

## Media, Stigma and Mental Health Promotion

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### Abstract

*The societal stigma against mental illness is a formidable obstacle to the progress of mental health care. The media are the primary source of information about mental illness, and there is evidence that the stigma is attributable to negative portrayals in the media. Nevertheless, with a joint effort among mental health and media professionals, the media can help promote a positive, non-stigmatizing image of mental illness.*

*Keywords: mass media, social stigma, mental health*

### Introduction

Stigma and prejudice towards people with mental disorders are deeply ingrained in modern societies (Byrne, 1997). Although mental-health literacy has increased over the years, the situation has not improved (Angermeyer, Holzinger, & Matschinger, 2009). The mass media is one of the largest source of information about mental illness in the society (Klin & Lemish, 2008). Unfortunately, most depictions of mentally ill persons in the media, although often technically accurate, are negatively biased (Harris, 2004). On the other hand, given the powerful influence of the mass media, can we work with the media in anti-stigma campaigns? The latter part of this article discusses how the media can provide non-stigmatizing portrayals of people with mental illnesses.

### The negative impact of the media

Studies have consistently documented a tendency for both print and broadcast media to reinforce negative stereotypes of people with mental illnesses (Corrigan et al., 2005;

Hazelton, 1997). This may erode efforts to build community support aimed at reducing discrimination toward and isolation of mentally ill patients. These negative depictions may also result in a tendency to inappropriately perceive those with mental illness as dangerous (Corrigan & Shapiro, 2010), lower endorsement of community-care options (Corrigan, 2004), a preference not to live near people with mental illnesses (Stuart, 2006), and employer reluctance to hire people with past mental-health problems (Hocking, 2003). On the individual level, the amount of stigma experienced by patients is so powerful that some report it to be more debilitating than the illnesses themselves (Corrigan, 2004). More than 40% of mental-health service consumers reported being 'often' or 'very often' hurt or offended by messages in the mass media (Wahl, 1999). Essentially, the way people perceive and treat mental health clients can be worse than the psychiatric symptoms themselves.

### Stigma in broadcast media

Different forms of media have varying degrees of influence on the public. Television,

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## **Media, Stigma and Mental Health Promotion**

radio, newspaper, movies, advertisements, novels and, more recently, on-line information can all affect peoples' attitudes but the impact of each medium has shifted over time, with certain types being more influential than others. Amongst these, television has perhaps the largest and most diverse audience. In a review of stigma literature, Wahl (1999) suggested that television is a primary contributor to mental health stigma.

A study of mental-illness depictions in prime-time dramas revealed that the mentally ill are often depicted as simple, lacking in comprehension, unpredictable, anti-social, lost and unproductive (Wilson, Nairn, Coverdale, & Panapa, 1999). Even worse, about 70% of mentally ill characters in prime-time television programmes are physically violent, almost ten times more than other television characters. In the study by Granello and Pauly (2000), not only did the authors show that television portrays unfavourable images of mental illness, they also found a significant and positive correlation between hours of television viewing and intolerance toward people with mental illness.

### **Stigma in the newspaper**

Stuart (2006) called newspapers a powerful media contributor to stigma. After screening more than 2,000 newspaper articles mentioning mental illness, he found that 'dangerousness' was the most common theme. Despite the media's interest in mental illness, their potential in promoting an accurate picture of mental-health problems and decreasing stigmatization is often wasted and even counter-productive. The underlying reason is quite obvious: the media's primary aim is to attract readers and increase viewing figures. Only 'horror stories' make compelling news. The dictum "If it bleeds, it leads" still determines what is considered newsworthy. Moreover, stories are often biased toward the adverse and appeal to readers' emotions. Credibility and accuracy sometimes does not suffice.

It is also worth noting that members of the media are part of the general public too, and thus are just as susceptible to misunderstandings and prejudice about mental illness as are others. This may help explain why derogatory labels related to mental illness still appear in the media, while similar labels are widely regarded as unacceptable in reports on race or physical disabilities (Linehan, 1996).

### **Working with the media in mental health promotion**

Still, the media do have the power to bring about positive change. One example was the coverage of the 2004 Asian tsunami, which brought attention to the psychological impact of disasters and the lack of mental-health services in the affected areas. This eventually persuaded policy makers to fund more mental-health services and induced insurers to provide equal coverage for mental and physical illnesses (van Griensven et al., 2006).

The media can also be immensely powerful in anti-stigma campaigns. Stigmatization towards mental illness can come from various types of media, likewise, peoples' opinion about the mentally ill can be changed through the media. The key is to appeal to the needs of media producers by creating human-interest stories with powerful images and headlines. The entertainment-education model has been proposed as an anti-stigma media strategy (Ritterfeld & Jin, 2006). This involves designing and implementing media messages in order to increase knowledge about an educational issue, create favourable attitudes toward socially desirable targets, shift social norms and change behaviours. It is possible for professionals to work with the media to demystify mental illness by providing the public with factual information embedded in an entertainment experience.

Physicians who are writers themselves can use the entertainment-education model (Ritterfeld & Jin, 2006), a strategy that has

become more popular in recent years. Many psychiatrists started to publish books or have their own newspaper column. Psychiatrists have an important role to play in educating the public about the current state of the psychiatric field. Unlike most journalists, who have to depend on second-hand information or expert opinions, physician-writers can convey their advice and opinions directly to readers.

For media campaigns to be successful, they must be pertinent and ongoing. With advances in web-based media, the cost of ongoing media work can be significantly reduced. Web-based media campaigns can act as a platform for different organizations to communicate their anti-stigma activities. The success of the UK “Time to Change” campaign is one of the best illustrations showing how web-based media can enhance communication between the government, public health care providers, non-government organizations and the general public (Baker, 2008). We should also target different sections of the public, i.e., not just mental health professionals or the mentally ill. Young people are particularly important here for two reasons. They are widely exposed to on-line content, and adolescence is when most values and opinions are formed.

### Changing the course

Another secret of anti-stigmatization towards mental illness is to make use of the stigma itself. Stereotypes of the mentally ill are often deeply rooted in people’s mind and unlikely to be eradicated. Therefore, the goal is to enrich rather than to challenge. Highlighting successful outcomes within stereotypes can be highly powerful. Thus, although a piece of news about a schizophrenic patient committing a violent crime may be appealing on the surface, a story describing a person’s successful battle with depression would be equally provocative, albeit for a different reason.

### A missing piece in the puzzle

Mental health professionals are often asked to comment on news related to mental illness. Nevertheless, a more relevant and empowering approach would be to include the voices of those who experience the stigma first hand – mental-health service consumers. Henson & Chapman (2009) highlighted the importance of involving those with histories of mental illness in news coverage. Although it can be argued that not everyone with a mental illness has had the same experience, using more first-hand accounts is a step in the right direction. This can also eventually produce a more balanced proportion of positive stories related to mental illness.

### Conclusion

This article has briefly reviewed a few means of reducing mental illness stigmatization in the media through better collaboration, making use of the entertainment-education model and increasing the mental-health consumers’ involvement. In closing, we must consider the warning of Hinshaw and Stier (2008) that efforts in anti-stigma work need to be multifaceted, lest change be cursory and short-lived. Stigma in mental illness is still everywhere, with pervasively negative impacts on individuals, families and communities. The media can play a pivotal role in our fight against stigma.

### 摘要

#### 精神健康推廣 — 傳媒與精神病標籤

社會上對精神病的標籤仍是精神健康服務發展的巨大障礙。傳播媒體是公眾對精神健康資訊的主要來源。有證據顯示，精神病的歧視與傳媒負面的描述有甚大關係。然而，只要與傳媒合作，它也可以成為推廣正面精神健康的有效工具。

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