CUHK Finds Stigma Lowers Likelihood of Help Sought for Mental Health Problems and Launches Stigma Reduction Programme under SHKP Mental Health Alliance

(Diagram 1)

<u>Common Sense Model of Stigma on Mental Illness:</u> <u>Relationship with Social Distance and Help-Seeking Intentions</u>



Social Cognitive Factors Related to Mental Illness

- Cause
 - Possible Causes (Psychological/ Pressure/ Biological/ Culturally Affected Beliefs)
 - e.g.: Pressure/ Neurological Abnormalities / Retribution
- Timeline
 - Acute or chronic illness
 - e.g.: Mental illness can be cured in a short time /
 - Mental illness is a long-lasting illness

- Consequence
 - Seriousness of the illness
 - e.g.: Mental illness is very serious /
 - The illness brings lifelong consequences
- Control
 - Controllability of the symptoms by the patients
 - e.g.: Patients can control the whole course of illness/ The illness is beyond self control
- Illness Coherence
 - The comprehensibility of the illness
 - e.g.: I don't have any concept of mental illness / I understand clearly of all the aspects of mental illness
- Public Stigma
 - The way the think about mental illness and the patients
 - e.g.: I am worried that individuals with mental illness will hurt the others/ I am afraid to stay with individuals with mental illness alone/ Individuals with mental health should be separated from society
- Social Distance
 - The degree of various social contact with individuals with mental illness
 - e.g.: Be a neighbour of an individual with mental illness / Be a friend with an individual with mental illness/ Work in the same company with an individual with mental illness/ Marry an individual with mental illness
- Intention to Seek Help

(Table 1)

- The intention to seek help from professionals when in need
- e.g.: I will seek help from professional psychological treatment when in need

Comparisons between High Stigmatization Group and Low Stigmatization Group

	Low Stigmatization Group	up High Stigmatization Group (n = 139)	
	(n = 801)		
	Average	Average	
Cause (Psychological/ Pressure)	23.85	23.46	
Cause (Biological)	12.99	13.22	
Cause(Cultural)*	11.42	13.21	
Timeline*	18.81	20.09	
Consequence*	21.74	23.79	
Control*	21.91	20.41	
Illness Coherence*	14.41	12.66	
Social Distance*	4.47	6.52	
Intention to Seek Help*	4.27	3.77	

* The difference is significant statistically between the two groups

(Table 2)

	Low Stigmatization Group	High Stigmatization Group
Destiny*	17.5%	33.8%
Feng Shui*	8.4%	28.8%
Retribution*	13.5%	25.2%

The figures in the table show the percentage of endorsement. * The difference is significant statistically between the two groups

(Table 3) The Comparison of Attitudes between High Stigmatization Group and Low	
Stigmatization Group	

Sugmanzation Group	T GC C	
	Low Stigmatization	High Stigmatization
	Group	Group
Live in the same building with individuals with mental illness*	67.7%	44.6%
Live on the same floor with individuals with mental illness*	61.7%	34.5%
Be a neighbour of individuals with mental illness*	54.8%	26.6%
Invite a friend with mental illness to your home *	52.7%	19.4%
Work in the same company but at different positions with individuals with mental illness *	71.9%	48.2%
Work in the same company and at the same position with individuals with mental illness *	60.2%	33.1%
Recommend your employer to employ an individual with mental illness to work in the company*	48.3%	30.9%
Be an ordinary friend of an individual with mental illness*	66.3%	36.7%
Be a good friend of an individual with mental illness*	48.3%	15.8%
Rent your property to an ex-patient of mental illness (If you are the owner) *	45.4%	21.6%
Let an individual with mental illness to take care of your children, if you have any*	14.2%	2.2%
Marry an individual with mental illness*	16.1%	2.9%
Endorse the establishment of an rehabilitation centre in your community*	55.4%	37.4%

The figures in the table show the percentage of endorsement. * The difference is significant statistically between the two groups