

Newsletter Summer 2014 - Mental Health Stigma Network

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Picture: Stigma Network Meeting in London September '13
(Many thanks to Time to Change for providing the photo)

Summer Newsletter'14

Welcome to our second Newsletter!

Dear Newsletter Subscribers,

Würzburg, June '14

Thanks to your interest and the steady flow of material and news contributions, the newsletter for the anti-stigma network has survived its launch and is now on its stable orbit with this second edition. I want to welcome in particular the new subscribers. We are currently reaching researchers and facilitators from twenty countries and five continents with this newsletter!

I want to thank all authors who have contributed material for this newsletter! If readers

have any questions about the individual articles, they are advised to please contact the authors or respective organizations directly.

There is a California theme in this newsletter: The featured organization of this newsletter is the California Mental Health Service Authority (CalMHSA). Furthermore we want to draw your attention to the next **"Together Against Stigma"-Conference** that will take place **February 17-20 in San Francisco, California**. You can read more about the conference in the CalMHSA article. Also, I will send around a separate flyer for this conference.

I hope you will all enjoy the newsletter!

Bettina Friedrich

Bettina.Friedrich@gmail.com

Updates from researchers and campaign facilitators from around the world:

USA

Patrick Michaels for Professor Patrick Corrigan

Illinois Institute of Technology

pjmichaels@gmail.com

Coming Out Proud Program (COPp)

Self-stigma, the internalization of commonly held negative attitudes towards individuals with mental illness, often leads to a loss of self-esteem and self-efficacy for people with mental illness. Innovative programs have emerged to challenge self-stigma using psychoeducation and/or cognitive reframing skills meant to challenge stigmatizing self-statements. Our group has developed an alternative approach for dealing with self-stigma: the Coming Out Proud program (COPp). Our program is grounded in research that

empowerment frequently accompanies mental health condition disclosure, which in turn enhances self-esteem and confidence in life goal pursuit. The COPp is a 6-hour group-based program designed to aid in the facilitation of disclosure of certain aspects of lived experience with the objective of reducing the self-stigma associated with mental illness. Program content was developed through collaboration between people with lived experience and mental illness stigma researchers. The COPp is delivered by a pair of trained facilitators with lived experience with mental illness. The program comprises three interactive lessons, each lasting two-hours. Lesson 1 addresses the pros and cons of disclosing by focusing on identity and privacy. Lesson 2 describes disclosure methods as well as selection and response from others. Lesson 3 focuses on how to tell a meaningful story and the usefulness of peer support. The COPp uses a comprehensive, user-friendly manual; step-by-step workbook and corresponding worksheets; fidelity measure; and leader training program. We are currently evaluating COPp with studies being conducted in the United States, Australia, and China. A pilot randomized controlled trial, conducted in Europe, demonstrated significant benefits to program participants relative to wait-list controls (Rüsch et al., 2014). For more information, visit www.copprogram.org to obtain free resources, network with COPp facilitators, learn more about research opportunities, and to request training.

References

Rüsch, N., Abbruzzese, E., Hagedorn, E., Hartenhauer, D., Kaufmann, I., Curschellas, S. V., Zuaboni, G., Bridler, R., Olschewski, M., Kawohl, W., Rössler, W., Kleim, B., & Corrigan, P. W. (2014). Efficacy of Coming Out Proud to reduce stigma's impact among people with mental illness: pilot randomized controlled trial. *British Journal of Psychiatry*. [advance online publication] doi: 10.1192/bjp.bp.113.135772

Switzerland/ Spain

Professor Norman Sartorius

Association of the Improvement of Mental Health Programmes (AMH)

<http://aim-mental-health.org>

During the WPA World Congress of Psychiatry in Madrid there will be several symposia dealing with matters related to stigma.

Manifestations of stigma and discrimination in mental health. (Norman Sartorius and Graham Thornicroft, Chairs)

- Users' experiences of psychiatric in-patient treatment in low and middle income countries, N. Bezborodovs, F. Lassman, G. Thornicroft, N. Sartorius
- Stigma, discrimination and twelve months of electronically monitored medication adherence in schizophrenia, C. Brain
- Images of psychiatry and psychiatrists, H. Stuart, N. Sartorius, T. Liinamaa, and the Images Study Group
- Global pattern of discrimination reported by people with major depressive disorder, A. Lasalvia, N. Sartorius, D. Rose, G. Thornicroft, and ASPEN/INDIGO study group.

Best Practices in Stigma Reduction – Case Examples (N. Sartorius and M. Pietrus, Chairs)

- Reducing stigma in health care providers: key program ingredients, S. Patten
- Determining the effectiveness of workplace programs aimed at reducing the stigma of mental illness – B. Kirsch
- Media representations of mental illness: predictors of positive portrayals, R. Whitley
- Best practices in anti-stigma programming for youth, H. Stuart

Improving the Image of Psychiatry (H. Stuart and N. Sartorius, Chairs)

- Images of psychiatry and psychiatrists in Russian medical educators, M. Parpara
- What do other trainees think of psychiatrists? D. Sebbane
- What can trainees do? The European Federation of Psychiatric Trainees example, M. Casanova Dias
- Stigma in psychiatry in Bangladesh: how to mitigate with limited resources, H. Uddin Ahmed.

Unchaining the chained people with mental illness in the community and institutions, H. Diatri

Australia

Robyn Thompson

SANE - Australia

www.sane.org

Say no to stigma!

SANE Australia's pioneering **StigmaWatch** program, which monitors the Australian media's representation of mental illness and suicide, is celebrating 15 years of operation this year.

The award-winning initiative was established in 1999 as a community action protest program, acting on the concerns of people who were distressed and offended by news stories and other media representations which stigmatised people with mental illness or inadvertently promoted self-harm or suicide.

Anyone offended by such reports could forward a complaint to StigmaWatch for review. 'Offenders' were contacted by letter, outlining the concern and encouraging them to be more accurate, balanced and sensitive in future reports.

In recent years there have been encouraging improvements in media reporting and portrayal of mental illness in Australia.

A review of mental illness and suicide reporting in the media (*Pirkis J et al 2008. The Media Monitoring Project: Changes in Media Reporting of Suicide and Mental Health and Illness in Australia: 2006-07. Commonwealth of Australia*) found that in 2006/7, the Australian media had almost doubled its coverage of suicide compared with 2001/2 and responsible reports increased from 57% to 75%. In addition, reference to method – seen as a possible trigger for those vulnerable – had reduced substantially.

Over the years StigmaWatch, which is funded by the Australian Government as part of the Mindframe National Media Initiative, has adapted to the changing media landscape and has recognised the ongoing improvement in media reporting, with the introduction of 'Good News' reports.

Mental health policies in Australia have acknowledged the need to tackle stigma, but the challenge remains to translate these policies into effective action. In its recent report *A Life without Stigma*, SANE Australia called for a national, long-term strategy and campaign to reduce the stigma and discrimination associated with mental illness, with a particular focus on psychotic illness.

With close to 300 reports in the last 12 months, StigmaWatch continues to serve an important function on several levels, including empowering people affected by mental illness or suicide.

For more information go to www.sane.org

Ireland

Sorcha Lowry

See Change Ireland

Over 1 million conversations started by Green Ribbon campaign

1,656,654 conversations started on mental health during Green Ribbon 2014. In May 2014, See Change rolled out the second annual Green Ribbon campaign to get Ireland talking about mental health. 300,000 green ribbons were distributed nationwide and free of charge in conjunction with 505 grassroots events and initiatives. This social movement to encourage a national conversation about mental health was led by 90 See Change partner organisations, various workplaces and community groups, hundreds of supporters and volunteers and an unprecedented 50 campaign ambassadors with real-life experience of mental health problems ready to share their own stories to help others and end stigma.

Look 1 simple ribbon achieved:

- 1,201,783 was the potential reach of national media pieces alone (of a total of 149 media pieces including 75 ambassador stories)
- 116,484 conversations started by volunteers and supporters (who organised 282 community events and initiatives)
- 112,951 Green Ribbon promo materials distributed nationwide
- 103,484 conversations started by See Change partner organisations (who organised 116 Green Ribbon events and initiatives)
- 58,083 online conversations
- 31,380 conversations started in workplaces (where 107 Green Ribbon events and initiatives took place)
- 984 gifted outdoor advertising spots by our distribution partners Irish Rail, Citizens Information as well as Dublin Bus and Frangos Dundrum.
- 505 Green Ribbon events and initiatives in May 2014

How did we measure this? 1 interaction, attendee or green ribbon = 1 conversation

Sweden

Rickard Bracken

Hjärnkoll

www.hjarnkoll.se

The Swedish Campaign Hjärnkoll aiming at integrating a structure for ongoing anti-stigma work in Sweden.

The Swedish anti-stigma campaign Hjärnkoll started in 2009 and makes its final year in 2014. The campaign has been evaluated annually since 2009 by the Centre for Evidence-based Psychosocial Interventions (CEPI). The results highlight the many possibilities and accomplishments of improving public attitudes and behaviors towards people with mental health conditions. Our focus is now to integrate the work done by Hjärnkoll in a solid support structure at a national and regional level. The support structure will enable ongoing anti-stigma activities organized by the 300 so-called ambassadors who experience mental health conditions. The National Collaboration for Mental Health (NSPH), which is a network of 13 organizations within the Swedish patient-, user and relative movement, is taking over the responsibility for Hjärnkoll. NSPH will in collaboration with municipalities, county councils, businesses and the network of ambassadors organize and run the work done after 2014. For more information please contact Rickard.bracken@mfd.se.

Mental Health First Aid for elder people

Older people's mental health is a neglected area despite the fact that mental illness is very common among elder. Part of the reason is that many caregivers are involved, since many have both physical disease and mental illness. But the root cause is, after all, the perception of aging and mental illness. Most carry an image of the elderly as an old woman, kind, happy - a real grandma. A grandma does not have an alcohol problem or psychoses. The image of a person with mental illness, however, the image of a younger person, often a man in early middle age, where it appears that he is worn. With this in mind - to reduce the stigma surrounding mental illness and age, we are working with the Mental Health First AID addressed to staff encountered elder persons in their work. We have now trained the first instructors in the world targeting the elderly. For more information Susanne.Rolfnersuvanto@skl.se.

Professor Lars Hansson

Center for Evidence-based Psychosocial Interventions, Lund University

lars.hansson@med.lu.se

Perceived discrimination is decreasing in Swedish anti-stigma campaign regions

As part of the evaluation of the ongoing Swedish anti stigma campaign “Hjärnkoll” several regional studies of perceived and anticipated discrimination has been performed. A two year follow-up of one of these is now finished. The DISC-12 was used for interview series in 2011 and 2013 and results from the follow-up study showed significant lower levels of perceived discrimination in several life domains, changes were in the range of 13-18%. Mean number of life domains with perceived discrimination diminished from 6 to 5 life domains and anticipated discrimination diminished regarding the area of education. We will continue to do follow-ups during the upcoming years both in this region and in other Swedish regions. For more information contact: lars.hansson@med.lu.se

England

Hayley Richardson

Time to Change

time-to-change.org.uk

- The Global Alliance website is now available for members (link: <http://www.time-to-change.org.uk/gaas/>). Everyone who attended the first Global Alliance meeting in London last year will remember that we agreed to make the presentations and written notes available to all delegates. This brand new webpage will house this information as well as a brief summary about the Alliance, a graphic showing the key anti-stigma campaigns involved in the group, and a membership page with web links to all of our campaigns. Also, watch this space, as we have plans to add some finishing touches to the area including a newsletter section and other useful links.

- A new study published today (Wednesday 11 June) in The Lancet Psychiatry journal

suggests that Time to Change is having a positive effect on public attitudes and that stigma and discrimination in relation to mental health might be more prevalent without the campaign. The research, led by a team at the Institute of Psychiatry at King's College London, investigates 10 year trends in public attitudes in England before and during Time to Change campaign activity, which started in 2009. The longitudinal data from 2003 to 2013 shows a "step change" increase in positive attitudes in some key areas after the campaign launched. Although attitudes may have been at risk of deterioration during times of economic hardship, they continued to improve during the recession in England and the authors suggest this is likely to be due to the Time to Change campaign.

Read more about the research here (link: <http://www.time-to-change.org.uk/news/attitudes-towards-mental-health-improving-despite-recession-0>)

- We have just launched two new films to target male audiences and children and young people. The men's film was launched as part of Men's Health Week in June and features a pack of dogs known as the 'Wolfpack' to encourage men to be there for their mates. (link: www.time-to-change.org.uk/wolfpack). Already, the film has received nearly 5000 views. To support the film, we have also created a leaflet and new top tip cards specifically for men (see attached). The film aimed at Children and Young people depicts a group of friends and shows how daily life can be impacted upon by mental health, and aims to encourage young people to make time for friends whatever they're going through. To launch this film we recruited a group of influential You Tube personalities who have thousands of fans and over 35 million views between them. These prominent trenders were asked to promote the video on their social networks including YouTube, Tumblr, Facebook and Twitter. So far the film has received around 45,000 views and you can watch it here (link: <http://www.time-to-change.org.uk/Make-Time>).

- In June the 200th organisation signed the Time to Change pledge, which demonstrates the growing commitment to tackling mental health stigma and discrimination in the workplace. Pledges have come from organisations across the country from a wide range of sectors, including corporates, government departments, local authorities, universities and student unions. The Home Office (an English Government department) were our 200th pledger. Read more about the pledge here (link: <http://www.time-to-change.org.uk/news/200-organisations-commit-tackling-mental-health-discrimination>). Also

in our work with employers, we have established a peer network group, which brings together organisations who have signed the pledge, had a Health Check and those that are new to the campaign, to share good practice and learning. Already we've seen 103 organisations join the network and just over 200 people from 135 organisations attending five regional meetings. Visit the website to find out more about our work with organisations (link: <http://www.time-to-change.org.uk/take-action/work-place>).

Denmark

Anja Kare Vedelsby, Johanne Bratbo

One of Us ("En Af Os")

<http://www.en-af-os.dk/english.aspx>

As mentioned in the previous newsletter ONE OF US has been cooperating with the Danish national public service tv station around a comprehensive strategy titled 'Invisibly Ill' consisting of tv program series, radio programs, online news stories and several features on news and entertainment shows.

The objectives of the tv station are as follows:

- To combat prejudice related to mental illness
- To humanise people who have had personal experience with mental illness
- To investigate society's treatment of people with mental illness
- To make clear that a psychiatric diagnosis isn't necessarily for life and that a mental illness only is part of someone's personality. You are not equal to your diagnosis.

'Invisibly Ill' was launched on March 31st and continued throughout most of April and it was a great success. 2.8 million people watched at least one of the programs which is half of Denmark's population. The response has been extremely positive and supportive and all the tv programs were rated between 4.1 and 4.5 on a scale from 1 to 5 which is an exceptionally high ranking. Also the ONE OF US campaign has received a great deal of attention related to it. The ONE OF US facebook site has got 10.000 new likers in April alone which results in a total of a little more than 27.000 likers.

In a ONE OF US panel survey with 1235 respondents who all have or have had mental illness 93 % stated that their general impression of 'Invisibly Ill' was 'very positive' or

'positive'. When asked to describe it using words from a list the majority ticked off 'informative', 'interesting' and 'thought provoking'. 88 % of the respondents thought that the tv programs gave good insight into living with a mental illness and 62 % stated that the programs had made them want to be more open about their own mental illness.

Featured organization:

California Mental Health Services Authority - CalMHSA

Stephanie Welch

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Mental illness is nothing to be ashamed of, but stigma and bias shame us all." These words spoken by former US President Bill Clinton have guided us in our efforts to reduce the stigma of mental illness here in California. **The California Mental Health Services**

Authority (CalMHSA) is currently implementing a comprehensive statewide prevention and mental health promotion initiative that places stigma and discrimination reduction at its center, with over twenty-five different programs providing interventions at the institutional, societal, and individual levels. Collectively these efforts also aim to prevent suicide and improve student mental health with the majority of strategies focused on reaching youth and young adults.

Stakeholders selected specific strategies from the research-based *California Strategic Plan on Reducing Stigma and Discrimination*. Strategies range from social marketing to increase public knowledge and impact behavior change, to capacity building at the local level, including training that emphasizes participation by consumers of mental health services. All strategies represent a culturally responsive approach to California's extremely diverse racial, ethnic, and cultural populations. Collectively strategies intend to foster permanent change in the public perception of mental illness and in the individual experience of stigma. All efforts are being rigorously evaluated by the RAND Corporation and emerging results can be tracked at <http://www.rand.org/health/projects/calmhhsa.html>.

During the implementation phase it became clear to us that there was a grassroots movement waiting for a statewide rallying cry to latch onto, so we branded our efforts and in May 2013 we launched *California's Mental Health Movement – Each Mind Matters (EMM)*. The “Lime Green” movement, the signature color of Each Mind Matters, is paving new roads to inclusion and equity for all persons diagnosed with a mental illness. Over 100,000 lime ribbons have been distributed throughout California and more than 65,000 visitors have visited www.eachmindmatters.org.

On May 13, 2014 mental health advocates, partners and county governments came together for Mental Health Matters Day held at California's State Capitol. Policy leaders such as Senate Pro Temp Darrell Steinberg, and Congresswoman Doris Matsui spoke on the impact of stigma and the critical need to eradicate it while California was being blanketed in lime green. Hundreds of students, representing a new generation of change agents, were welcomed as speakers and advocates with fresh perspectives and talents in reducing stigma. While more than 1,500 attendees participated at the State Capitol, local anti-stigma events to mark Mental Health Matters Day were occurring in communities across the California.

As Each Mind Matters passes its one-year anniversary, CalMHSA in partnership with the California Institute on Mental Health (CiMH), and the World Psychiatric Association's Scientific Section on Stigma and Mental Health, are setting their sights on the next big event: **The 7th Annual International Together Against Stigma Conference on February 17-20, 2015 in San Francisco, California**. Much like those before it, this conference will bring together researchers, mental health professionals, policy makers, consumers and other mental health stakeholders from across the world. The focus of this year's conference: *Each Mind Matters: Empowering Community Mental Health Through Research, Practice, Policy and Advocacy*. We are thrilled at this opportunity to learn and share our learning with leaders across the global who are doing such critical work to improve the lives of so many that experience mental health challenges.

Please mark your calendars and see the attached SAVE the DATE Flyer [**Note from the Editor: the flyer will be sent in a separate email**]. As we move forward in the planning process of this conference, CalMHSA and the Each Mind Matters Team are excited to energize local, state, national and international organizations in efforts to eliminate barriers to accessing mental health care. For all who have, and continue to work on this movement, we are proud to join you in these efforts. To learn more about us and our efforts visit www.eachmindmatters.org or www.calmhsa.org.



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