

Understanding Stigma: Young People's Experiences of Mental Health Stigma

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Background

Recent reforms of mental health policy in Scotland have been enshrined in the new Mental Health Act (2003), and one of the key aims of the Scottish Government's *National Programme for Improving Mental Health and Wellbeing* (Scottish Executive, 2003b) is to eliminate stigma and discrimination. The 'see me' campaign was launched in 2002 to challenge stigma and discrimination related to mental health difficulties, and a series of evaluations lead to the conclusion that this has helped reduce stigma associated with mental ill-health.

Study Objectives

- to elicit young people's views regarding the most common sources of knowledge relating to mental health.
- to elicit young people's experiences of stigma, including the stigma they assign to themselves and anticipate from others, arising from their own or a parent's mental health difficulties.
- to elicit young people's views regarding the most common sources of stigma related to mental health difficulties.
- to elicit the key strategies that young people use to cope with the psychological and social impact of stigma.
- to elicit young people's suggestions about how stigma related to mental health difficulties could be prevented and eliminated.
- to identify suggestions by young people for strategies which could be used by relevant agencies, to support young people more effectively when stigma from mental health difficulties affects their lives.

Special Ethical Issues

The following were ethical issues raised over and above the usual issues with research with children and young people

1. **creation of negative perspective.** The study could inadvertently force the young people to consider negative aspects of their situation even though they may view the situation more positively.
2. **balancing rights of parents and children.** Parental permission was sought for young carers to take part in the study. Given that many of these parents had long-term mental health problems it was questionable whether they could make such reasonable informed consent.
3. **negative impact on self-esteem.** Inviting such young people to take part in this study could exacerbate their difficulties by encouraging them to see themselves as ill or vulnerable.
4. **breach of privacy.** Attendance at a focus group would give the young people knowledge of other participants with similar difficulties, thereby possibly breaching confidentiality.

Method

Recruiting young people with mental health difficulties or young people caring for parents experiencing mental health difficulties, who were willing to take part in focus groups to discuss stigma, proved an enormous challenge to the successful completion of this research. and resulted in fewer participants than originally intended.

Three focus groups were conducted with young people, as follows:

- one focus group with young carers (9-12 years) who live with a parent who experiences a mental health difficulty. Four young people took part in this.
- one focus group with young carers (13-17 years) who live with a parent who experiences a mental health difficulty. Six young people took part in this.
- one focus group with young people (14-17 years) who have experienced a mental health difficulty. Seven young people took part in this.

Findings

From analysis of the focus group discussions, it was found that the young people thought:

- the quality of information that they had received about mental health issues was poor.
- the media does not present an accurate perception of mental health difficulties and encourages stigma.
- they were reluctant to disclose information about mental health difficulties to others.
- once information about mental health difficulties was disclosed, their peers began to avoid them.
- if they had a mental health difficulty, they were frequently subjected to severe verbal and physical abuse.
- sympathy from friends and family – although stemming from concern – was a further source of stigma.
- factual television programmes, discussing real mental health difficulties, could reduce stigma.
- they sought advice from a trusted adult or friends to help them to deal with the stigma experienced.
- they also used more direct strategies such as physically fighting back or truanting from school.
- despite using a range of coping strategies, the stigma persisted in most instances.
- many of the young carers found attending a support group to be extremely helpful for them.
- major changes to the current mental health education curriculum are required.
- mental health education should be introduced in schools as early as possible to help reduce stigma.
- ignorance of the prevalence and implications of mental health difficulties, creates stigma.
- school staff should be aware of a carer's responsibilities and how this might impact on them in school.
- they did not want teachers informed about their mental health difficulty, to avoid being viewed differently.
- they wanted to be listened to, and to be involved in discussions and decisions about the issues they faced.

Conclusion and Suggestions

In the light of the findings of this study, the following suggestions for future developments in reducing the impact of and eliminating stigma are offered:

- the media and mental health sectors should work together to provide more accurate and balanced information about mental health issues; the media which specifically targets young audiences should address mental health issues in a positive and support manner.
- mental health education should begin earlier with information being age appropriate and becoming more detailed and complex as pupils get older; the mental health education curriculum should be broadened to include a wider range of topics related to mental health difficulties.
- professionals should listen carefully to young people and provide support to help them deal with the stigma associated with mental health difficulties; conditions of confidentiality should be made clear to young people with mental health difficulties when they receive support from professionals.
- young people who help care for a family member with a mental health difficulty should continue to have access to support groups; setting up support groups for young people who have experienced a mental health difficulty should be considered.
- planners of campaigns to promote better understanding of mental health difficulties amongst young people should endeavour, where possible, to take into account the potential sensitivities and needs of those who already have direct experience of mental health difficulties.

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