

“The issue of stigma against mental illness sometimes feels like the worst part about it.”

Tom



# Friends

They don't call me sad.

They don't call me bad.

They don't call me mad.

They don't call me.

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# Discrimination and Mental Health: Evidence for Effective Interventions?

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# Sources

- Review: 1615 international stigma published sources
- Detailed statements / testimonies from people with severe mental illness in South London (n=40)
- Statements about discrimination from INDIGO Study (722 people with a diagnosis of schizophrenia in 29 countries)

# What is Stigma?

- Problem of knowledge = Ignorance
- Problem of attitudes = Prejudice
- Problem of behaviour = Discrimination

# Key Features of Stigma Research

- Focus on:
  - psychological models
  - attitude surveys (what if...)
  - violence & media & schizophrenia
- Little attention to emotions
- Little information on actual discrimination
- Few reports from service users
- Few intervention studies

# 1. Discrimination at Home

- Adverse reactions by family eg lazy / weak
- Negative reactions to family members
- High rates of homelessness
- Neighbourhood reactions to residential care

“At 16, in 1996, I suffered a bad mental breakdown where I was hospitalised for 5 years. It was very traumatic. There I was, the eldest son, suffering a sudden deep depression, crying and unable to work, often threatened by my confused Dad as being “weak” .

*Robert*

## 2. Discrimination in Friendships, Intimate Relationships and Childcare

- Loss of husband/wife/partner
- Disappearance of friends
- Impaired long-term sexual relationships

“When I got sick for the first time I was seventeen and I was at high school. My behavior was awkward and my friends and classmates were making fun of me. I was feeling really bad about this. Then I was hospitalised. When they found out about this, they all abandoned me. I lost my friends.”

*Paul*

## 3. Discrimination at Work

- Lower rates of short-listing and hiring
- More often sacked
- Lower rates of pay
- Poorer promotion prospects
- Dilemma: conceal or disclose

“Unfortunately I have never suffered from such cruelty because, when applying for jobs, I never admitted to my own depression. If I had, I would never have stood a chance.

People are frightened about anything to do with mental illness, they just do not understand the malady.”

*Anna*



# 4. Discrimination in Social Life

- Less access to affordable insurance
- Limitation on jury service, property ownership, legal ability to sign contracts
- Not taken as a reliable witness
- Human rights may be fundamentally limited
- May be negative trends for attitudes

“ My illness, depression and stress, has been exacerbated by my debt problem. As a result I cannot get well enough to go back to work to earn money to pay the debts.”

*Sonia*

# 5. Discrimination in Healthcare

- Avoidance of seeking help for fear of stigma
- Pessimism of mental health care staff
- Worse physical care: 'diagnostic overshadowing'

# Physical Health Care

- people with mental health problems more likely to have: obesity, smoking, heart disease, high blood pressure, respiratory disease, diabetes and stroke
- differences not explained by social deprivation alone
- primary care receive less evidence-based care
- 'diagnostic overshadowing' ie reports of physical ill health are viewed as part of the mental health problem & so under-treated

# Healthcare and Discrimination

- strong evidence that people with mental illness have less access to primary health care
- receive inferior care for diabetes, heart attacks
- even though rates of cardio-vascular disease, obesity, diabetes are higher for people with mental illness
  
- Druss B G, Bradford D W, Rosenheck R A, Radford M J, Krumholz H M. Mental disorders and use of cardiovascular procedures after myocardial infarction. JAMA 2000; (283): 506-511

“Some of the worst experiences I have had have been in psychiatric hospitals ...often I have felt that my rights and dignity have been stripped away.

Being intimately searched again and again and constantly followed whilst under ‘close observation’ just leaves me feeling singled out and perceived as little more than a nuisance.

After I have self-harmed, just when I feel at my most vulnerable, I’ve heard many comments along the lines of “Oh she’s cut herself again, why doesn’t she just do it properly and kill herself.”

*Sandra*

“Last year I had an article on my mental health journey published...I was then contacted by approximately 39 Doctors, all of whom suffer from bipolar, and ALL of whom are too scared to reveal their diagnosis for fear of negative repercussions employment wise. It begs the question ‘Why is stigma so rife in the NHS???’ And, as someone who has been a victim of it myself, frankly it sickens me.”

## 6. Discrimination in the Media

- Newspapers: 40-70% of items: violence
- 85% of children's animations show characters with mental illness
- Few direct accounts from consumers
- Clear negative effects on popular views

# 7. Anticipated Discrimination

- Similar ideas: self-stigma, self-discrimination
- Avoidance of important actions: eg
  - applying for a job
  - seeking a close relationship
  - because of previous failure or
  - in anticipation of failure

“I have a friend who is very stigmatising when he talks about people with mental illness. For this reason I hide my problem. I know that if he knew about me he would break up our friendship.”

*Alexandros*

# International Study of Discrimination & Stigma Outcomes (INDIGO)

## Principal Investigators

- Graham Thornicroft, Institute of Psychiatry (IoP), KCL
- Diana Rose, Service User Research Enterprise, IoP
- Norman Sartorius, WPA Global Programme to Reduce Stigma because of Schizophrenia, Geneva

# Study Aims

- Develop and validate instrument to assess mental health service user's experiences of stigma and discrimination (DISC)
- Collect international data on experiences of discrimination
- Build an international profile of positive and negative discrimination



# Study Method

- Sites via WPA Global Programme to Fight Stigma and Discrimination because of Schizophrenia
- DISC-10 translated into site languages
- Interviews conducted with 25 people with a diagnosis of schizophrenia in each country (n=736)
- 5 interviews were translated and transcribed at each site for qualitative analysis



# Study Sites

Austria, Belgium, Brazil, Bulgaria, Canada, Cyprus, England, Finland, France, Germany, Greece, India, Italy, Lithuania, Malaysia, Netherlands, Norway, Poland, Portugal, Romania, Slovakia, Slovenia, Spain, Switzerland, Tajikistan, Turkey, United States.



# Discrimination and Stigma Scale (DISC)

Report by service users about experiences of discrimination:

- personal relationships
- housing
- education
- family life
- work
- transport and travel
- financial affairs
- community life
- health & social services
- privacy and safety
- children
- avoidance
- 736 people interviewed
- 28 countries

# Evidence of How to Reduce Discrimination

# What Can We Do: Locally

- supported work schemes
- psychological treatments: self-esteem & confidence
- give value to job applicants with mental health history
- routine provision of 'reasonable adjustments' at work
- inform employers of their legal obligations under law
- deliver & evaluate targeted interventions

# Social Contact Theory

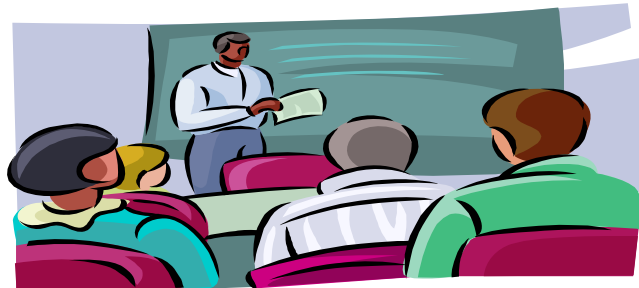
- Bogardus 1924
- Direct, personal contact with individual(s) of stigmatised group
- Need moderately stigma-disconfirming behaviour (too much =exception)
- Equal status (eg co-facilitator)

# Kent Awareness in Action: Aims



To develop

deliver



and evaluate ...



... intervention packages to reduce psychiatric stigma and discrimination

# Target Groups

- The Police

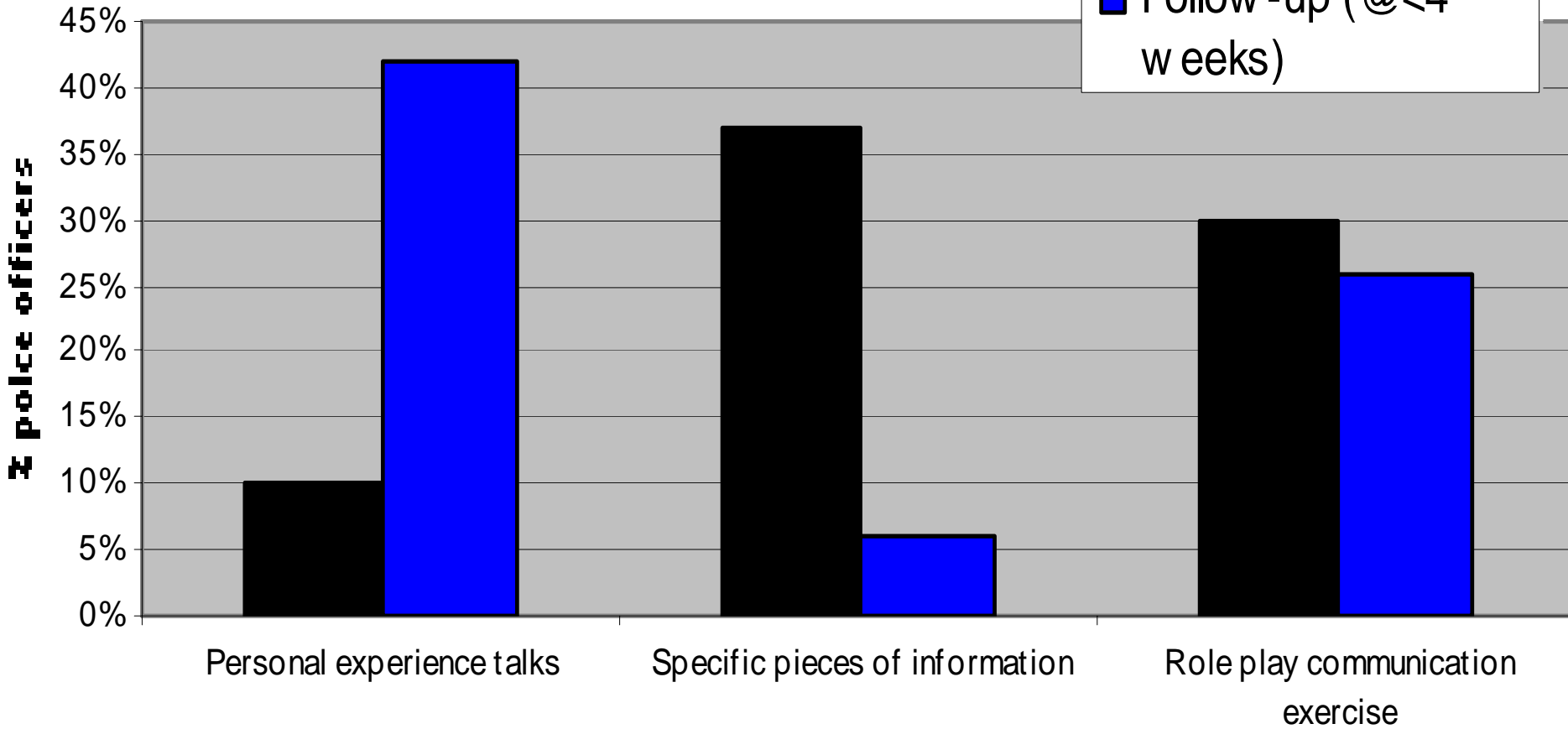
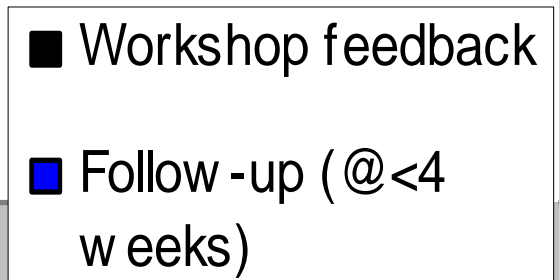


- Young People



# Feedback from Police

What will you most remember from the workshops?



Pinfold V, Huxley P, Thornicroft G, Farmer P & Toulmin H (2003) Reducing psychiatric stigma and discrimination: evaluating an educational intervention with police force in England. *Social Psychiatry and Psychiatric Epidemiology*, 38, 337-344

Pinfold V. Toulmin H. Thornicroft G. Huxley P. Farmer P. & Graham T. (2003) Reducing psychiatric stigma and discrimination: evaluation of educational interventions in UK secondary schools. *British Journal of Psychiatry*, 182, 342 - 346

Thornicroft G 2006 *Shunned: discrimination against people with mental illness* Oxford University Press Oxford

# What Can We Do: Nationally

- inform employers of their legal obligations
- establish service user speakers' bureaux
- provide and evaluate media watch response
- use anti-discrimination laws for mental illness

# National Campaigns

- Australia
- New Zealand
- Scotland
- Japan

# Australia: beyondblue

**Aim:** to increase public knowledge on depression

**Method:** states which funded and used beyondblue campaign compared with those that did not

**Results:** high-exposure states had greater change:

- in beliefs on counselling & medications
- about the benefits of help-seeking
- in recognition of depression

**Source:** Jorm AF et al Aust N Z J Psychiatry 2005; 39(4):248-254

# New Zealand: Like Minds Like Mine

- National media campaign vs. stigma & discrimination
- Increase in reported acceptance of people with mental illness in general
- But attitudes towards people with schizophrenia remained virtually unchanged
- Maori and Pacific people did not show the same improvement in attitudes

# What Can We Do Internationally?

- Establish an evidence base for effective interventions on:
  - Ignorance
  - Prejudice
  - Discrimination
- Transfer knowledge to those able to act
- Relentlessly advocate for parity of disability rights in international law

# Next?

- Scale development
  - Discrimination (DISC)
  - Anticipated discrimination (QUAD)
- Discrimination and ethnicity
- Disclosure / concealment intervention

# Conclusion

- Evidence strongest at present for local action via direct social contact
- Emerging evidence from Australia, New Zealand and Scotland that national level interventions may also be effective
- Persistence of these effects not yet know
- Relationships not well understood between:
  - knowledge                   (ignorance/misinformation)
  - attitudes                     (prejudice)
  - behaviour                   (discrimination)
- Use innovative interventions which are carefully evaluated