

Time to Change: *Submission by Mind, Rethink Mental Illness and Time to Change*

Mind, Rethink Mental Illness and our joint campaign Time to Change are pleased to have the opportunity to respond to this consultation. Our many supporters frequently draw our attention to what they perceive to be negative, damaging and stigmatising coverage. The voice of people with mental health problems is one that sadly is all too often missing from the press, and we hope that our submission will address some of the main issues concerning the large group of people we represent.

About us

Mind and Rethink Mental Illness are both registered charities.

Mind believes no one should have to face a mental health problem alone. We listen, give support and advice, and push for a better deal for everyone experiencing a mental health problem. We provide advice and support to empower anyone experiencing a mental health problem, and campaign to improve services, raise awareness and promote understanding.

Rethink Mental Illness is a charity that believes a better life is possible for millions of people affected by mental illness. For 40 years we have brought people together to support each other. We run services and support groups that change people's lives and challenge attitudes about mental illness. We directly support almost 60,000 people every year across England to get through crises, to live independently and to realise they are not alone. We give information and advice to 500,000 more and we change policy for millions.

Mind and Rethink Mental Illness also jointly run Time to Change, England's most ambitious programme to change the way the public thinks and acts about mental health problems. The programme is funded by the Department of Health and Comic Relief.

A key part of our remit is to work with the media to improve standards of reporting and representations of mental health issues.

Context

One in four people will experience a mental health problem in any one year, and the World Health Organisation predicts that within 20 years depression will be the second most common cause of ill health.

A Time to Change survey of nearly 3,000 people with mental health problems revealed that 9 out of 10 people report facing stigma because of their mental illness.¹

A later survey revealed that 60% of people said that stigma and discrimination are either as damaging and distressing as, or more damaging than, the symptoms of their mental illness. Thirty five per cent reported that stigma had made them give up on their ambitions, hopes and dreams, and 27% said stigma had made them want to give up on life.²

A further survey of young people echoed this last statistic, with 26% of under 25s with mental health problems reporting that the stigma attached to their mental illness has made

¹ Time to Change 'Stigma Shout', September 2008, survey of 3,038 mental health service users and 661 carers by Rethink Mental Illness's research department

² Time to Change 'The State of Stigma', October 2011, survey of 2,770 Time to Change supporters, conducted online using SurveyMonkey via social media

them want to give up on life.³

A recent study⁴ compared coverage of mental illness in UK newspapers between 2008 and 2014. The authors selected 27 newspapers and on two randomly chosen days of each month they checked for stories relating to mental illness.

They amassed nearly 5,000 suitable articles, which they then analysed. Each article was coded as stigmatising, anti-stigmatising or neutral, where stigmatising meant pejorative language or the suggestion that people with mental illness were a danger to others, and anti-stigmatising articles promoted mental health or covered injustice or stigma.

The researchers found that while the overall number of articles increased significantly between 2008 and 2014, showing the huge increase in media appetite for stories about mental health, there was no improvement in the balance of stigmatising to anti-stigmatising coverage.

Newspapers are the key source through which people see or hear stories and reports about mental health. However, only 59% of people think that newspapers report on the issue realistically while 43% think they do so sensitively, compared to 72% and 66% who believe the same for TV News. The figure drops to just 54% and 38% respectively for people who have, or have ever had, a mental health problem.⁵

A survey in of 515 people with mental health problems conducted by Mind in 2000 found that 50% of all respondents reported that media coverage had a negative effect on their mental health, with 24% saying that they had experienced hostility from their neighbours and local communities as a result of media reports. Almost a quarter (23%) who were employed or volunteering, or had been within the previous three years, has experienced discrimination or harassment from their employer or work colleagues, that they blamed on media coverage of mental health issues.⁶ While this survey provides old data, we believe that the findings are still highly relevant.

We frequently hear from our supporters about the effect that negative media coverage can have on an individual. One such example of this anecdotal feedback, from an anonymous Facebook fan, reveals the realities of this:

"I was hugely reluctant to see a doctor. I had been badly depressed for four years and feeling suicidal for three months before I finally saw a doctor. My reluctance must to a certain extent be due to the media representation of mental illness. You don't want to seek treatment, because you don't want to be seen as a lunatic."

³ Time to Change Children and Young people survey, conducted online using SurveyMonkey. The survey was publicised via social media between 25 May and 8 June 2012 and was completed by a total of 1,132 young people in the UK who are under the age of 25 and who have experienced a mental health problem

⁴ Rhydderch D, Krooupa A-M, Shefer G, Goulden R, Williams P, Thornicroft A, Rose D, Thornicroft G, Henderson C. (2016) [Changes in newspaper coverage of mental illness from 2008 to 2014 in England \(PDF\)](#). Acta Psychiatr Scand 2016; 134 (Suppl. 446): 45–52 DOI: 10.1111/acps.12606

⁵ Survey of 2,050 UK adults by Populus for Mind, November 2011

⁶ Mind 'The Daily Stigma', February 2000, survey of 515 mental health service users conducted by Mind

Dangerousness

Dangerousness in mental health has been described as: "an unpredictable and untreatable tendency to inflict or risk serious, irreversible injury or destruction, or to induce others to do so",⁷ and "a propensity to cause serious physical injury or lasting physical harm".⁸

Looking specifically at newspaper headlines rather than body copy, the most common message communicated in the headlines of UK newspaper coverage about mental health is a "risk of violence", while almost a third of newspaper coverage on the subject focuses on violence and homicides. This has a clear effect on readers, with 1 in 4 people saying their belief in a link between mental illness and violence stems from the media.⁹

In reality, this perceived link between dangerousness and mental illness has been grossly exaggerated. A study looking at the 5,189 homicides to have occurred in England and Wales between 1997 and 2005 revealed that approximately 1 in 10 (510) were committed by individuals known to have mental health problems at the time of the offence.¹⁰ It has been estimated that around 1 in 6 people will have a significant mental health problem at any one time¹¹.

In contrast, there is far more evidence suggesting a link between drink and drug abuse and violent crime. According to the British Crime Survey almost half (47%) of the victims of violent crimes believed that their offender was under the influence of alcohol and about 17% believed that the offender was under the influence of drugs.¹² Another survey suggested that about 30% of victims believed that the offender attacked them because they were under the influence of drugs or alcohol. In contrast, only one per cent of victims cited mental illness as the cause of the violent incident.¹³

Someone with a mental health problem is not only far more likely to be the victim of a crime than the perpetrator, but they are more likely than people without a mental illness to be a victim of crime. One study found that more than 1 in 4 people with a severe mental illness had been a victim of crime in one year.¹⁴ Mind's Another Assault campaign in 2007, which explored the extent to which people with mental health problems are exposed to crime, fear and victimisation, further revealed that:

- 71% of respondents had been victimised in the last two years
- 22% had been physically assaulted
- 27% had been sexually harassed and 10% sexually assaulted

⁷ Scott PD 1977, 'Assessing dangerousness in criminals', *British Journal of Psychiatry*, vol. 131, pp. 127–142.

⁸ Butler Report. 1975, 'Report of the Committee on Mentally Abnormal Offenders', London, The Stationery Office.

⁹ <http://www.gresham.ac.uk/lectures-and-events/press-coverage-of-mental-health-and-suicide>

¹⁰ Large M, et al., 2008, 'Homicide due to mental disorder in England in Wales over 50 years', *British Journal of Psychiatry*, vol. 193, pp. 130–133.

¹¹ The Health & Social Care Information Centre, 2009, Adult Psychiatric Morbidity in England, 2007, Result of a household survey

¹² Home Office, 2009, Crime in England and Wales 2008/09, Vol. 1, Findings from the British Crime Survey and police recorded crime, Statistical Bulletin, 11/09, vol. 1.

¹³ Coleman K, Hird C, Povey D. 2006, 'Violent Crime Overview, Homicide and Gun Crime 2004/2005', Home Office Statistical Bulletin

¹⁴ Teplin L, McClelland M, Abram K, Weiner D, 2005, 'Crime victimization in adults with severe mental illness', *Archives of General Psychiatry*, vol. 62, pp. 911–921.

- 41% were the victims of ongoing bullying
- 26% had their homes targeted

Nearly 90% of respondents living in local authority housing had been victimized¹⁵

Anecdotal comments from our Facebook supporters gives a flavour of how this type of coverage affects people living with a mental health problem:

"Just last night on the TV the word 'psychotic' was used freely to refer to an archetypal mass murderer rather than the literal meaning. The word has become hijacked by the press, media, TV and sadly society as a whole to denote evil, rather than suffering."

"I'm sick of the media scaremongering everyone into thinking we are all monsters when a good percentage of people with mental health issues are very kind and loving human beings, who are being denied the chance to lead a fulfilling life due to ignorance and stigma."

Our recommendations

We would like to feed back specifically on clauses 4 and 9 as follows:

4. DISCRIMINATION

4.1. Publishers must not refer pejoratively to a person on the basis of that person's age, disability, gender reassignment or identity, marital or civil partnership status, pregnancy, race, religion or belief, sex or sexual orientation or another characteristic which makes that person vulnerable to discrimination.

4.2. Publishers must not refer to a person's disability, gender reassignment or identity, pregnancy, race, religion or belief or sexual orientation unless this characteristic is relevant to the story.

4.3. Publishers must not incite hatred against any group on the basis of that group's age, disability, gender reassignment or identity, marital or civil partnership status, pregnancy, race, religion or belief, sex or sexual orientation.

We feel very strongly that mental health should be explicitly referenced in all three sub clauses above as an example of 'another characteristic'. While we recognise that there may be a long list of possible other characteristics, the above context around mental health reporting in particular makes a strong case for including mental health specifically.

It is worth noting that IPSO's Editors' Code does include mental illness specifically, as follows:

12. Discrimination

¹⁵ Mind survey of 304 people with experienced of a mental health problem alongside focus groups featuring 52 different people who also had experience, conducted between Jun – Sep 2007

i) The press must avoid prejudicial or pejorative reference to an individual's, race, colour, religion, sex, gender identity, sexual orientation or to any physical or mental illness or disability.

ii) Details of an individual's race, colour, religion, gender identity, sexual orientation, physical or mental illness or disability must be avoided unless genuinely relevant to the story

Omitting mental health problems from Impress's code feels to us like a step backwards.

9. SUICIDE

9.1. When reporting on suicide or self-harm, publishers must not provide excessive details of the method used or speculate on the motives.

We are pleased to see that Samaritans has already made a detailed response on this subject and would like it to be made clear that we support their recommendations in their entirety.

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