

“In Our Own Stories”

Stigma reduction programme in promoting a positive attitude towards persons in recovery in secondary school students

Project Team

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Background

- **Stigma and mental health problems**

- 450 million people suffer from mental and behavioral disorders, and every fourth person will suffer mental illness at some time in life (WHO, 2003)
- It is defined as *“Social devaluation of a person because of personal attribute leading to an experience or sense of shame, disgrace and social isolation”* (Thara & Srinivasan, 2000)
- Stigma has long been of interest to researchers, mental health care providers and consumers

Background

- **Stigma and mental health problems in HK**
 - Negative attitude towards mental patients and mental health facilities remained prominent (Chou & Mak, 1998)
 - People with mental illness endorse the use of secrecy as the most frequent way to cope with stigma (Chung & Wong, 2004)
 - Over half of the respondents felt that they were worthless because of the illness, 40.6% deliberately avoided most social contacts and 43.8% had thought of ending their lives (Lee, Lee, Chiu, & Kleinman, 2005)

Background

- **Stigma reduction of mental illness**

- Education (providing accurate information about mental illness) and contact (improving public perceptions of individuals with mental illness via interpersonal interaction) are effective means (Corrigan & Penn, 1999)
- Filmed presentation about a person with mental illness relaying his/her life story, showed promising results in reducing stigma (Brown, Evans, Espenscheade, & O'Connor, 2010, Corrigan, Larson, Sells, Niessen, & Watson, 2007)

Background

- **Stigma reduction projects in Hong Kong**

- **“Put up Your New Glasses” 2009 by NLPRA**

- Educate secondary school students on concept of holistic health and stigma associated with mental health problems through interactive activities, website and resource kit for teachers on youth mental health
- Results of program evaluation indicated that it could increase the knowledge on mental health among young people

- **“The Same, Not the Same” 2009 by CUHK**

- School-based stigma reduction programs against schizophrenia using education-video based contact
- Showed larger improvement in eradicating stigma and social distance as compared with the programs using education or video-education format alone (Chan, Mak & Law, 2009)



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Innovative Approaches

- **Oral History**

- A qualitative methodology that collects memories and personal commentaries about individuals, families, important events or everyday life using audio tapes, videotapes, or transcriptions of planned interview (Ritchie, 2003)
- Use of a pre-set question guide and done by social workers

Innovative Approaches

- **Theatre in Education**

- “the use of pre-written and rehearsed theatre performance as a tool for learning” (Schonmann, 2005, P.33)
- Theatre work has been applied to adolescents in alcohol, tobacco, and illegal drug education, and knowledge, attitude and risk behaviour relating to HIV/AIDS with positive effects (Daykin, etal., 2008)

Project objectives

- **Project Objectives**

- To reduce stigma related to mental illness
- To disseminate the message of positive attitude towards persons in recovery (PIR) to young people and foster social inclusion
- To reduce self-stigma in PIR
- To document and disseminate the stories of PIR to the public

Synergy with Collaborators

- **Funding:** Health Care and Promotion Fund
- **Drama Education:** Chung Ying Theatre Company
- **Research:** Department of Psychology, The Chinese University of Hong Kong
- **Target audience:** 665 students from 19 secondary schools
- **Persons in recovery (PIR) of mental illness:** 20 PIR

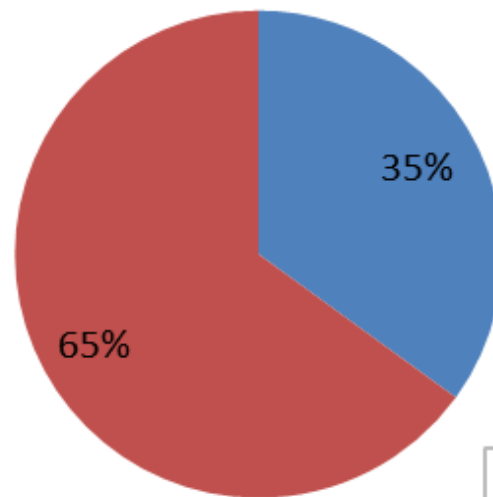
Target Groups

- 20 PIR
- 665 Secondary school students

Profile of Persons in Recovery

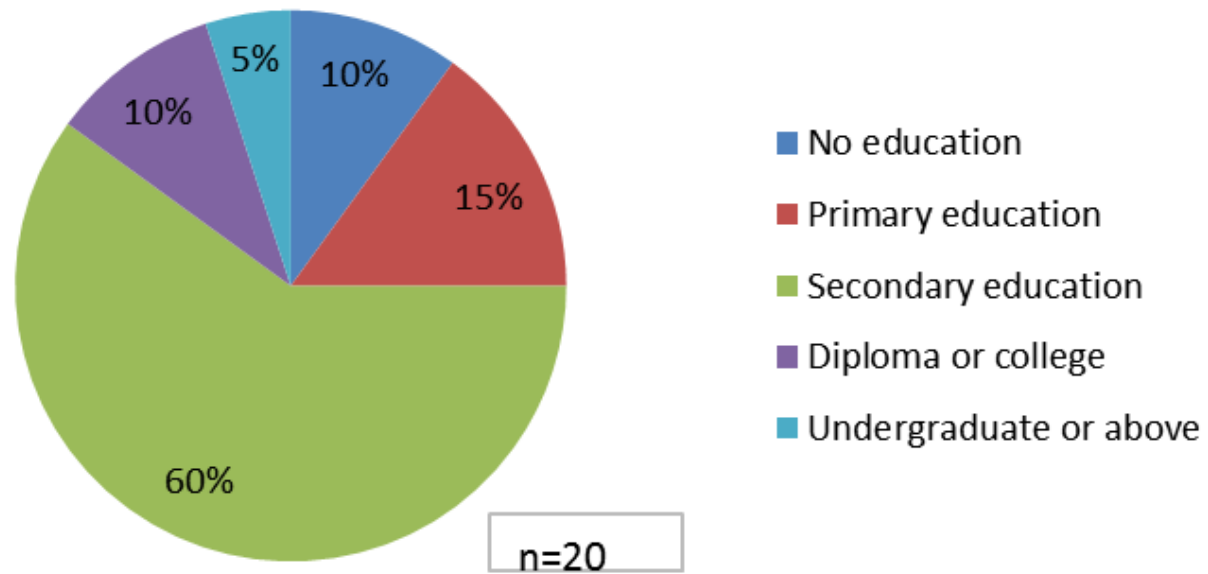
Distribution of Gender

■ Male ■ Female



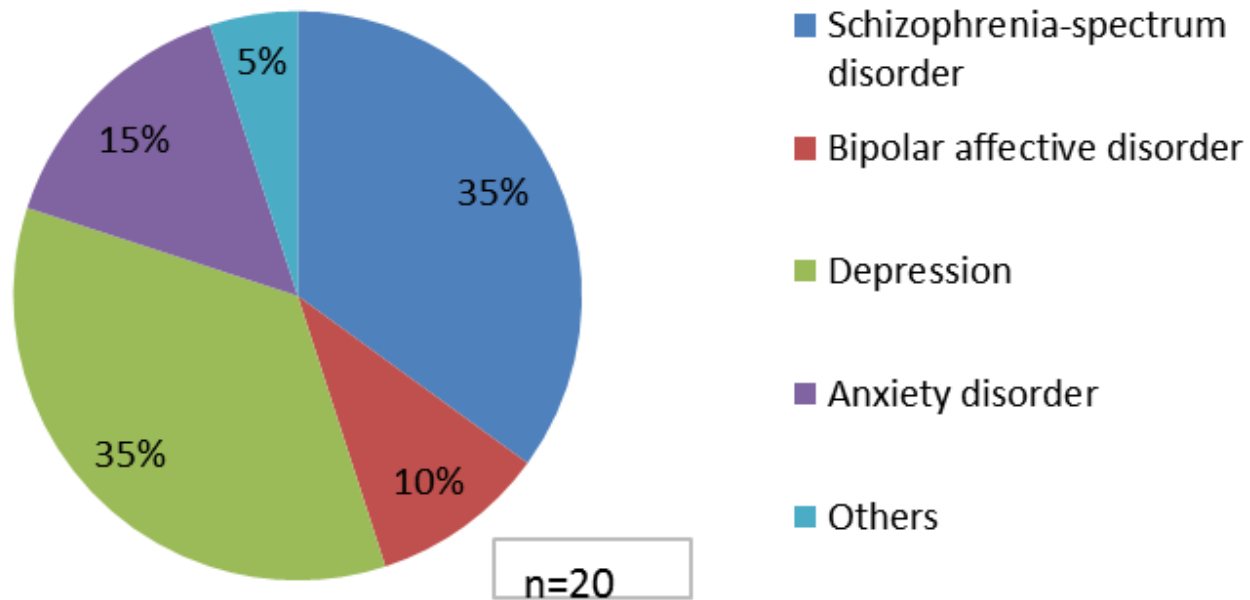
Profile of Persons in Recovery

Distribution of Education Level



Profile of Persons in Recovery

Distribution of Diagnosis



Students' Profile

No of students	Theatre group	Video tape group
Recruitment	354 /10 schools	512 / 9 schools
Completed whole program	153	512
Completed questionnaires	136	164

Students' Profile

Comparison on Theatre group & Videotape group Students' Age

■ Theatre group (n=136) ■ Videotape group (n=164)

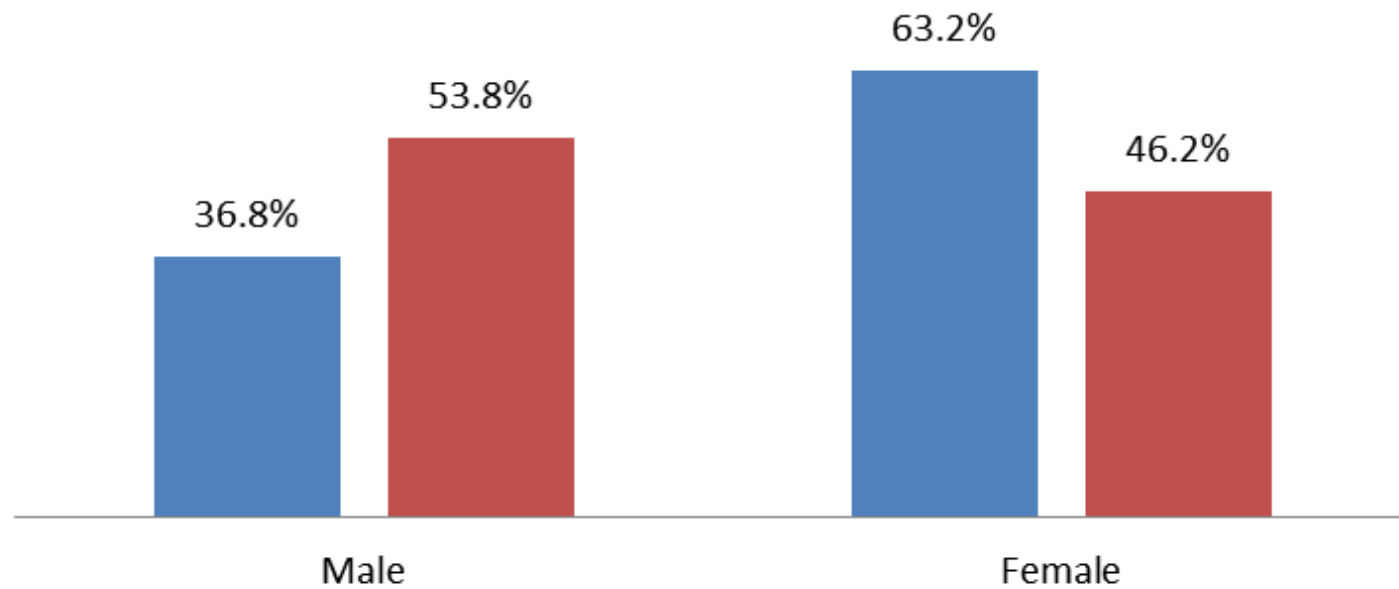
15.5
(SD 1.4)

15.1
(SD 1.5)

Students' Profile

Comparison on Theatre group & Videotape group
Students' Gender

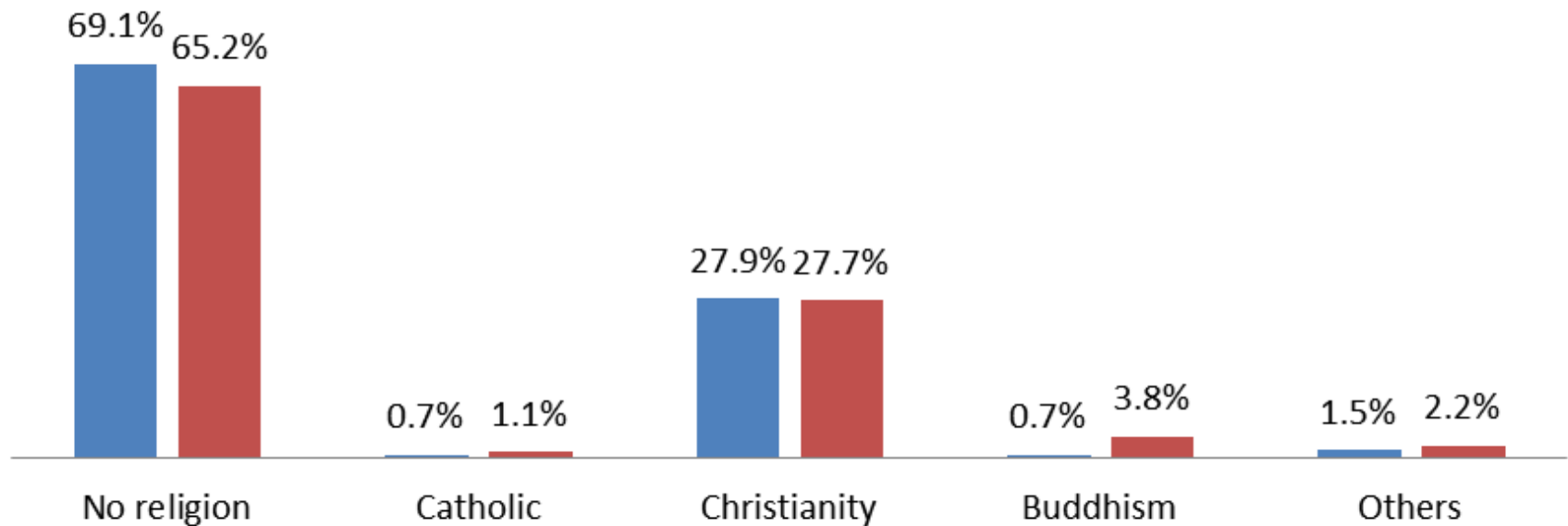
■ Theatre group (n=136) ■ Videotape group (n=164)



Students' Profile

Comparison on Theatre group & Videotape group Students' Religion

■ Theatre group (n=136) ■ Videotape group (n=164)



Implementation

- **For PIR**

- **Collection of 15 personal stories on recovery of mental illness for drama script**
- **Drama training series (29 sessions, 2-3 hours each) from September 2012 to May 2013**
- **4 theatre performance (9-11 May 2013) in Black Box of Kwai Tsing Theatre, post drama sharing session and follow-up workshop at respective secondary schools**



Implementation



- **For secondary school students**

- **Viewing a theatre performance (live or videotaped)**
 - performed by PIR
 - depicted their personal stories in the journey of recovery
- **Attending post drama sharing by PIR**
- **Attending an 1-hour follow-up workshop**
 - focused on demystifying mental illness
 - followed by discussion on the journey of recovery derived from stories of theatre performance

Program and outcome evaluation

- **For secondary school students**

- **Measurement Tools:**

- Public Stigma Scale (Mak, Chong, & Wong, 2012)
- Social Distance Scale (Holmes, et al., 1999)
- Knowledge on Mental Illness Test (Chan & Mak, 2009)

Program and outcome evaluation

ANOVA - Means and standard deviations of secondary school students in 3 outcome measures at pre- and post-theatre performance and post follow-up workshop (n=137)

	Pre-theatre performance	Post-theatre performance	Post follow-up workshop	F value	Level of significance	Partial eta squared
Stigma	53.51(12.34)	44.76(11.33)	44.32(13.70)	23.60	.00*	.10
Social distance	33.58(8.20)	29.19(7.13)	28.51(8.59)	16.23	.00*	.07
Knowledge on mental illness	23.70(3.25)	23.63(2.39)	24.30(2.72)	2.39	.09	.01

*The level of significant was below .05.

Program and outcome evaluation

MANOVA - Pre- and post-programme means and standard deviations of 3 outcome measures in theatre and videotape groups

Outcome measures	Theatre group (n=137)		Videotape group (n=164)		Partial eta squared η^2
	Pre: M(SD)	Post: M(SD)	Pre: M(SD)	Post: M(SD)	
Stigma	53.51(12.34)	44.32(13.70)	56.03(13.62)	50.53(16.04)	.00
Social distance	33.58(8.20)	28.51(8.59)	34.58(8.91)	32.66(9.97)	.01
Knowledge on mental illness	23.70(3.25)	24.30(2.72)	22.29(3.47)	22.88(3.22)	.00

Note: The effect size of time * condition were computed using partial eta squared.

Program and outcome evaluation

- **Feedback from students (n=363)**

	No change	Slight Improvement	Some improvement	A Lot of improvement
• Understanding on the impact of mental illness on PIR	3.6%	19.9%	49.0%	27.5%
• Understanding on the recovery journey of PIR	3.7%	19.7%	47.5%	29.2%
• Awareness on stigma towards PIR	3.1%	23.0%	46.6%	27.2%

Program and outcome evaluation

- **Feedback from students**

“Persons-in-recovery of mental illness were not terrific at all”

“They were just like ordinary people who needed our care and concern”

“The only thing that they need was support and love from family and friends”

Program and outcome evaluation

- **For PIR**

- **Measurement Tools:**

- Maryland Assessment of Recovery in People with Serious Mental Illness (Drapalski et al., 2012)
- Self-Stigma Scale-Chinese Version (Mak & Cheung, 2010)
- Self-efficacy Scale (Sherer & Maddux, 1982)
- Rosenberg Self-esteem Scale (Rosenberg, 1965)

Program and outcome evaluation

Pre- and post-programme means and standard deviations of PIR in 4 outcome measures (n=20)

	Baseline	After theatre performance	t value	Level of significance
Belief in recovery¹	89.18(10.14)	93.65(13.67)	-1.23	.24
Self-stigma¹	21.53(4.89)	20.35(6.33)	.97	.35
Self-efficacy¹	24.10(6.25)	26.55(6.36)	2.20	.04*
Self-esteem²	26.21(3.81)	22.42(3.78)	2.85	.01*

¹The higher the score, the higher level of belief in recovery, self-stigma, or self-efficacy

²The higher the score, the lower level of self-esteem

*The level of significant was below .05.



Program and outcome evaluation

- **Feedback from PIR (n=20)**
 - Growth in theatrical performance
 - Self confidence
 - Personal growth and development through drama training

Limitations

- **Limitations**

- Using theatre performance as a means for stigma reduction can be costly
- School-based programme demanded strong commitment from secondary schools
- Further study on the long-term effect of the program is needed, e.g. outcomes at a 3-month follow up period

Conclusion



- **Beneficial effects of programme on students**

- Preliminary evidence indicated that the methodology of oral history and theatre-in-education promote positive attitude in secondary school students
- This stigma reduction programme was effective in reducing stigma and social distance towards PIR in secondary school students, as well, improving the literacy of mental illness
- Results revealed that there was no significant difference in the modes of programme delivery, i.e. both the format of theatre performance and videotape appeared to be equally effective

Conclusion



- **Beneficial effects of programme on PIR**

- A higher sense of worthiness
- A stronger belief in their ability to complete tasks and to reach goals
- Enhance the self-esteem and self-efficacy of PIR, thus building up the psychological resources of perseverance, vitality and interpersonal strengths of PIR

Dissemination and publication

- Presentation “Using oral history and theater-in-education: An innovative anti-stigma programme to promote a positive attitude towards mental illness for secondary school students in Hong Kong” at the Social Development Confronting Global Challenges: Action, Policy, Planning and Social Work Intervention Conference in HKBU in April 2014
- Production of a documentary book



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Our Way Forward

- Use the videotaped performance in more schools
- Adopt different drama approaches in combating stigma and promoting social inclusion
- Empower PIR as actors to promote anti-stigma
- Encourage secondary schools to incorporate the topic of mental health in OLE curriculum



Our Encouragement

- Sharing of PIR after 2 phases of drama training and performance:



50th
anniversary



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Our Encouragement



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Project Members

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References:

Barney, L.J., Griffiths, K.M., Jorm, A.F., & Christensen, H. (2006). Stigma about depression and its impact on help-seeking intentions. *Australian and New Zealand Journal of Psychiatry*, 40, 51-54.

Brown, S. A., Evans, Y., Espenschade, K., O'Connor, M. (2010). An examination of two brief stigma reduction strategies: Filmed personal contact and hallucination simulations. *Community Mental Health Journal*, 46, 494-499.

Chan, J.Y.N., Mak, W.W.S., & Law, L.S.C. (2009). Combining education and video-based contact to reduce stigma of mental illness: "The Same or Not the Same" anti-stigma program for secondary schools in Hong Kong. *Social Science & Medicine*, 68, 1521-1526.

Chou, K. L. & Mak, K. Y. (1998). Attitudes to mental patients among Hong Kong Chinese: A trend study over two years. *International Journal of Social Psychiatry*, 44, 215-224.

Chung, K. F. & Wong, M. C. (2004). Experience of stigma among Chinese mental health patients in Hong Kong. *Psychiatric Bulletin*, 28, 451-454.

References:

Corrigan, P.W., Larson, J., Sells, M., Niessen, N., & Watson, A.C. (2007). Will filmed presentations of education and contact diminish mental illness stigma? *Community Mental Health Journal*, 43(2), 171-181.

Corrigan, P.W., & Penn, D.L. (1999). Lessons from social psychology on discrediting psychiatric stigma. *American Psychologist*, 54, 765-776.

Corrigan, P.W., River, L.P., Lundin, R.K., Penn, D.L., Uphoff-Wasowski, K., Campion, J., et al. (2001). Three strategies for changing attributions about severe mental illness. *Schizophrenia Bulletin*, 27, 187-195.

Daykin, N., Orme, J., Evans, D., Salmon, D., EcEachran, M., & Brain, S. The impact of participation in performing arts on adolescent health and behaviour: A systematic review of the literature. *Journal of Health Psychology*, 13, 251-264.

Essler, V., Arthur, A., & Stickley, T. (2006). Using a school-based intervention to challenge stigmatizing attitudes and promote mental health in teenagers. *Journal of Mental Health*, 15, 243-250.

Holmes, EP., Corrigan, PW., Williams, P, Canar, J., & Kubiak, KA. (1999). Changing attitudes about schizophrenia. *Schizophrenia Bulletin*, 25, 447-456.

References:

Lee, S., Lee, M. T. Y., Chiu, M. Y. L., & Kleinman, A. (2005). Experience of social stigma by people with schizophrenia in Hong Kong. *British Journal of Psychiatry*, 186, 153-157.

Macdonald, G. & Nehammer, S. (2003). An evaluation of a drug education play for schools in South Wales. *Health Education*, 103, 83-87.

Macdonald, G. & Nehammer, S. (2003). An evaluation of a drug education play for schools in South Wales. *Health Education*, 103, 83-87.

Mak, WWS., Chong, ESK., & Wong, CCY. (2012-under review). Beyond attributions—Using the common sense model to understand public stigma towards mental illness.

Reinke, R.R., Corrigan, P.W., Leonhard, C., Lundin, R.K., & Kubiak, M.A. (2004). Examining two aspects of contact on the stigma of mental illness. *Journal of Clinical and Social Psychology*, 23, 377-389.

Ritchie, D.A. (2003). *Doing oral history: A practical guide*. Oxford University Press: New York.

Rüsch, N., Angermeyer, M.C., & Corrigan, P.W. (2005). Mental health stigma: Concepts, consequences, and initiatives to reduce stigma. *European Psychiatry*, 20, 529-539.

References:

Schonmann, S. (2005). "Master" versus "Servant": Contradictions in drama and theatre education. *Journal of Aesthetic Education*, 39, 31-39.

Schulze, B., Richter-Werling, M., Matschinger H., & Angermeyer MC. (2003). Crazy? So what? Effects of a school project on student attitudes towards people with schizophrenia. *Acta Psychiatr Scand*, 107, 142-150.

Stuart, H. (2006). Reaching out to high school youth: The effectiveness of video-based antistigma program. *Canadian Journal of Psychiatry*, 51, 647-653.

Thara, R. & Srinivasan, T. N. (2000). How stigmatizing is schizophrenia in India? *International Journal of Social Psychiatry*, 46(2), 135-141.

Wahl, O., Wood., A., Zaveri, P., Drapalski, A., & Mann, B. (2003). Mental illness depicting in children's film. *Journal of Community Psychology*, 31, 553-560.

Winston, J. (2001). Drug education through creating theatre in education. *Research in drama education: The Journal of Applied Theatre and Performance*, 6, 39-54.

World Health Organization, (2003), *Investing in mental health*, Geneva: WHO.

A photograph of a stage during a presentation or event. A large screen at the back of the stage displays a grid of small images. The stage is lit with blue and purple lights. In the foreground, the backs of several rows of blue upholstered chairs are visible, facing the stage.

Thank You!

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