New York Times. Retrieved February 2, 2020, <https://go-gale-com.ezproxy1.lib.asu.edu/ps/i.do?id=GALE%7CA545736698&v=2.1&u=asuniv&it=r&p=CWI&sw=w>

Burke, L. (2016). *The Comic Book Film Adaptation: Exploring Modern Hollywood's Leading Genre*. University Press of Mississippi.

Burlingame, R. (2019). *Tom King on Heroes in Crisis, The Fan Reaction, and Wally West's Future*. Comicbook. Retrieved February 4, 2020, from <https://comicbook.com/dc/2019/05/22/tom-king-on-heroes-in-crisis-the-fan-reaction-and-more/>

Chambliss, J. C., Svitavsky, W. L., & Donaldson, T. C. (2014). *Ages of heroes, eras of men: Superheroes and the American experience*. Cambridge Scholars Publishing. <https://www.cambridgescholars.com/download/sample/57744>

Cheng, K. (2012). *See What I Mean: How to Use Comics to Communicate Ideas*. Rosenfeld Media.

*The Comics Code of 1954*. Comic Book Legal Defense Fund. Retrieved on August 16, 2019, from <http://cbldef.org/the-comics-code-of-1954/>

Cowan, J. (2011). The Ode: Comics Code (1954 – 2011). *Canadian Business*. <https://www.canadianbusiness.com/lifestyle/the-ode-comics-code-1954-2011/>

*The Golden Age of Comics*. PBS. Retrieved on August 16, 2019, from <http://www.pbs.org/opb/historydetectives/feature/the-golden-age-of-comics/>

Hatfield, C., Heer, J., & Worcester K. (2014). *The Superhero Reader. Studies in Popular Culture*, 36(2), 177-179. <https://www-jstor-org.ezproxy1.lib.asu.edu/stable/24332658>

Hawley, S. (2016) *Depictions of Mental Illness in Batman Comic Books*. University of Hartford. [https://books.google.com/books/about/Depictions\\_of\\_Mental\\_Illness\\_in\\_Batman\\_C.html?id=KNu\\_swEACAAJ](https://books.google.com/books/about/Depictions_of_Mental_Illness_in_Batman_C.html?id=KNu_swEACAAJ)

Heer, J., Worcester, K., Andrae, T., Barker, M., Beaty, B., Benson, J., Carrier, D., Chute, H., Coogan, P., Di Liddo, P., Dorfman, A., Groensteen, T., Harvey, R., Hatfield, C., Inge, M., Kannenberg, G., Kasakove, D., Kern, A., Kunzle, D., ... Witek, J., (2009). *A Comics Study Reader*. University Press of Mississippi. <https://www.jstor.org/stable/j.ctt2tvd9s>

Jurgensen, J. (2014). ARENA --- Superheroes Invade The Living Room --- Comic-book stars, already dominating movie screens, are making a high-stakes move into TV. *Wall Street Journal*. [https://search-proquest-com.ezproxy1.lib.asu.edu/docview/1561408100?accountid=4485&rfr\\_id=info%3Axri%2Fsid%3Aprimo](https://search-proquest-com.ezproxy1.lib.asu.edu/docview/1561408100?accountid=4485&rfr_id=info%3Axri%2Fsid%3Aprimo)

Kane, B. Finger, B. (2005). *Batman Chronicles, Vol. 1*. DC Comics.

Kidman, S. (2015). Self-Regulation through Distribution: Censorship and the Comic Book Industry in 1954. *University of Texas Press*, 75.  
<https://www.utexaspressjournals.org/doi/abs/10.7560/VLT7503>

King, T. (2017). *Batman: Cold Days*. DC Comics. [www.comixology.com](http://www.comixology.com)

King, T. (2017). *Batman: I Am Bane*. DC Comics. [www.comixology.com](http://www.comixology.com)

King, T. (2017). *Batman: I Am Suicide*. DC Comics. [www.comixology.com](http://www.comixology.com)

Langley, T. (2012). *Batman and Psychology: A Dark and Stormy Knight*. John Wiley & Sons.

Lawrence, J. (2019). *Trauma, grief and murky consequences: Ex-CIA agent explores war's impact in role as Batman author*. Stars and Stripes. Retrieved February 4, 2020, from <https://www.stripes.com/trauma-grief-and-murky-consequences-ex-cia-agent-explores-war-s-impact-in-role-as-batman-author-1.584280>

Miller, F. (2016). *Batman: The Dark Knight Returns 30th Anniversary Edition*. DC Comics. [www.comixology.com](http://www.comixology.com)

Moench, D., Dixon, C., & Grant, A. (2012). *Batman: Knightfall, Vol. 1*. DC Comics. [www.comixology.com](http://www.comixology.com)

Reslen, E. (2018). *'Keep Moving Forward, and If It's Time To Go, It's Time': Stan Lee's Most Inspiring Quotes*. Esquire. Retrieved February 1, 2020, from <https://www.esquire.com/entertainment/a25016796/stan-lee-memorable-quotes/>

Sales de Alcântara, C. & Barros Bezerra, J. A. (2016). The playful, the school, and health: nutrition education in comic books. *Work, Education and Health*, 14(3).  
[http://www.scielo.br/scielo.php?script=sci\\_arttext&pid=S1981-77462016000300889&lng=pt&tlng=pt](http://www.scielo.br/scielo.php?script=sci_arttext&pid=S1981-77462016000300889&lng=pt&tlng=pt)

Shaver, G. (2013). Comic Book Pushes Mental Health to Forefront. *The Epoch Times*.  
<http://login.ezproxy1.lib.asu.edu/login?url=https://search-proquest-com.ezproxy1.lib.asu.edu/docview/1470959857?accountid=4485>

- Shaw, P. T. (2017). *What does Psychology Know and Understand about the Psychological Effects of Reading Superhero Comic Books?: An Exploratory Study*. Oklahoma State University. <https://core.ac.uk/download/pdf/215225012.pdf>
- Starlin, J. (2011). *Batman: A Death in the Family*. DC Comics. [www.comixology.com](http://www.comixology.com)
- TEDxUCLA. (2015). Capes, cowls and courage: the psychological power of superheroes [Video]. [https://tedx.ucla.edu/talks/andrea\\_letamendi\\_capes\\_cowls\\_and\\_courage/](https://tedx.ucla.edu/talks/andrea_letamendi_capes_cowls_and_courage/)
- Valenzuela, B. E. (2017). *Comic-Con 2017: This psychologist uses Batman characters to help people learn about mental illness*. The Orange County Register. Retrieved on August 14, 2019, from <https://www.ocregister.com/2017/07/22/comic-con-2017-this-psychologist-uses-batman-characters-to-help-people-learn-about-mental-illness/>
- Van Klaveren, T. (2016). Mole valley comic book artist looks to challenge misconceptions of mental health problems with new series. *Northcliffe Newspapers Group Limited*. [https://search-proquest-com.ezproxy1.lib.asu.edu/docview/1761014341?rfr\\_id=info%3Axri%2Fsid%3Aprimo](https://search-proquest-com.ezproxy1.lib.asu.edu/docview/1761014341?rfr_id=info%3Axri%2Fsid%3Aprimo)
- Wansink, B., Shimizu, M., & Camps, G. (2011). What would Batman eat?: priming children to make healthier fast food choices. *Pediatric Obesity*, 7, 121-123. <https://onlinelibrary-wiley-com.ezproxy1.lib.asu.edu/doi/pdfdirect/10.1111/j.2047-6310.2011.00003.x>
- Young, A., Gabriel, S., Hollar, J. (2012). Batman to the rescue! The protective effects of parasocial relationships with muscular superheroes on men's body image. *Journal of Experimental Social Psychology*, 49(1), 173-177. <https://www-sciencedirect-com.ezproxy1.lib.asu.edu/science/article/pii/S0022103112001552#s0015>
- Yu, H. (2015). *The Other Kind of Funnies: Comics in Technical Communication*. Routledge. <https://ebookcentral-proquest-com.ezproxy1.lib.asu.edu/lib/asulib-ebooks/reader.action?docID=4394527>
- (2016). *Batman & Superman in World's Finest: The Silver Age Omnibus Vol. 1*. DC Comics. [www.comixology.com](http://www.comixology.com)
- (2017, August 23). *Comics Code Authority: How censorship has affected the history of American comics*. The Artifice. Retrieved August 15, 2019, from <https://the-artifice.com/comics-code-authority/>
- (2020, February 3). *All Time Worldwide Box Office for Based on Comic/Graphic Novel Movies*. The Numbers. Retrieved January 18, 2020, from

(2020, February 3). *All Time Worldwide Box Office*. The Numbers. Retrieved January 18, 2020, from <https://www.the-numbers.com/box-office-records/worldwide/all-movies/cumulative/all-time>

(2020, February 15). *Useful Notes / The Bronze Age of Comic Books*. TV Tropes. Retrieved on 2/15/2020 from <https://tvtropes.org/pmwiki/pmwiki.php/UsefulNotes/TheBronzeAgeOfComicBooks>

APPENDIX A  
DATA COLLECTION RESULTS

Gold Age - The Batman Chronicles

Sample Round	Issue	Page	Mental Health Content	In Dialogue, Image, or Exposition
1	37	6	No	N/A
2	28	6	No	N/A
3	34	4	No	N/A
4	32	1	No	N/A
5	35	4	No	N/A
6	29	2	No	N/A
7	36	6	Anger; I felt annoyed	Dialogue
8	32	1	No	N/A
9	32	6	No	N/A
10	30	5	No	N/A
11	30	4	No	N/A
12	30	4	No	N/A
13	34	6	No	N/A
14	29	4	No	N/A
15	27	6	No	N/A
16	31	3	No	N/A
17	37	1	No	N/A
18	32	1	No	N/A
19	27	6	No	N/A
20	28	1	No	N/A
21	30	2	No	N/A
22	33	4	No	N/A
23	30	6	Mania; I often feel more self-confident than usual.	Dialogue
24	27	4	No	N/A
25	36	4	Anger; I felt annoyed	Dialogue
26	33	4	No	N/A

27	36	2	No	N/A
28	1	5	No	N/A
29	35	3	No	N/A
30	37	1	No	N/A
31	1	6	Anxiety; I felt fearful	Dialogue
32	37	5	No	N/A
33	37	1	No	N/A
34	37	5	No	N/A
35	36	1	No	N/A
36	27	1	No	N/A
37	30	3	No	N/A
38	32	3	No	N/A
39	29	5	Anger; I felt like I was ready to explode	Dialogue
40	37	3	No	N/A
41	28	3	No	N/A
42	38	1	No	N/A
43	28	5	Anger; I felt angry	Dialogue
44	34	1	No	N/A
45	37	3	No	N/A
46	37	3	No	N/A
47	36	2	No	N/A
48	32	4	Anger; I felt angry	Dialogue
49	1	5	No	N/A
50	29	3	No	N/A



Silver Age - The Black Casebook

Sample Round	Issue	Page	Mental Health Content	In Dialogue, Image, or Exposition
1	World's Finest 78	5	No	N/A
2	World's Finest 93	3	No	N/A
3	World's Finest 76	2	Angry; I felt angry	Dialogue
4	World's Finest 91	1	No	N/A
5	World's Finest 84	11	No	N/A
6	World's Finest 78	9	Anger; I felt annoyed	Dialogue
7	World's Finest 78	8	Anger; I felt grouchy	Dialogue
8	World's Finest 76	10	No	N/A
9	World's Finest 76	13	No	N/A
10	World's Finest 85	13	No	N/A
11	World's Finest 79	9	No	N/A
12	World's Finest 85	5	No	N/A
13	World's Finest 74	9	No	N/A
14	World's Finest 84	12	No	N/A
15	World's Finest 82	4	No	N/A
16	World's Finest 73	11	No	N/A
17	World's Finest 93	1	No	N/A

18	World's Finest 73	7	No	N/A
19	World's Finest 78	9	Anger; I felt annoyed	Dialogue
20	World's Finest 92	10	No	N/A
21	World's Finest 71	13	No	N/A
22	World's Finest 72	12	No	N/A
23	World's Finest 92	6	No	N/A
24	World's Finest 89	11	Depression; I felt helpless	Exposition
25	World's Finest 79	9	No	N/A
26	World's Finest 84	9	No	N/A
27	World's Finest 84	6	Anxiety; I felt uneasy	Exposition
28	World's Finest 76	12	No	N/A
29	World's Finest 85	12	No	N/A
30	World's Finest 75	7	Depression; I felt like a failure	Dialogue, Exposition
31	World's Finest 84	7	No	N/A
32	World's Finest 86	8	No	N/A
33	World's Finest 80	1	No	N/A
34	World's Finest 80	9	No	N/A
35	World's Finest 91	2	No	N/A
36	World's Finest 81	11	No	N/A

37	World's Finest 83	13	No	N/A
38	World's Finest 76	12	No	N/A
39	World's Finest 88	6	No	N/A
40	World's Finest 79	8	No	N/A
41	World's Finest 80	4	No	N/A
42	World's Finest 88	4	No	N/A
43	World's Finest 83	4	No	N/A
44	World's Finest 93	6	No	N/A
45	World's Finest 93	3	No	N/A
46	World's Finest 79	10	Depression; I felt helpless	Exposition
47	World's Finest 90	11	No	N/A
48	World's Finest 90	5	No	N/A
49	World's Finest 84	6	No	N/A
50	World's Finest 87	4	No	N/A

#### Bronze Age - The Dark Knight Returns

Sample Round	Issue	Page	Mental Health Content	In Dialogue, Image, or Exposition
1	2	34	No	N/A
2	1	35	Anger; I was grouchy; I felt annoyed	Dialogue
3	4	36	Depression; I felt like I had nothing to look forward to; I felt unhappy	Dialogue

4	3	41	No	N/A
5	4	15	Anger; I felt like I was ready to explode	Dialogue, Image
6	1	44	Anger; I felt annoyed	Exposition
7	1	16	Depression; I felt helpless	Image
8	1	46	Anger; I felt like I was ready to explode	Image, Exposition
9	1	28	Mania; I am constantly more active or on the go all the time	Dialogue
10	2	38	No	N/A
11	3	15	No	N/A
12	4	9	No	N/A
13	2	1	No	N/A
14	2	30	Depression; I felt worthless; I felt like a failure	Dialogue
15	1	46	Anger; I felt like I was ready to explode	Image, Exposition
16	1	25	No	N/A
17	2	10	No	N/A
18	1	39	Mania; I am constantly more active or on the go all the time	Dialogue
19	4	33	No	N/A
20	2	24	Mania; I am constantly more active or on the go all the time	Image, Exposition
21	4	43	Anger; I felt like I was ready to explode	Dialogue, Image
22	2	6	No	N/A
23	4	24	No	N/A
24	2	18	No	N/A
25	1	38	No	N/A

Bronze Age - A Death in the Family

Sample Round	Issue	Page	Mental Health Content	In Dialogue, Image, or Exposition
1	426	12	Depression; I felt depressed	Exposition
2	428	5	Anger; I felt angry, I was grouchy	Exposition
3	429	16	No	N/A
4	428	9	Depression; I felt hopeless	Exposition, Image
5	429	9	No	N/A
6	426	16	Anxiety; I felt uneasy, I felt tense	Image
7	427	4	Depression; I felt sad	Image
8	428	22	No	N/A
9	426	14	Anxiety; I felt worried	Exposition
10	428	21	Mania; I have occasionally been more active than usual	Dialogue
11	427	8	No	N/A
12	426	1	No	N/A
13	427	5	Anger; I was grouchy	Image
14	427	9	Anxiety; I felt nervous	Exposition
15	426	4	Anger; I felt like I was ready to explode	Dialogue, Exposition
16	426	9	No	N/A
17	426	15	No	N/A
18	429	8	No	N/A
19	429	5	Anger; I felt annoyed	Dialogue
20	426	3	Anger; I was irritated more than people knew	Exposition
21	428	13	Depression; I felt sad	Image
22	429	21	No	N/A

23	427	5	Anger; I was grouchy	Image
24	427	18	No	N/A
25	428	12	No	N/A

Modern Age - Knightfall

Sample Round	Issue	Page	Mental Health Content	In Dialogue, Image, or Exposition
1	498	9	Depression; I felt helpless, I felt hopeless	Dialogue
2	495	4	Anxiety; I felt anxious	Exposition
3	664	20	No	N/A
4	659	2	No	N/A
5	498	21	Depression; I felt sad, I felt like a failure	Dialogue
6	498	8	Depression; I felt helpless, I felt hopeless	N/A
7	500	20	No	N/A
8	665	21	Anger; I felt annoyed	Dialogue, Image
9	499	18	No	N/A
10	492	21	No	N/A
11	661	9	Anxiety; I felt fearful	Dialogue
12	660	16	No	N/A
13	499	14	Mania; I frequently feel more self-confident than usual	Dialogue

Modern Age - I Am Suicide

Sample Round	Issue	Page	Mental Health Content	In Dialogue, Image, or Exposition
1	14	8	No	N/A

2	14	17	No	N/A
3	15	16	No	N/A
4	9	14	No	N/A
5	9	5	No	N/A
6	14	21	No	N/A
7	12	13	No	N/A
8	9	13	No	N/A
9	12	4	Depression; I felt like a failure, I felt unhappy	Exposition
10	11	8	Anger; I felt annoyed	Dialogue
11	11	14	No	N/A
12	10	3	No	N/A
13	10	22	Anger; I was grouchy	Dialogue, Image

#### Modern Age - I Am Bane

Sample Round	Issue	Page	Mental Health Content	In Dialogue, Image, or Exposition
1	19	17	No	N/A
2	18	18	No	N/A
3	20	2	Depression; I felt helpless	Exposition
4	24	12	No	N/A
5	Annual 1	17	No	N/A
6	23	22	Anger; I felt annoyed	Dialogue
7	24	16	No	N/A
8	18	8	Anger; I felt like I was ready to explode	Dialogue, Image
9	24	12	No	N/A
10	24	11	Depression; I felt helpless, I felt hopeless	Dialogue

11	16	19	Anxiety; I felt fearful	Dialogue, Image
12	18	20	No	N/A

Modern Age - Cold Days

Sample Round	Issue	Page	Mental Health Content	In Dialogue, Image, or Exposition
1	55	9	No	N/A
2	57	1	No	N/A
3	51	17	Anger; I felt like I was ready to explode	Dialogue, Image
4	53	6	No	N/A
5	55	14	No	N/A
6	55	1	No	N/A
7	53	1	No	N/A
8	51	9	No	N/A
9	53	9	No	N/A
10	52	1	No	N/A
11	57	3	No	N/A
12	54	16	No	N/A



APPENDIX B  
RAW RESEARCH DATA

Gold Age - The Batman Chronicles

Sample Round	Issue	Page	Mental Health Content	In Dialogue, Image, or Exposition
1	37	6	No	N/A
2	28	6	No	N/A
3	34	4	No	N/A
4	32	1	No	N/A
5	35	4	No	N/A
6	29	2	No	N/A
7	36	6	Anger; I felt annoyed	Dialogue
8	32	1	No	N/A
9	32	6	No	N/A
10	30	5	No	N/A
11	30	4	No	N/A
12	30	4	No	N/A
13	34	6	No	N/A
14	29	4	No	N/A
15	27	6	No	N/A
16	31	3	No	N/A
17	37	1	No	N/A
18	32	1	No	N/A
19	27	6	No	N/A
20	28	1	No	N/A
21	30	2	No	N/A
22	33	4	No	N/A
23	30	6	Mania; I often feel more self-confident than usual.	Dialogue
24	27	4	No	N/A
25	36	4	Anger; I felt annoyed	Dialogue
26	33	4	No	N/A

27	36	2	No	N/A
28	1	5	No	N/A
29	35	3	No	N/A
30	37	1	No	N/A
31	1	6	Anxiety; I felt fearful	Dialogue
32	37	5	No	N/A
33	37	1	No	N/A
34	37	5	No	N/A
35	36	1	No	N/A
36	27	1	No	N/A
37	30	3	No	N/A
38	32	3	No	N/A
39	29	5	Anger; I felt like I was ready to explode	Dialogue
40	37	3	No	N/A
41	28	3	No	N/A
42	38	1	No	N/A
43	28	5	Anger; I felt angry	Dialogue
44	34	1	No	N/A
45	37	3	No	N/A
46	37	3	No	N/A
47	36	2	No	N/A
48	32	4	Anger; I felt angry	Dialogue
49	1	5	No	N/A
50	29	3	No	N/A

Silver Age - Batman & Superman: World's Finest

Sample Round	Issue	Page	Mental Health Content	In Dialogue, Image, or Exposition
1	World's Finest 78	5	No	N/A
2	World's Finest 93	3	No	N/A
3	World's Finest 76	2	Angry; I felt angry	Dialogue
4	World's Finest 91	1	No	N/A
5	World's Finest 84	11	No	N/A
6	World's Finest 78	9	Anger; I felt annoyed	Dialogue
7	World's Finest 78	8	Anger; I felt grouchy	Dialogue
8	World's Finest 76	10	No	N/A
9	World's Finest 76	13	No	N/A
10	World's Finest 85	13	No	N/A
11	World's Finest 79	9	No	N/A
12	World's Finest 85	5	No	N/A
13	World's Finest 74	9	No	N/A
14	World's Finest 84	12	No	N/A
15	World's Finest 82	4	No	N/A
16	World's Finest 73	11	No	N/A
17	World's Finest 93	1	No	N/A

18	World's Finest 73	7	No	N/A
19	World's Finest 78	9	Anger; I felt annoyed	Dialogue
20	World's Finest 92	10	No	N/A
21	World's Finest 71	13	No	N/A
22	World's Finest 72	12	No	N/A
23	World's Finest 92	6	No	N/A
24	World's Finest 89	11	Depression; I felt helpless	Exposition
25	World's Finest 79	9	No	N/A
26	World's Finest 84	9	No	N/A
27	World's Finest 84	6	Anxiety; I felt uneasy	Exposition
28	World's Finest 76	12	No	N/A
29	World's Finest 85	12	No	N/A
30	World's Finest 75	7	Depression; I felt like a failure	Dialogue, Exposition
31	World's Finest 84	7	No	N/A
32	World's Finest 86	8	No	N/A
33	World's Finest 80	1	No	N/A
34	World's Finest 80	9	No	N/A
35	World's Finest 91	2	No	N/A
36	World's Finest 81	11	No	N/A

37	World's Finest 83	13	No	N/A
38	World's Finest 76	12	No	N/A
39	World's Finest 88	6	No	N/A
40	World's Finest 79	8	No	N/A
41	World's Finest 80	4	No	N/A
42	World's Finest 88	4	No	N/A
43	World's Finest 83	4	No	N/A
44	World's Finest 93	6	No	N/A
45	World's Finest 93	3	No	N/A
46	World's Finest 79	10	Depression; I felt helpless	Exposition
47	World's Finest 90	11	No	N/A
48	World's Finest 90	5	No	N/A
49	World's Finest 84	6	No	N/A
50	World's Finest 87	4	No	N/A

Bronze Age - A Death in the Family

Sample Round	Issue	Page	Mental Health Content	In Dialogue, Image, or Exposition
1	426	12	Depression; I felt depressed	Exposition
2	428	5	Anger; I felt angry, I was grouchy	Exposition

3	429	16	No	N/A
4	428	9	Depression; I felt hopeless	Exposition, Image
5	429	9	No	N/A
6	426	16	Anxiety; I felt uneasy, I felt tense	Image
7	427	4	Depression; I felt sad	Image
8	428	22	No	N/A
9	426	14	Anxiety; I felt worried	Exposition
10	428	21	Mania; I have occasionally been more active than usual	Dialogue
11	427	8	No	N/A
12	426	1	No	N/A
13	427	5	Anger; I was grouchy	Image
14	427	9	Anxiety; I felt nervous	Exposition
15	426	4	Anger; I felt like I was ready to explode	Dialogue, Exposition
16	426	9	No	N/A
17	426	15	No	N/A
18	429	8	No	N/A
19	429	5	Anger; I felt annoyed	Dialogue
20	426	3	Anger; I was irritated more than people knew	Exposition
21	428	13	Depression; I felt sad	Image
22	429	21	No	N/A
23	427	5	Anger; I was grouchy	Image
24	427	18	No	N/A
25	428	12	No	N/A

Bronze Age - The Dark Knight Returns

Sample Round	Issue	Page	Mental Health Content	In Dialogue, Image, or Exposition
1	2	34	No	N/A
2	1	35	Anger; I was grouchy; I felt annoyed	Dialogue
3	4	36	Depression; I felt like I had nothing to look forward to; I felt unhappy	Dialogue
4	3	41	No	N/A
5	4	15	Anger; I felt like I was ready to explode	Dialogue, Image
6	1	44	Anger; I felt annoyed	Exposition
7	1	16	Depression; I felt helpless	Image
8	1	46	Anger; I felt like I was ready to explode	Image, Exposition
9	1	28	Mania; I am constantly more active or on the go all the time	Dialogue
10	2	38	No	N/A
11	3	15	No	N/A
12	4	9	No	N/A
13	2	1	No	N/A
14	2	30	Depression; I felt worthless; I felt like a failure	Dialogue
15	1	46	Anger; I felt like I was ready to explode	Image, Exposition
16	1	25	No	N/A
17	2	10	No	N/A
18	1	39	Mania; I am constantly more active or on the go all the time	Dialogue
19	4	33	No	N/A
20	2	24	Mania; I am constantly more active or on the go all the time	Image, Exposition
21	4	43	Ager; I felt like I was ready to explode	Dialogue, Image
22	2	6	No	N/A



23	4	24	No	N/A
24	2	18	No	N/A
25	1	38	No	N/A

#### Modern Age - Knightfall

Sample Round	Issue	Page	Mental Health Content	In Dialogue, Image, or Exposition
1	498	9	Depression; I felt helpless, I felt hopeless	Dialogue
2	495	4	Anxiety; I felt anxious	Exposition
3	664	20	No	N/A
4	659	2	No	N/A
5	498	21	Depression; I felt sad, I felt like a failure	Dialogue
6	498	8	Depression; I felt helpless, I felt hopeless	N/A
7	500	20	No	N/A
8	665	21	Anger; I felt annoyed	Dialogue, Image
9	499	18	No	N/A
10	492	21	No	N/A
11	661	9	Anxiety; I felt fearful	Dialogue
12	660	16	No	N/A
13	499	14	Mania; I frequently feel more self-confident than usual	Dialogue

#### Modern Age - I Am Suicide

Sample Round	Issue	Page	Mental Health Content	In Dialogue, Image, or Exposition
1	14	8	No	N/A

2	14	17	No	N/A
3	15	16	No	N/A
4	9	14	No	N/A
5	9	5	No	N/A
6	14	21	No	N/A
7	12	13	No	N/A
8	9	13	No	N/A
9	12	4	Depression; I felt like a failure, I felt unhappy	Exposition
10	11	8	Anger; I felt annoyed	Dialogue
11	11	14	No	N/A
12	10	3	No	N/A
13	10	22	Anger; I was grouchy	Dialogue, Image

Modern Age - I Am Bane

Sample Round	Issue	Page	Mental Health Content	In Dialogue, Image, or Exposition
1	19	17	No	N/A
2	18	18	No	N/A
3	20	2	Depression; I felt helpless	Exposition
4	24	12	No	N/A
5	Annual 1	17	No	N/A
6	23	22	Anger; I felt annoyed	Dialogue
7	24	16	No	N/A
8	18	8	Anger; I felt like I was ready to explode	Dialogue, Image
9	24	12	No	N/A
10	24	11	Depression; I felt helpless, I felt hopeless	Dialogue

11	16	19	Anxiety; I felt fearful	Dialogue, Image
12	18	20	No	N/A

Modern Age - Cold Days

Sample Round	Issue	Page	Mental Health Content	In Dialogue, Image, or Exposition
1	55	9	No	N/A
2	57	1	No	N/A
3	51	17	Anger; I felt like I was ready to explode	Dialogue, Image
4	53	6	No	N/A
5	55	14	No	N/A
6	55	1	No	N/A
7	53	1	No	N/A
8	51	9	No	N/A
9	53	9	No	N/A
10	52	1	No	N/A
11	57	3	No	N/A
12	54	16	No	N/A

APPENDIX C  
DSM-5 CHECKLISTS

Level 2 - Depression - Adult

**LEVEL 2—Depression—Adult\***  
 \*PROMIS Emotional Distress—Depression—Short Form

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Sex:  Male  Female Date: \_\_\_\_\_

If the measure is being completed by an informant, what is your relationship with the individual receiving care? \_\_\_\_\_

In a typical week, approximately how much time do you spend with the individual receiving care? \_\_\_\_\_ hours/week

**Instructions:** On the DSM-5 Level 1 cross-cutting questionnaire that you just completed, you indicated that *during the past 2 weeks* you (the individual receiving care) have been bothered by “no interest or pleasure in doing things” and/or “feeling down, depressed, or hopeless” at a mild or greater level of severity. The questions below ask about these feelings in more detail and especially how often you (the individual receiving care) have been bothered by a list of symptoms **during the past 7 days**. Please respond to each item by marking (✓ or x) one box per row.

In the past SEVEN (7) DAYS....							Clinician Use
	Never	Rarely	Sometimes	Often	Always	Item Score	
1. I felt worthless.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5		
2. I felt that I had nothing to look forward to.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5		
3. I felt helpless.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5		
4. I felt sad.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5		
5. I felt like a failure.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5		
6. I felt depressed.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5		
7. I felt unhappy.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5		
8. I felt hopeless.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5		
<b>Total/Partial Raw Score:</b>							
<b>Prorated Total Raw Score:</b>							
<b>T-Score:</b>							

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Level 2 - Anger - Adult

**LEVEL 2—Anger—Adult\***

\*PROMIS Emotional Distress—Anger—Short Form

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Sex:  Male  Female Date: \_\_\_\_\_

If the measure is being completed by an informant, what is your relationship with the individual receiving care? \_\_\_\_\_

In a typical week, approximately how much time do you spend with the individual receiving care? \_\_\_\_\_ hours/week

**Instructions:** On the DSM-5 Level 1 cross-cutting questionnaire that you just completed, you indicated that *during the past 2 weeks* you (the individual receiving care) have been bothered by “feeling irritated, grouchy, or angry” at a mild or greater level of severity. The questions below ask about these feelings in more detail and especially how often you (the individual receiving care) have been bothered by a list of symptoms **during the past 7 days**. Please respond to each item by marking (✓ or x) one box per row.

						Clinician Use
In the past SEVEN (7) DAYS....						Item Score
	Never	Rarely	Sometimes	Often	Always	
1.	I was irritated more than people knew.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
2.	I felt angry.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
3.	I felt like I was ready to explode.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
4.	I was grouchy.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
5.	I felt annoyed.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
<b>Total/Partial Raw Score:</b>						
<b>Prorated Total Raw Score:</b>						
<b>T-Score:</b>						

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Level 2 - Mania - Adult

**LEVEL 2—Mania—Adult\***  
**\*Altman Self-Rating Mania Scale (ASRM)**

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Sex:  Male  Female Date: \_\_\_\_\_

If the measure is being completed by an informant, what is your relationship with the individual receiving care? \_\_\_\_\_

In a typical week, approximately how much time do you spend with the individual receiving care? \_\_\_\_\_ hours/week

**Instructions:** On the DSM-5 Level 1 cross-cutting questionnaire you just completed, you indicated that *during the past 2 weeks* you (the individual receiving care) have been bothered by “sleeping less than usual, but still having a lot of energy” and/or “starting lots more projects than usual or doing more risky things than usual” at a mild or greater level of severity. The five statement groups or questions below ask about these feelings in more detail.

1. Please read each group of statements/question carefully.
2. Choose the one statement in each group that best describes the way you (the individual receiving care) have been feeling for **the past week**.
3. Check the box (✓ or x) next to the number/statement selected.
4. **Please note:** The word “occasionally” when used here means once or twice; “often” means several times or more and “frequently” means most of the time.

		Clinician Use
Question 1		Item score
<input type="checkbox"/> 1	I do not feel happier or more cheerful than usual.	
<input type="checkbox"/> 2	I occasionally feel happier or more cheerful than usual.	
<input type="checkbox"/> 3	I often feel happier or more cheerful than usual.	
<input type="checkbox"/> 4	I feel happier or more cheerful than usual most of the time.	
<input type="checkbox"/> 5	I feel happier or more cheerful than usual all of the time.	
Question 2		
<input type="checkbox"/> 1	I do not feel more self-confident than usual.	
<input type="checkbox"/> 2	I occasionally feel more self-confident than usual.	
<input type="checkbox"/> 3	I often feel more self-confident than usual.	
<input type="checkbox"/> 4	I frequently feel more self-confident than usual.	
<input type="checkbox"/> 5	I feel extremely self-confident all of the time.	
Question 3		
<input type="checkbox"/> 1	I do not need less sleep than usual.	
<input type="checkbox"/> 2	I occasionally need less sleep than usual.	
<input type="checkbox"/> 3	I often need less sleep than usual.	
<input type="checkbox"/> 4	I frequently need less sleep than usual.	
<input type="checkbox"/> 5	I can go all day and all night without any sleep and still not feel tired.	
Question 4		
<input type="checkbox"/> 1	I do not talk more than usual.	
<input type="checkbox"/> 2	I occasionally talk more than usual.	
<input type="checkbox"/> 3	I often talk more than usual.	
<input type="checkbox"/> 4	I frequently talk more than usual.	
<input type="checkbox"/> 5	I talk constantly and cannot be interrupted.	
Question 5		
<input type="checkbox"/> 1	I have not been more active (either socially, sexually, at work, home, or school) than usual.	
<input type="checkbox"/> 2	I have occasionally been more active than usual.	
<input type="checkbox"/> 3	I have often been more active than usual.	
<input type="checkbox"/> 4	I have frequently been more active than usual.	
<input type="checkbox"/> 5	I am constantly more active or on the go all the time.	
<b>Total/Partial Raw Score:</b>		
<b>Prorated Total Raw Score:</b>		

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Level 2 - Anxiety - Adult

**LEVEL 2—Anxiety—Adult\***

\*PROMIS Emotional Distress—Anxiety—Short Form

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Sex:  Male  Female Date: \_\_\_\_\_

If the measure is being completed by an informant, what is your relationship with the individual? \_\_\_\_\_

In a typical week, approximately how much time do you spend with the individual? \_\_\_\_\_ hours/week

**Instructions to patient:** On the DSM-5 Level 1 cross-cutting questionnaire that you just completed, you indicated that *during the past 2 weeks* you (individual receiving care) have been bothered by “feeling nervous, anxious, frightened, worried, or on edge”, “feeling panic or being frightened”, and/or “avoiding situations that make you anxious” at a mild or greater level of severity. The questions below ask about these feelings in more detail and especially how often you (individual receiving care) have been bothered by a list of symptoms during the past 7 days. Please respond to each item by marking (✓ or x) one box per row.

						Clinician Use
In the past SEVEN (7) DAYS....						Item Score
	Never	Rarely	Sometimes	Often	Always	
1.	I felt fearful.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
2.	I felt anxious.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
3.	I felt worried.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
4.	I found it hard to focus on anything other than my anxiety.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
5.	I felt nervous.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
6.	I felt uneasy.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
7.	I felt tense.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
<b>Total/Partial Raw Score:</b>						
<b>Prorated Total Raw Score:</b>						
<b>T-Score:</b>						

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