Charlie used to be one of Jacob's good friends but he hasn't seen him around much lately. Jacob went over to Charlie's house on the weekend for the first time in months.

Charlie used to be one of Jacob's good friends but he hasn't seen him around much lately. Jacob went over to Charlie's house on the weekend for the first time in months.

Charlie didn't wan decided to play co hardly spoke to Jacob's power in months.

Charlie didn't wan decided to play co hardly spoke to Jacob's power in months.

Why would they be whispering about your window like that?

Why would they be whispering about me. wind?

Why would they be whispering about me. wind?

Why would they be whispering about me. wind?

Why would they be whispering about you Charlie?

Are you sure it wan't just the wind?



# Changing how we see mental health

**Catherine Amey** knows from experience how stigma can be as much of a problem as mental health difficulty itself but there's hope, she says

Stress, anxiety, depression, mania and psychosis – I have experienced all these conditions but perhaps it's the stigma (negative ideas about what mental health difficulty means) that comes with them that has been the most painful. More accurately for me, it has been self-stigma that troubled me. I internalised negative societal views, such as people with mental health difficulties being weak and losers, and beat myself up with them.

I am far from alone in suffering because of stigma. A recent survey of 2,770 people in touch with Time to Change (see News this issue) reported that as many as 60% of people with mental health difficulties felt that stigma was as bad or worse than the illness itself. For 27% of

people the stigma was so severe that it even made them want to give up on life. Stigma can also be a barrier to seeking help for mental health difficulties. Stephen Fry recently said that "the biggest mental health problem in Britain today is the stigma that surrounds it."

### So what can we do about stigma?

There are a number of organisations and projects working on tackling the negative views and ideas that surround people with mental health difficulties. The Institute of Psychiatry, involved in evaluating the Time to Change campaign, is also running a five-year

research programme on mental health stigma and discrimination called SAPPHIRE (Stigma And discrimination Programme promote Healthcare access & social Inclusion: Research Evaluation). Included in this programme are studies developing ways measuring stigma and discrimination and exploring the impact of media interventions.

Most interestingly, SAPPHIRE is also developing a decision aid to help people with mental health difficulties decide whether or not to disclose their psychiatric history to a potential employer. This tool is not designed to persuade people one way or another but rather to take the stress out of decision making.

In interview on the an **SAPPHIRE** website, lead investigator, Professor Graham Thornicroft, is optimistic about the prospect of diminishing stigma and discrimination against people with mental illness: "It will take time, as experience in physical disability has shown where, for example, the widespread introduction of tapered curbs took 10-15 years of sustained campaigning by advocacy groups. I do think that major reductions in prejudice and discrimination can be made so long as we strengthen the evidence base, if we implement interventions based upon evidence, and if we have the political and financial will to do so."

## Fostering positive mental health attitudes

Another way of tackling the problem of stigma is to try to prevent stigmatising beliefs from developing in the first place. The Sussex Psychosis Research interest Group (SPRiG) is currently looking at developing an educational programme for primary schools to shape positive attitudes to mental health.

The first step in this programme was to try to understand children's perception of mental health and the emergence of stigmatising

### "the logical part of me felt strongly this stigma was not right"

beliefs. Thirty-three children aged 7 – 11 years, from two primary schools were divided into six groups and were shown four cartoons that depicted different experiences of mental health difficulties. The cartoons on psychosis (left) are shown is an example.

After showing these slides, the children discussed the scenarios with questions being asked such as: "What do you think is happening here? Would you want to be friends with this child?" What emerged was a varied understanding of mental difficulty among children. The children in general seemed uncomfortable when they couldn't work out what was going on at first and tried to draw on their prior knowledge of characters in TV and people with whom they had come into contact. It was when the children couldn't make sense of it that they started to use stigmatising language like "He's mental!" However, when the mental health condition was explained to the children, it seemed to help. "They should have told their friends," they said.

In a separate study, 42 children aged 7 – 8 years were divided randomly into two groups. Two specially written stories were read to the children, one about obsessive compulsive disorder, and another about psychosis. Both groups of children heard the same stories but in one group, all references to mental health were taken out. The stories were followed by a guided discussion, where positive mental

health references were raised in only one group. The group of children who took part in the discussion with mental health references ended up being more knowledgeable about mental health, less stigmatising and had more positive attitudes to mental health.

"This shows that an intervention to shape positive attitudes about mental health can work," said Kathy Greenwood. "The aim is that the programme will facilitate the development of positive, open, attitudes to mental illness before stigma develops, and involving primary school children, parents and teachers so that children grow up who are less stigmatising and self-stigmatising and are open to seeking help for mental ill health if they ever need to."

#### Solving self-stigma

I feel encouraged by the forwardthinking research taking place but it isn't going to help me and my bad case of self stigma. So what will? Perhaps surprisingly, given how ashamed I felt, I have been so open about my mental ill health that I have adopted almost a broadcasting style. I have written about my psychotic experience in both the general and medical press and have had a book published about recovering from psychosis. Although I felt the stigma very acutely, the logical part of me felt strongly that this stigma was not right. By forcing myself to discuss my experiences openly I am managing to convince myself that mental health difficulty is not shameful.

Find out more about SPRiG at: www.sussex.ac.uk/spriglab and SAPPHIRE at www.sapphire.iop.kcl.ac.uk Catherine Amey's book, Psychosis through My Eyes, is available from Amazon and other booksellers.

To read Catherine's previous article on stigma visit www.oneinfourmag.org