



“They call him a mental case”: How different are family, service user and practitioner reports of witnessed or experienced mental health stigma and discrimination.

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INTRODUCTION

Efforts made to tackle discrimination through anti-stigma campaigns such as Time to Change, will be aided by a deeper understanding of how experiences of stigma differ across discrimination sources and types of behaviours or attitudes. We explore examples of discrimination from the perspective of three groups: people with mental health problems, their family members and mental health practitioners.

We hypothesised that:

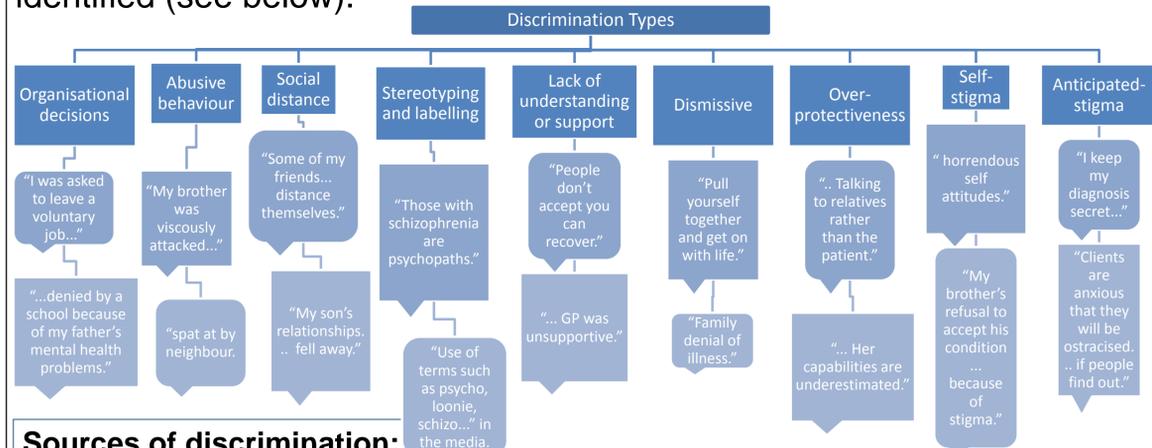
1. different types of discrimination will be related to different sources of discrimination.
2. types of discrimination reported as experienced by people with mental health problems will differ to those reported as experienced by family members and mental health practitioners.

METHOD

Data was collected from The Schizophrenia Commission (2012) on-line survey [1] funded by Rethink Mental Illness. Respondents were asked whether they had witnessed or experienced mental health stigma or discrimination and if so, to report an example.

Coding Scheme

Drawing on the coding framework in a previous qualitative study from the Viewpoint Survey [2], 9 types and 9 sources of discrimination were identified (see below).



Sources of discrimination:

- Family
- Friends
- Neighbours
- Employers/colleagues
- the media
- public services
- health and social care professionals
- strangers/public

RESULTS

Table 1: Percentage of participants that have witnessed or experienced mental health stigma or discrimination

	Total responding	Experienced/witnessed discrimination	%
People with mental health problems	398	300	75.4%
Mental health Practitioners	608	474	78.0%
Family members	568	396	69.7%
People in more than one of these groups	446	374	83.9%
Total	2020	1544	76.4%

In total, 1810 examples of discrimination were reported.

Hypothesis 1: 1,193 examples specified a source. Figure 1 shows the relationship between discrimination types and discrimination sources. The data shows different discrimination types are associated with particular sources: e.g. abusive behaviours are more common from neighbours and strangers; dismissiveness more common from family. A Chi-square test revealed that the percentage of discrimination types significantly differed by source, $\chi^2(81) = 1635.12, p < 0.001$.

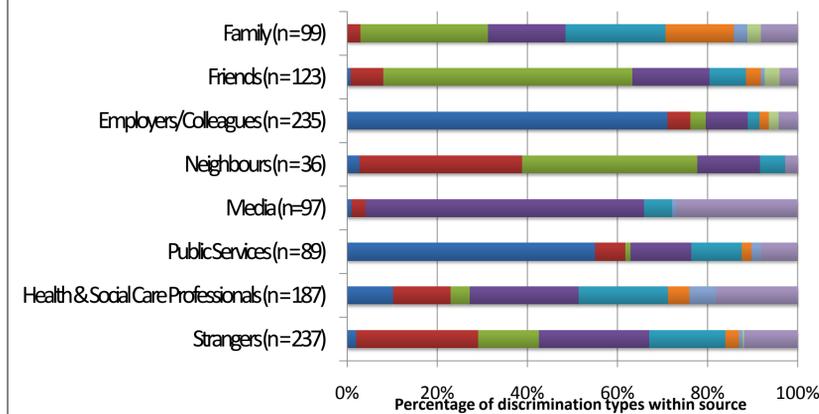


Figure 1: The relationship between types of discrimination and their sources

Hypothesis 2: 398 examples specified that discrimination was experienced first-hand rather than witnessed. Data suggests that particular groups are more likely to experience certain types of discrimination: e.g. family members were most likely to experience social distancing whereas practitioners were most likely to experience stereotyping and least likely to experience abuse. A Chi-square test revealed that the percentage of discrimination types significantly differed by respondent group, $\chi^2(27) = 50.37, p < 0.005$.

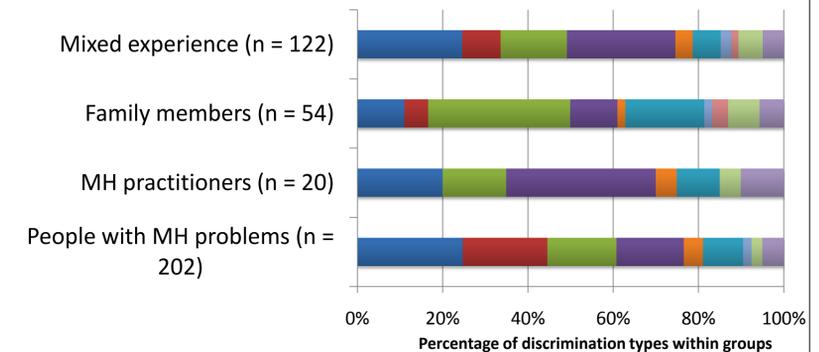
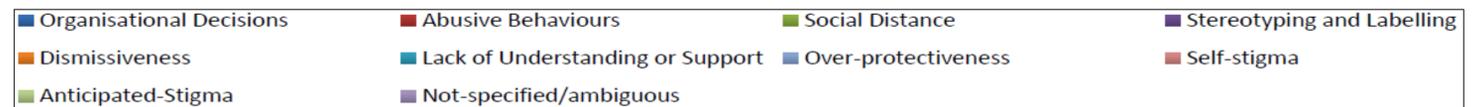


Figure 2: Differences in the types of discrimination reported as experienced by each respondent group



CONCLUSIONS

Analyses supported our hypotheses that types of discrimination experienced differs across group and source. Data shows that discrimination is experienced not only by people with mental health problems but also by those close to them, and provides initial indications about how these experiences differ. Our findings also highlight that discrimination experiences may encompass a wide range of behaviours, and that these behaviours differ depending on the relationship of the discriminator to the individual. Further research is needed to explore these differences in more depth and to inform targeted anti-stigma initiatives.

[1] The Schizophrenia Commission (2012). The abandoned illness: a report from the Schizophrenia Commission. London: Rethink Mental Illness.

[2] Henderson, C., et al (2012). England's Time to Change Anti-stigma Campaign: One-Year Outcomes of Service User-Rated Experiences of Discrimination. Psychiatric Services 63.5