

## Public Awareness of the Effectiveness of Psychiatric Treatment May Reduce Stigma

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**Abstract:** Stigmatization is of importance in mental disorders. It is widely believed that one of the most important factors in stigmatization is considering the patients as dangerous. This study aims at analyzing the impact of knowledge regarding the chances of treating mental illness. **Materials and Methods:** 700 final year university students filled out the Dangerousness Scale and gave their opinions on whether mental illnesses are treatable. **Results:** The results showed that the subjects who think that the chance of treatment for mental diseases does not exist find mentally ill people more dangerous than the subjects who declare the opposite. On the basis of this finding, it can be suggested that drawing public attention to the therapeutic advances in psychiatry may lead to a decrease in stigmatization.

### Introduction

Stigmatization of people with mental illnesses systematically isolates from social networks(1). By means of stigmatization, the mentally ill are kept away from social, cultural, economic and even judicial opportunities.

In principle, stigmatization is a sociological concept, and it does not only apply to mentally ill people. People may be stigmatized for reasons such as AIDS (2), obesity (3), psoriasis (4), physical handicaps (5) or even for aging, youth (6) and for skin color (7). However, none of the other objects of stigmatization are subjected to judicial rules and regulations in the same way as those with mental disorders. Obviously, psychiatric patients are found dangerous and the public has been deemed in need of protection from them.

Anthropological studies indicate that discriminatory social attitudes towards people with mental disorders date back to the prehistoric era. In the past, mentally ill people were deprived of all human rights but breathing. However, even "the right to breathe" could be withheld at times (8). The latest example of this is the execution of the 100,000 psychiatric patients living under fascist ideology in modern Europe (9).

Since this massacre, there have been many improvements, especially during the last 40-50 years, with regard to the attitudes and policies towards mental disorders. But, it is clear that there is still plenty of room for a systematic and resolute public effort to overcome the subjecting of the mentally ill to homelessness, unemployment, starvation and isolation because they are ill. The responsibility for resolving the issue first

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falls on the shoulders of the "patients themselves," then the families, physicians, scientists, intellectuals, politicians, and almost all members of society (10).

It is essential to be clear about the determinants of the problem in order to develop realistic policies. On the one hand, the factors that cause stigmatization have universal characteristics. Yet, on the other hand, they have particular aspects emanating from the patient's cultural environment. That is to say, analyzing stigmatization requires examination of specific cultural contexts.

There are strong reasons to think that one universal cause for the stigmatization of mentally ill people is related to the availability of therapy. In other words, it can be suggested that there is a relationship between the recent decrease of stigmatization and the recent progress in therapeutic tools developed for mental illnesses. A limited number of studies made in various contexts support this thesis (11).

This study tries to analyze whether the belief about the treatability of mental disorders has an effect on stigmatization in the specific context of Turkey.

### Material and Method

The data which have been analyzed were obtained from research carried out on 700 final year students at the Management and Economy Department of the University of Marmara, Istanbul. The students of this department were chosen as they were not educated about the medical, psychological,

sociological or any other aspects of mental disorders. In addition, since the University of Marmara is a state university which has students from different social classes and also from different parts of the country, this makes the subjects good representatives of the Turkish population for the group of the selected age and education. The ages of the respondents varied between 18 and 32, with a mean value of 22, and with a standard deviation of 1.79. The number of female respondents was 294 (45%), whereas the number of male respondents was 357 (55%). A total of 651 of 700 subjects completed the Dangerousness Scale (DSc) (12).

They were then asked if they believed that mental illnesses were treatable. They were given three options:

- a. "Possible,"
- b. "Not Possible,"
- c. "Not sure."

We analyzed the sum of the scores of the "Dangerousness Scale" (Cronbach Alpha Reliability score is 0.72 for its Turkish translation). The scale contains eight items. Each item has seven ordinal response levels. The fourth level of response is indicated as neutral. The response level of the items were adjusted in such a way that the higher the level of response was, the higher the stigmatization it shows. The scale measures the respondent's belief about whether a person with mental illness is likely to be a danger to others. The questions on the scale are:

	Strongly agree		Neutral			Strongly disagree	
1. If a group of former mental patients lived nearby, I would not allow my children to go to the movie theater alone.	1	2	3	4	5	6	7
2. If a former mental patient applied for a teaching position at a grade school and was qualified for the job, I would recommend hiring him/her.	1	2	3	4	5	6	7
3. One important thing about mental patients is that you cannot tell what they will do from one minute to the next.	1	2	3	4	5	6	7

	Strongly agree		Neutral			Strongly disagree	
4. If I know a person has been a mental patient, I will be less likely to trust him.	1	2	3	4	5	6	7
5. The main purpose of mental hospitals should be to protect the public from mentally ill people.	1	2	3	4	5	6	7
6. If a former mental patient lived nearby I would not hesitate to allow young children under my care on the sidewalk.	1	2	3	4	5	6	7
7. Although some mental patients may seem all right, it is dangerous to forget for a moment that they are mentally ill.	1	2	3	4	5	6	7
8. There should be a law forbidding a former mental patient the right to obtain a hunting license.	1	2	3	4	5	6	7

**Results**

The number of respondents who thought that mental illnesses are “treatable” was 494, those who thought them “not treatable” numbered 116, and those who were “not sure” numbered 15. There were 26 missing data.

When analysis was conducted on the sum of the scores of the “Dangerousness Scale,” we found a statistically significant difference between the groups who believed in the treatability of the mental disorders and the groups who did not.

The result of the Kruskal-Wallis One Way ANOVA is (P<0.0001)

According to the post-hoc Scheffe tests, the subjects who think that the chances of treatment for mental diseases do not exist stigmatize people who have any kind of mental illness more than the subjects who declare that there is a chance for these people to be treated. Since, presumably the scores more than 32 [min possible scores (8) + max possible scores (56) /2] shows stigmatization, as is shown out in Figure 1, all the groups, more or less, tend to stigmatize the mentally ill as dangerous which signifies that the public awareness of the treatability of mental disorders is not the only determinant of stigmatization.

Figure 1. Dangerousness scale scores and evaluation of treatability of mental illness among university students in Turkey.

Evaluation of treatability	“Possible” mean±SD (n) (95% CI)	“Impossible” mean±SD (n) (95% CI)	“Not Sure” mean±SD (n) (95% CI)	Kruskal Wallis 1-Way ANOVA
Dangerousness Scale scores (range 8-56)	32.56±8.56 (494) (31.80 to 33.32)	37.49±8.91 (116) (35.85 to 39.13)	36.53±8.14 (15) (32.02 to 41.04)	$\chi^2=29.59$ P<0.0001

The analysis was conducted with non-parametric tests due to the fact that there was no homogeneity in the distribution of the groups which was verified with single row chi-square tests, and that the type of measurement was ordinal which gave us another reason to use the non-parametric test. According to the Lilliefors analysis, none of the groups were distributed normally. Finally, we decided to use Kruskal-Wallis One Way ANOVA, which could best fit in analyzing the data in hand. Post-hoc analysis was conducted with Scheffe’s Multiple Comparison Test when a statistically significant difference among the data of the scale was found. Then, we found that the group that responded to the question with “possible” was statistically different from the group that gave a negative response.

## Conclusion

This analysis shows that the public who believe that it is possible to treat the mentally ill tend to stigmatize them less. The study suggests that the public awareness of progress in psychiatric treatment has a partial but considerable impact on the resolution of the public belief of considering psychiatric patients as dangerous which is an important component of stigmatization. It appears that with increasing chances of treatment, public fear of mentally ill people has been decreasing not only in Turkey but also in other countries (13). Therefore, our findings also seem to support the idea that one universal factor in the stigmatization of mentally ill people is related to advances in therapy.

The findings presented here are obtained from a long-term project being conducted in our institute. As a first step, the project has been concerned with a simple question of the effect of public belief in Turkey about the treatability of mental disorders on stigmatization. As is indicated, it has a partial but considerable impact on the stigmatization of the mentally ill people when society is aware of treatment opportunities. We are aware that the design of this study does not allow a clear conclusion regarding what policy might be the best to make people aware of the treatability of mental illnesses. However, we think that keeping the public in direct contact with mentally ill people who have been treated might be considered the best way to increase public awareness in this regard. This idea has been encouraged by other studies in different cultural contexts (14). At this point, provision of equal treatment opportunities for people with mental disorders seems to be a key factor in reducing the stigmatization of mentally ill people as dangerous, as it would increase the chance of society being convinced about the treatability of mental illness.

In summary, it is our belief that giving mental health care opportunities to the public will convince them of the therapeutic possibilities of mental illness by witnessing the advances in psychiatry closely in their daily life. One of the consequences of the diminution of stigmatization will be the reduction of the many social, judicial, economic, and cultural obstacles standing in the way of people with mental disorders.

The study, however, does not show that awareness of the treatability of mental illness is the only determinant of stigmatization. Therefore, further research is necessary to understand the other parameters which may have effects on the strategies for overcoming the problem of stigmatization.

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