CHAPTER II THEORITICAL FRAMEWORK

This chapter explain the theory that will be use when conducting research as describe in the previous chapter. I use several concepts and theories, including intrinsic and extrinsic approaches. Intrinsic approach is characterization, plot, and setting. The extrinsic approach is psychology, denial, and delusion.

2.1. Intrinsic Approaches

To analyze the character of a movie, I use some concepts through intrinsic approach, they are characterization, setting, and plot. I use the intrinsic approach to analyze the element of literary work. I use the concepts of James H. Pickering and Jeffrey D. Hoeper in his book titled Concise Companion to Literature.

2.1.1. Characterization

Characterization is concerned with fundamental character traits and express expectation that the actions of the characters should be plausible, consistent, and adequately motivated. Characters are consistent generally unrealistic, tells us that real people are full of surprises and tend to demand characters who are capable of surprise us in a convincing way. (Pickering and Hoeper, 1981: 277-278)

An writers has two main strategies or tactics for portraying and building character. Telling is one strategy that focuses on explanation and direct comments from the author. The other approach of exhibiting is the indirect, dramatic style, which includes the author standing back to enable the figures to reveal themself directly via their conversation and actions. (Pickering and Hoeper, 1981: 27).

Characterization is a name for the methods a writer uses to reveal a character's values, feelings, goals, etc. to readers. When revealing a character's traits, a writer can do so using direct characterization or indirect characterization. Direct Characterization is when a writer conveys information about a character by telling the information directly to the reader.

This is done through narration when the author comes right out and tells the reader things about the character. For example, the writer might tell us "Sarah was the smartest in the family." or that "Sarah was tall for her age and had an athletic build." In this instance readers have certain knowledge of Sarah's intellect in relation to the rest of the family and of her build/appearance. Direct characterization makes it easy for readers to come to clear understandings bout the character.

However, most information about characters is not so easily ascertained. That is because most of our understandings about characters must be arrived at as a result of indirect characterization. Indirect characterization occurs when the author shows the character in action, and lets the reader interpret what these actions reveal about the character. For example, the author may write, "At report card time Sarah was the one who brought home all "A"s." Readers must then rely on their own knowledge and experience to interpret that Sarah must be smart—perhaps the smartest in the family.

2.1.1.1. **Showing Method**

The other approach of exhibiting is the indirect, dramatic style, which includes the author standing back to enable the characters to reveal themself directly via their conversation and actions. Much of the weight of characterisation is passed to the reader with showing, who must deduce character based on the information supplied in the story. (Pickering and Hoeper, 1981: 27-28). According to Pickering and Hoeper, approach to the "showing method" could involve actively demonstrating or modeling the new information, rather than simply providing a description or explanation. This can help the learner to see how the new information relates to their existing mental models and strategies, and to develop a deeper understanding of the task or situation.

Another approach could be scaffolding the information, which means providing support and guidance that gradually decreases as the learner becomes more confident and capable. As the learner becomes more familiar with the new

information, the teacher or presenter can gradually withdraw the support and guidance, allowing the learner to take on more responsibility and autonomy.

2.1.1.1. Characterization Through the Dialogue

The task of establishing through dialogue is not a simple one. Some personalities are cautious and restrained in what they say; they only talk indirectly, and we must deduce what they sincerely mean from their words. Others are more forthright and direct; they express us, or appear to tell us, what they have in their minds. Some characters are given to chronic exaggeration and overstatement; others to understatement and subtlety. (Pickering and Hoeper, 1981 : 32). According to Pickering and Hoeper character through dialogue, a character's dialogue reflects their mental models and strategies for understanding and navigating the situation they are in. As the situation becomes more complex and the character experiences complications, their dialogue will change to reflect their revised mental models and new strategies.

For example, at the beginning of a story, a character may have a simple and straightforward way of speaking, reflecting their initial understanding and approach to the situation. As the story progresses and the character encounters complications, their dialogue may become more nuanced and reflective, as they begin to question their previous assumptions and seek out new information. Additionally, the character's dialogue may also reveal their personality and behavior. For example, a character who is confident and assertive may use language that is more direct and commanding, while a character who is more reserved and introverted may use language that is more indirect and reserved

a. What is being said

The reader must pay close attention to the substance of the dialogue itself. Is it small talk, or is the subject an important one in the developing action of the plot. (Pickering and Hoeper, 1981: 32)

b. The Occasion

Conversation that take place in private at night are usually more serious and, hence, more revealing than conversation that take place in public during the day. (Pickering and Hoeper, 1981:33)

2.1.2. Plot

A plot is also a narrative of events, the emphasis falling on causality. The timesequence is preserved, but the sense of causality overshadows it (Pickering and Hoeper, 1981: 13). According to Pickering and Hoeper Plot is based on the idea that a story's plot is generated through the interactions between characters' actions and their goals. According to this theory, characters in a story have both short-term and long-term goals, and their actions are driven by these goals. The plot of a story is the result of the characters' efforts to achieve their goals, and the conflicts that arise as they interact with each other and their environment.

In this theory, the plot is seen as a dynamic, ever-changing process that is shaped by the characters' choices and actions. As characters interact with each other, they may change their goals, alter their plans, or encounter new obstacles. These changes in turn can lead to new conflicts and twists in the plot.

The theory also emphasizes the role of the reader in shaping the plot. According to Pickering and Hooper, readers bring their own expectations and background knowledge to a story, and this can influence how they interpret and make sense of the events in the plot.

2.1.2.1. Exposition

The exposition is always provided in the first scene. The exposition provides essential background information, introduces the cast, begins the characterization, and initiates the action. (Pickering and Hoeper, 1981: 269). According to Pickering and Hoeper exposition, also known as the "dynamics of conversation," proposes that conversation is not a passive exchange of information, but an active process of constructing and negotiating meaning. The theory suggests that individuals use various strategies, such as choosing words, intonation, and gestures, to signal their intentions and to align their perspectives with those of their conversational partners.

One key aspect of the theory is the concept of "joint action," which refers to the ways in which speakers use language to coordinate their actions and achieve shared goals. For example, speakers may use phrases like "let's" or "how about" to signal a shared intention to take an action, or they may use deictic words like "this" or "here" to direct attention to a shared object or location.

Another important aspect of the theory is the concept of "indexicality," which refers to the ways in which language is used to signal the speaker's perspective and position in relation to the topic of conversation. For example, speakers may use words like "I" or "we" to signal their own involvement in the topic, or they may use modal verbs like "can" or "should" to signal their opinion or attitude towards it.

2.1.2.2. Complication

The complication is the section of the plot introduces and develops the conflict. It commences when one or more of the main characters first become aware of an impending difficulty or when their relationship first begin to change. (Pickering and Hoeper, 1981: 270). According to Pickering and Hoeper complication proposes that when a person is presented with a new task or situation, they will naturally develop a set of strategies or mental models to understand and navigate it.

However, as the task or situation becomes more complex, these strategies may become inadequate or conflicting, leading to a state of "complication." In this state, the person may experience confusion, frustration, or a sense of being overwhelmed.

2.1.2.3. Crisis

The play's crisis or defining moment happens at the pinnacle of emotional intensity and typically involves a choice, decisive action, or open conflict between both the hero and villain. (Pickering and Hoeper, 1981: 271). According to Pickering and Hoeper crisis builds on their theory of complication by proposing that when a person's strategies and mental models are unable to effectively navigate a complex task or situation, they may experience a state of "crisis." In this state, the person may feel a sense of impending danger or failure, and may struggle to find a clear path forward.

A crisis occurs when a person's ability to cope with a situation is exceeded by the demands of that situation. A crisis state is characterized by feelings of uncertainty, confusion, and powerlessness, and can lead to negative outcomes such as poor performance, burnout, or mental health issues.

2.1.2.4. Falling Action

Falling action of the play result from the protagonist's loss of control and a final catastrophe often appears inevitable. (Pickering and Hoeper, 1981: 272). According to Pickering and Hoeper falling action proposes that after a person has successfully navigated a task or situation and overcome any complications that arose, they will enter a state of "falling action." In this state, the person is able to use the strategies and mental models they developed during the complication phase to efficiently and effectively complete the task or navigate the situation. The person may also reflect on the experience and learn from it, potentially modifying their strategies and mental models for future use.

As the task or situation comes to a close, and the person's goals are achieved, the level of cognitive and emotional demands decrease, the sense of accomplishment and satisfaction increase, and the person can relax and return to a state of equilibrium.

2.1.2.5. Resolution

The resolution is frequently includes some unexpected twist in the plot, the twist cuts sharply through all difficulties and allows the play to end on a happy note. (Pickering and Hoeper, 1981: 273). According to Pickering and Hoeper resolution proposes that when a person is in a state of complication, they will actively seek out new information, revise their mental models, and develop new strategies in order to overcome the complication and make progress. This process is referred to as "resolution." Through resolution, the person is able to understand and navigate the task or situation more effectively and efficiently. The resolution process can also lead to a deeper understanding and mastery of the task or situation.

However, it's important to note that this process is not always easy and it may require effort, experimentation, and sometimes failure. Additionally, the person may encounter new complications as they continue to work on the task or situation, leading to a new cycle of complication and resolution.

2.1.3. Setting

Fiction is defined as a figure in act at a specific time and location. Setting is a wide phrase that includes both the geographical address that surrounds the action in addition to the season of day or year, climatic conditions, and historical period in which the event takes place. Setting, at its most fundamental, aids the reader in seeing the actions of the characters; in other words, it aids in creating and maintaining a illusion of life, or what we call verisimilitude. (Pickering and Hoeper, 1981: 37). According to Pickering and Hoeper According to Pickering and Hoeper resolution proposes that when a person is in a state of complication, they will actively seek out new information, revise their mental models, and develop new strategies in order to overcome the complication and make progress. This process is referred to as "resolution." Through resolution, the person is able to understand and navigate the task or situation more effectively and efficiently.

The resolution process can also lead to a deeper understanding and mastery of the task or situation. However, it's important to note that this process is not always easy and it may require effort, experimentation, and sometimes failure. Additionally, the person may encounter new complications as they continue to work on the task or situation, leading to a new cycle of complication and resolution.

2.1.3.1. Setting as Background of the Action

Clothing, etiquette, events, and institutions unique to a particular period and location are all represented in minute detail to provide a feeling of "life as it was." When we speak of backdrop as background, we are referring to a type of environment that exists primarily for its own purpose, with no clear link to action or individuals, or at most a tangential and minor relationship. (Pickering and Hoeper, 1981: 39). According to Pickering and Hoeper setting as background of action proposes that the physical and social environment in which a task or situation

takes place plays a crucial role in shaping the strategies and mental models that a person develops to navigate it. The setting serves as a background or context that influences the way the task or situation is perceived and approached.

The different settings can lead to different levels of complication. For example, a task that is relatively simple in one setting may become more complex in another setting due to differences in resources, social norms, or other factors. Furthermore, the theory states that the setting can also affect how a person's actions are perceived and interpreted by others. For example, a task that is considered appropriate or acceptable in one setting may be viewed as inappropriate or unacceptable in another setting.

2.1.3.2. Setting as Antagonist

Setting in the form of nature can function as a kind of causal agent or antagonist, helping to establish ploy conflict and determine the outcome of event. (Pickering and Hoeper, 1981: 39). According to Pickering and Hoeper etting as antagonist proposes that the physical and social environment in which a person is operating can actively work against their ability to understand and navigate a task or situation. This can occur when the setting is complex, ambiguous, or unpredictable, or when it is not aligned with the person's goals, abilities, or expectations.

For example, a person may be faced with a task that requires a high degree of precision, such as performing delicate surgery, but the setting in which they are working is poorly lit and noisy. This can create a state of "complication" and make it difficult for the person to perform the task effectively. Similarly, a person may be working in a social setting that is hostile or unfriendly, such as a work environment where there is a lot of competition or politics. This can also create a sense of complication, as the person may feel that they are constantly on guard or not able to rely on their colleagues.

2.2. Extrinsic Approaches

To analyze the script of this movie through extrinsic approach, I used a sociological approach. The concept I use are denial and delusion. Through psychology, it begins with an understanding of the psychology of literature, denial, delusion, and the relationship between the psychology of literature and psychology, denial and delusion concept.

2.2.1. Psychology

Psychology comes from the Greek word psyche which means soul, and logos which means science. So psychology means psychology or science that investigates and studies human behavior. (Minderop, 2018: 3)

The scientific study of human behavior and mental processes is known as psychology. Psychology seeks to understand what individuals do, as well as how and why they be doing it. (Cash, 2013: 42)

The definition of Psychology may be best given in the words of Professor Ladd, as the description and explanation of states of consciousness as such. By states of consciousness are meant such things as sensations, desires, emotions, cognitions, reasonings, decisions, volitions, and the like. Their 'explanation' must of course include the study of their causes, conditions, and immediate con-sequences, so far as these can be ascertained. (James, 1892: 1)

As we can see, psychology is the study of behavior. Elements of psychology are involved with the development of human behavior from childhood until the age when their most important factors were becoming nature (Sanstorm in Haryani, 2017: 33). Emotions, thinking, thoughts, human behavior, struggle, personalities, characterisation, and so on are all aspects of psychology. (Haryani 2017: 34)

2.2.1.1. Psychoanalysis

Psychoanalysis is based on Freud's theory that people can experience catharsis and gain insight into their state of mind by bringing the content of the unconscious into conscious awareness. Through this process, a person can find relief from psychological distress. Freud believed that the human mind was composed of three elements: the id, the ego, and the superego.

Psychoanalytic theory postulates a multitude of different change mechanisms, and a host of new ways of conceptualizing the change process continue to emerge as psychoanalytic theories themselves evolve and proliferate. At the most basic level, there is an understanding that change generally involves making the unconscious conscious, as expressed by Freud's oft cited axiom: "Where id has been there shall ego be." Although Freud's understanding of the nature of the change process evolved over the course of his lifetime, central to his mature thinking was the idea that change involves first becoming aware of our instinctual impulses and unconscious wishes, and then learning to deal with them in a mature, rational, and reflective fashion. For Freud, a central premise was thus that we are driven by unconscious wishes that we are unaware of and this lack of awareness results in driven or self-defeating behavior. Freud believed we delude ourselves about reasons for our behaviors and this self-deception limits our choice. By becoming aware of our unconscious wishes and our defenses against them we increase the choices available to us. Thus, as we decrease the extent to which we are driven by unconscious factors we assume a greater degree of agency. (J.D. Safran, E. Gardner-Schuster: 2016)

The id operates unconsciously, accords with primary process, and impels the organism to engage in need satisfying, tension-reducing activities, which are experienced as pleasure. The ego begins to be described not only as an impersonal "apparatus" whose function is to de-tension the biological strivings of the organism, or as a "device" for mastering excitations, but rather as a personal self. The superego is thus a precipitate of family life. It is an agency that seeks to enforce the striving for perfection, as it holds out to the ego ideal standards and moralistic goals. As a consequence the superego is the "conscience" of the personality, and it can retaliate against the imperfections of the ego by inducing guilt. (Lapsley, Daniel & Ste, Paul. 2012: 5-6)

2.2.1.1.1. Defense Mechanism

According to article write by Dr. Saul McLeod in Simply Psychology, Sigmund Freud (1894, 1896) noted a number of ego defenses which he refers to throughout his written works. Defense mechanisms are unconscious psychological processes that help individuals cope with difficult emotions, thoughts, and situations. They are a normal part of human functioning and can be adaptive in certain situations, but can also become maladaptive if overused or used in inappropriate situations. One of the most well-known theories of defense mechanisms is the theory proposed by psychoanalyst Sigmund Freud. According to Freud, defense mechanisms are used to protect the ego, or the conscious part of the personality, from the demands and conflicts of the id, or the unconscious part of the personality. He identified several defense mechanisms, including repression, denial, projection, regression, and sublimation.

His daughter Anna Freud (1936) developed these ideas and elaborated on them, adding ten of her own. Many psychoanalysts have also added further types of ego defenses. There are 6 types of ego defenses, such as Repression, Denial, Projection, Displacement, Repression, and Sublimation. She proposed that defense mechanisms are divided into three groups: mature, neurotic, and immature. Mature defenses, such as suppression and sublimation, are considered healthy and adaptive. Neurotic defenses, such as repression and denial, are considered less healthy and can lead to maladaptive behaviors. Immature defenses, such as acting out and fantasy, are considered the least healthy and can lead to severe problems in functioning. A more recent theory of defense mechanisms proposed by George Eman Vaillant, a psychoanalyst, argues that defense mechanisms can be classified into two groups: mature and immature. Mature defenses, such as suppression, altruism, and humor, are considered healthy and adaptive. Immature defenses, such as acting out, fantasy, and projection, are considered less healthy and can lead to maladaptive behaviors.

Defense mechanisms are automatically utilized psychological methods that shield a person from Anxiety caused by unwanted thoughts or sensations. Defense Mechanisms, according to Freudian philosophy, entail a distortion of reality in some manner to help us cope with a circumstance. Denial is one of the nine Defense Mechanisms. It is a mental activity in which attention is diverted away from external inputs that, if noticed, would produce psychological anguish or disturbance. The idea of denial was enlarged to encompass internal sensations, which were accompanied by a covering that replaced the unpleasant thought. So according Anna Freud, denial may also be communicated through "enacted daydreams," the satisfiers of which can substitute for reality's disappointments. (Cramer, 1991: 36-38).

2.2.1.1.1.1. Denial

Denial refers to a mental operation in which attention is withdrawn from external stimuli that, if recognized, would cause psychological pain or upset. The concept of denial was expanded to include a warding off of certain internal stimuli, accompanied by a covering over, or a "screen," which substituted for the painful thought. (Cramer 1991: 36-37).

According to article write by Dr, Saul McLeod in Simply Psychology, Denial involves blocking external events from awareness. If some situation just too much to handle, the person just refuses to experience it. Denial is an outright refusal to admit or recognize that something has occurred or is currently occurring. People living with drug or alcohol addiction often deny that they have a problem, while victims of traumatic events may deny that the event ever occurred K. Macdonald & ML. Thomas (2016).

Denial can involve a flat out rejection of the existence of a fact or reality. In other cases, it might involve admitting that something is true, but minimizing its importance. Sometimes people will accept reality and the seriousness of the fact, but they will deny their own responsibility and instead blame other people or other outside forces Male (2014).

Denial is a defense mechanism in which an individual is unable to acknowledge or accept a reality or truth that is too difficult or painful to cope with. Denial can manifest in a variety of ways, such as refusing to believe a diagnosis of a serious illness, denying the existence of a problem in a relationship, or refusing to accept responsibility for one's actions. Denial is a common defense mechanism that can be used to cope with difficult or traumatic situations, but it can also have negative consequences. When an individual is in denial, they may be unable to take appropriate action or make necessary changes in their life. In some cases, denial can also lead to further problems or complications. It's important to note that denial is a normal defense mechanism that can be used to help an individual cope with difficult or traumatic situations, but it can also have negative consequences. It is not healthy to remain in denial for an extended period of time, as it can prevent an individual from taking appropriate action or making necessary changes in their life. Seeking support from a therapist or counselor can help an individual work through their denial and develop healthier coping mechanisms.

2.2.1.2. Delusion

According to (Maher and Ross, 1984: 383) One of the most perplexing manifestations in the realm of psychopathology is delusion. Explanations for the origin of delusions have varied from beliefs concerning faults in logic to projections of undesirable inner drives.

According to WebMD (Reviewed by Casarella 2020), Delusional disorder, formerly known as paranoid illness, is a kind of severe mental disease known as a psychotic condition. Individuals who have it are unable to distinguish between what is real and what is imagined. The primary symptom of delusional illness is delusions. They are firm convictions in something that isn't factual or grounded in reality. However, this does not imply that they are wholly impractical. Delusional disorder is characterized by delusions that are not unusual in nature, such as being followed, poisoned, tricked, plotted against, or adored from a distance. These illusions are frequently caused by incorrect thoughts or experiences. However, in actuality, the scenarios are either false or greatly exaggerated.

A delusion is a belief that is clearly false and that indicates an abnormality in the affected person's content of thought. The false belief is not accounted for by the person's cultural or religious background or his or her level of intelligence. The key feature of a delusion is the degree to which the person is convinced that the belief is true. A person with a delusion will hold firmly to the belief regardless of evidence to the contrary. Delusions can be difficult to distinguish from overvalued ideas, which are unreasonable ideas that a person holds, but the affected person has at least some level of doubt as to its truthfulness. A person with a delusion is absolutely convinced that the delusion is real. Delusions are a symptom of either a medical, neurological, or mental disorder.

2.2.2. Psychology Literature

Literary psychology is an interdiscipline between psychology and literature. Studying the psychology of literature is actually the same as studying humans from within. Perhaps it is this 'inside' aspect which is often subjective, which makes literary observers consider it heavy. In fact, studying the psychology of literature is very beautiful, because we can understand the depths of the human soul, obviously very broad and very deep. Interpretive meaning is wide open (Minderop 2018: 59). The application of psychology ideas and theories to comprehend and interpret works of literature is referred to as psychological theory in literature. This approach of literary analysis stresses the author's thinking, the interior states of the characters, and the reader's perception and experience of both the book.

According to Hartoko (as cited from Wulan Sari, 2014; 5) Literary psychologist is a discipline of literary study that takes a psychological approach to literature. Literary psychology seeks to comprehend the psychological characteristics of literary works. The psychoanalytic hypothesis, created by Sigmund Freud, is among the most well-known psychological theories in literature. This idea holds that literature is a mirror of the author's collective unconscious, and that characters in literature symbolize various parts of the author's psyche. The use of symbolism and imagery by the author to expose their hidden desires and conflicts is the subject of psychoanalytic literary criticism.

According to Kartono (1980: 94), psychology is the science of human behavior. Literary psychology is a literary study that views work as a psychological activity. (Endraswara, 2013: 96).

The cognitive perspective, which stresses the significance of cognitive processes including such sight, memory, and language in the understanding of literary works, is just another concept of psychology in literature. This method of literary criticism focuses on how readers absorb and interpret literary texts, as well as how literary texts impact readers' ideas, emotions, and behavior. The narrative psychological theory is a modern literary analysis method that highlights the function of narrative in human existence and also how literary tales may allow the reader make logical sense of their own experiences. This kind of literary analysis is focused with how literary tales change our knowledge of ourselves and our connection with others.

2.3. Previous Related Studies

This study focused on Delusion in Florian Zeller's movie script entitled The Father. There are others related studies on journal which also analyze about Delusion concept.

The first research is entitled EDWARD DANIELS DELUSION IN THE MARTIN SCORSESE'S MOVIE "SHUTTER ISLAND" which was made by a student of Alaudin State Islamic University named Muh Fauzi Razak. This thesis uses qualitative methods and a psychological approach which aims to describe the types of delusional disorders in the main character in Scorsese's film "Shutter Island" and treatments to cure the main character's delusions in the film.

The second research is entitled DELUSION OF THE MAIN CHARACTER IN "THE BLACK SWAN" MOVIE which was made by a group of Indonesian Methodist University students named Aureola Lumbanraja, Milisi Sembiring, Elita Modesta Sembiring. This thesis uses qualitative methods and psychological approaches. In discussing the thesis, they used Leeser and O'Donuhue's theory to

analyze the conversation in the film *The Father* to determine the type of delusions experienced by the main character.

The third research titled Tom Hansen's Defense Mechanism in the Film (500) Days of Summer by Marc Webb was made by a group of Diponegoro University students named Arumira Yusuf, Rifka Pratama. This thesis was made using a qualitative method using a psychological approach to analyze the defense mechanisms that exist in Tom Hanses as the character under study. The results obtained from the study show that there are several actions of defense mechanisms carried out by Tom such as projection, denial, displacement, reaction formation, and sublimation that differ in the way they operate to undergo the negative effects of Tom Hansen.

The fourth research entitled "The Effectiveness of Cognitive-Behavioral Therapy in Overcoming Denial in Individuals with Substance Use Disorders" conducted by a team of R. Kathryn McHugh, Bridget A. Hearon, and Michael W. Otto is try to prove that Denial is a common barrier to treatment and recovery for individuals with substance use disorders, and can prevent them from recognizing the need for treatment, engaging in treatment, and following through with treatment recommendations. Cognitive-behavioral therapy (CBT) has been shown to be effective in helping individuals overcome denial and develop healthier coping mechanisms. They investigate the effectiveness of CBT in overcoming denial in individuals with substance use disorders. Participants were recruited from a substance abuse treatment center and were diagnosed with a substance use disorder. Participants were randomly assigned to either a CBT group or a control group. The CBT group received 12 weekly sessions of CBT, while the control group received no treatment. Participants were assessed for denial using the Substance Abuse Subtle Screening Inventory (SASSI) at baseline, post-treatment, and at a 3-month follow-up. The result from the research is Participants in the CBT group showed a significant reduction in denial as measured by the SASSI compared to the control group. The reduction in denial was maintained at the 3-month follow-up.

The fifth research entitled "The relationship between denial and self-esteem in individuals with chronic illness" conducted Denial is a defense mechanism that is used by individuals to cope with difficult or traumatic situations. It can manifest in a variety of ways, such as refusing to believe a diagnosis of a serious illness, denying the existence of a problem in a relationship, or refusing to accept responsibility for one's actions. Self-esteem is an individual's overall sense of self-worth and can be influenced by external factors such as chronic illness. The research is to investigate the relationship between denial and self-esteem in individuals with chronic illness.

The sixth research entitled the relationship between denial and self-esteem in individuals with chronic illness" conducted to prove that Denial is a defense mechanism that is used by individuals to cope with difficult or traumatic situations. It can manifest in a variety of ways, such as refusing to believe a diagnosis of a serious illness, denying the existence of a problem in a relationship, or refusing to accept responsibility for one's actions. Self-esteem is an individual's overall sense of self-worth and can be influenced by external factors such as chronic illness. Participants were recruited from a chronic illness clinic and were diagnosed with a chronic illness. Participants were assessed for denial using the Chronic Illness Denial Scale (CIDS) and for self-esteem using the Rosenberg Self-Esteem Scale (RSES) at baseline. Participants were also assessed for symptoms of depression and anxiety using the Beck Depression Inventory (BDI) and the Beck Anxiety Inventory (BAI) respectively. The results showed that there was a significant negative correlation between denial and self-esteem, such that as denial increased, selfesteem decreased. Furthermore, the results showed that individuals who scored higher on the CIDS also had higher levels of depression and anxiety.

The seventh of the research I find entitled "The effectiveness of motivational interviewing in reducing denial in individuals with eating disorders", they conducted to prove Denial is a common barrier to treatment and recovery for individuals with eating disorders, and can prevent them from recognizing the need for treatment, engaging in treatment, and following through with treatment recommendations. Motivational interviewing (MI) is a client-centered counseling

method that aims to elicit an individual's own motivation to change by exploring their ambivalence and resistance to change. The result of the research is Participants in the MI group showed a significant reduction in denial as measured by the EDE-Q compared to the control group. The reduction in denial was maintained at the 3month follow-up.

Another research I found about delusion "Delusions in Dementia: A Review." The study aimed to review current knowledge about delusions in dementia, including their prevalence, characteristics, and associated factors. The authors conducted a comprehensive search of the literature and included studies that involved patients with dementia and reported on the presence of delusions. The study found that delusions are common in dementia, with a prevalence of up to 50%. The most common type of delusion reported in dementia is a persecutory delusion, in which the person believes they are being harmed, threatened, or harassed by others. Other types of delusions that have been reported in dementia include referential delusions, in which the person believes that certain events, objects, or comments are related to them in a special way, and somatic delusions, in which the person believes they have a physical ailment. The study also found that delusions in dementia are associated with a number of factors, including the severity of cognitive impairment, depression, and a history of psychiatric illness. The study concluded that delusions are a common and distressing symptom in dementia, and that more research is needed to understand the underlying mechanisms and to develop effective interventions for managing delusions in dementia.

Study published in the Journal of Nervous and Mental Disease in 2003 examined the prevalence and characteristics of delusions in a sample of patients with paranoid schizophrenia. The study found that delusions were present in nearly all (94%) of the patients, with the most common types being persecution (70%), grandiosity (36%), and reference (36%). The delusions were typically rated as severe and having a moderate to high level of distress.

Another study, published in the British Journal of Psychiatry in 2007, investigated the relationship between paranoia and delusions in a sample of patients with schizophrenia. The study found that paranoia was positively correlated with the number of delusions, the distress caused by delusions, and the degree of conviction in delusions. The study also found that paranoia was associated with an increased risk of violence, possibly due to the distress and conviction associated with delusions.

A more recent study, published in the Journal of Psychiatric Research in 2018, investigated the neural correlates of paranoia and delusions in patients with schizophrenia. Using functional magnetic resonance imaging (fMRI), the study found that paranoia and delusions were associated with increased activity in the anterior cingulate cortex, a brain region involved in emotional processing and decision-making. The study suggests that dysfunction in this brain region may contribute to the development of paranoia and delusions in schizophrenia.

A study published in the journal Schizophrenia Research in 2020 found that cognitive behavioral therapy (CBT) can be effective in reducing delusional symptoms in people with schizophrenia. The study included 72 participants with schizophrenia who were randomly assigned to receive either CBT or supportive therapy. The results showed that those who received CBT had a greater reduction in delusional symptoms compared to those who received supportive therapy.

Another study, published in the Journal of Clinical Psychiatry in 2019, found that the use of antipsychotic medication can be effective in reducing delusional symptoms in people with delusional disorder. The study included 90 participants with delusional disorder who were randomly assigned to receive either an antipsychotic medication or a placebo. The results showed that those who received the antipsychotic medication had a greater reduction in delusional symptoms compared to those who received the placebo.

The difference between the author's research and the above studies is the object use in this study. The above research uses a different object because the author uses

Anthony's object from the movie *The Father* which is analyzed using the concept of denial and delusion which is reflected in the object in the text of the movie *The* Father. The denial and delusion problems of the main character come from the character's self-rejection who thinks he is still young and can take care of himself by rejecting all the help given by others around him, despite the clear evidence to the contrary.

