

The Portrayal of Insomnia in the TV Series Insomnia and Its Comparison to Clinical Standards

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Abstract:

Insomnia is one of the most common sleep disorders and has been increasingly depicted in popular media. This study explores how the 2018 Russian TV series *Insomnia* portrays the symptoms, causes, and effects of the disorder, and compares this portrayal to clinical diagnostic criteria and findings from adolescent insomnia research. The research employs a visual analysis approach to the first three episodes of the series, focusing on scenes depicting insomnia-related behavior and its psychological and social consequences. Clinical evidence from peer-reviewed medical and psychological literature is used for comparison. The findings reveal that *Insomnia* accurately depicts several core features of chronic insomnia—such as cognitive impairment, emotional instability, and hallucinations—but dramatizes these features for narrative tension. The series simultaneously raises awareness about sleep health while preserving its fictional entertainment value.

Keywords: insomnia, sleep disorder, media representation, adolescence, trauma

1. Introduction

Sleep disorders, particularly insomnia, have become an increasingly significant public health concern in recent years. Empirical research indicates that 33–50% of adults experience symptoms of insomnia at some point, and 10% suffer from chronic insomnia that impairs daily functioning [1]. Among adolescents, the incidence of sleep disturbances has also increased, influenced by biological, psychological, and social factors [2]. Despite extensive medical research on insomnia, limited research has investigated

how insomnia is portrayed in popular media and how these representations might shape public understanding or behavior.

This study focuses on the portrayal of insomnia in the 2018 Russian TV series *Insomnia* and compares it with clinical definitions and findings from adolescent sleep studies. The research seeks to answer the following questions:

1. How does *Insomnia* define and depict the symptoms and etiological factors of insomnia?
2. To what extent do these portrayals align with cur-

rent clinical knowledge?

3. What social or psychological meanings does the series attribute to insomnia, particularly in relation to trauma?

The analysis utilizes qualitative content analysis, with selected episodes (1–3) serving as the primary data source, and comparing narrative and visual elements with well-established clinical frameworks. The purpose of this study is to evaluate whether the media portrayal of insomnia reinforces or distorts the public perception of the disorder and to highlight how accurate portrayals can enhance public awareness and foster empathy toward those affected.

2. Clinical Definition, Causes, and Harms of Insomnia

Insomnia is a widespread sleep disorder characterized by persistent difficulties in initiating sleep, maintaining sleep, and experiencing early-morning awakenings with an inability to return to sleep. It can manifest for a short period and can develop into a long-term disorder called chronic insomnia, exerting a substantial impact on daily functioning and overall well-being. Untreated insomnia can result in sleepiness, poor cognition, weakened immunity, and vulnerability to severe physical conditions such as cardiovascular disease. Lifestyle and environment can also cause insomnia, as well. Any factor that disrupts the sleep-wake cycle—including poor sleep hygiene, excessive consumption of caffeine or alcohol, irregular sleep schedules, and prolonged use of electronic devices in the evening—may contribute to insomnia. Medical conditions such as chronic trauma, respiratory disorders, and hormonal imbalances can even make sleeping worse.

Clinically, insomnia is defined as persistent difficulty in falling or staying asleep, often accompanied by fatigue, poor concentration, and mood disturbance [4]. It can be short-term or chronic, based on its duration and persistence. Causes include poor sleep habits, substance use (e.g., caffeine or alcohol), stress, trauma, and environmental factors [5]. Chronic insomnia can impair cognitive ability, weaken immunity, and increase vulnerability to psychiatric disorders (e.g., anxiety, depression) and chronic physical illnesses [6].

3. Symptoms and Diagnosis of Insomnia

Common symptoms of insomnia include difficulty getting to sleep, waking up frequently during the night, waking up

too early and not being able to get into sleep again, feeling tired to wake up, difficulty concentrating or experiencing memory deficits, persistent anxiety or mood disturbances, irritability, being easily overwhelmed, and mood lability or outbursts. With long-term duration, insomnia can trigger and exacerbate mental health conditions, creating a cyclical relationship in which stress and anxiety lead to poor sleep, and poor sleep further intensifies stress and anxiety.

Typical symptoms include prolonged sleep onset, frequent awakenings, early morning arousals, and daytime fatigue [7]. Long-term insomnia often leads to anxiety and depression, strengthening the self-reinforcing cycle between stress and sleeplessness. Diagnosis relies on patient history, behavioral observation, and validated sleep questionnaires. Physicians assess medical and psychological background, including medication use and the presence of comorbid disorders such as sleep apnea or anxiety [8].

4. Insomnia in Adolescence

Adolescence (ages 12–18) is a developmental stage marked by biological shifts in the sleep-wake cycle—for instance, a delayed circadian rhythm that impedes falling asleep before 11:00 PM, coupled with escalating social and academic pressures that prioritize productivity over sufficient sleep. According to the Centers for Disease Control and Prevention, fewer than one-quarter (22%) of U.S. high school students report getting the recommended 8–10 hours of sleep per night, and 17% qualify clinically for insomnia disorder [2]. Teen chronic insomnia is not a phase but is associated with a range of short- and long-term health consequences, including increased rates of depression and anxiety, poor grade performance (attributed to deficits in attention and memory), and increased risk for dangerous behaviors like driving while distracted or the abuse of alcohol or drugs.

Importantly, adolescents increasingly turn to media including television content targeted toward them, as a source of information about health [9]. Insomnia shown on these shows can shape help-seeking behaviors or frame insomnia as a “typical” adolescent feature that is easily dismissed. Given such prevailing and powerful presence of teenage insomnia, understanding how this condition is depicted in mainstream teen-oriented television shows is crucial to learning about how media can actually affect what teens do and believe about their own sleep well-being, a focal point of the Children, Media, and Health

course [1].

5. Treatments for Insomnia

The treatments for insomnia includes lifestyle changes, behavioral therapies, and pharmacological interventions that may be utilized to alleviate symptoms. Cognitive behavioral therapy for insomnia (CBT-I) is also a treatment. CBT-I is effective for both insomnia and chronic insomnia. CBT-I aims to restructure the thoughts, feelings, and behaviors that contribute to the development or persistence of insomnia (Mayo Clinic, n.d.). Pharmacological agents indicated for treating sleep initiation difficulties include eszopiclone, ramelteon, and triazolam. The medicines that are used to treat trouble staying asleep, waking too early or finding it hard to get back to sleep are Doxepin hydrochloride, Temazepam and Suvorexant [3]. The National Heart, Lung, and Blood Institute [4] also notes that lifestyle modifications and behavioral therapies are foundational to insomnia treatment, with medications serving as auxiliary options in specific cases.

If the patient does not treat insomnia over the long term, it can progress to chronic insomnia and exert profound adverse effects on health. These include an increased risk of getting mental illnesses including depression and anxiety, as well as heart disease and decreased immunity. Persistent sleep deprivation may also exacerbate preexisting health issues and shorten life expectancy[5].

Insomnia is a highly prevalent sleep disorder, and it requires increased attention from both individuals and public health initiatives. Recognizing the signs of insomnia is critical, given its high prevalence and substantial impact on quality of life. Early identification and treatment can reduce the negative outcomes and improve the quality of life for affected individuals. Raising awareness of this sleep problem and encouraging healthy sleep habits are both important steps to solving this public health concern [6].

6. The TV Series *Insomnia*

Insomnia targets adult and older teen audiences and centers on a detective who develops acute insomnia following the traumatic death of a colleague. Across Episodes 1–3, the series repeatedly portrays his sleeplessness, featuring long nights of pacing, frequent time-checking, and overt frustration. These scenes capture the subjective experience of insomnia and its associated psychological burden [7].

The protagonist's sleep deprivation causes hallucinations,

poor judgment, and strained relationships—effects that are consistent with the clinical manifestations of chronic insomnia [3]. His increasing confusion and emotional instability also mirror the “stress → poor sleep → heightened stress” cycle documented in medical literature [1]. Notably, the show links insomnia to unresolved trauma, which aligns with research identifying trauma as a key risk factor for chronic insomnia [2].

By framing insomnia as a treatable disorder, the series contributes positively to public understanding. It normalizes discussions about mental health and encourages help-seeking behavior, particularly among adolescents who may otherwise view sleep problems as trivial [9].

7. Conclusion

This paper compared the portrayal of insomnia in the Russian TV series *Insomnia* with clinical and adolescent insomnia research. The findings suggest that while the series dramatizes the effects of insomnia for narrative tension, its portrayal is largely consistent with clinical literature. The protagonist's symptoms—fatigue, cognitive impairment, and hallucinations—correspond to the clinical outcomes of chronic sleep deprivation. Moreover, the series successfully links insomnia to trauma and emotional instability, two key causal factors identified in psychological research on insomnia.

However, *Insomnia* simplifies the disorder by resolving it quickly through therapy, omitting the long-term, complex treatment trajectories that many patients encounter. Future studies could expand this analysis by comparing *Insomnia* to other television portrayals or by conducting audience research to assess how such media representations influence public perceptions of sleep health. Ultimately, accurate media depictions can play a pivotal role in reducing stigma and promoting awareness of insomnia as a serious and treatable health issue.

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