

Mental health and illness in the public mirror

What pictures do the media draw and how do the people perceive them?







By way of background, we know that worldwide, mental disorders are tremendous social and economic burden (WHO, 2013). In Germany, every year approximately 18 million people are affected (Jacobi et al., 2014). Hence, there is an urgent need for strategies to prevent mental disorders. Since mental health is not only a relevant aspect for quality of life, satisfaction, better-coping abilities and well-being (Bengel & Lyssenko, 2012; Tugade, Fredrickson & Feldman Barrett, 2004) but as well an effective protective factor against mental disorders (WHO, 2004), one way to successfully prevent mental disorders is to promote mental health. Mental health promotion focuses protective factors (salutogenetic perspective; Antonovsky, 1996) and aims to foster positive mental health by increasing psychological well-being. This refers to the importance of resilience meaning that people can maintain their mental health despite stress or to recover quickly from negative emotional experiences and to successfully cope with traumatic experiences (e. g., Chmitorz et al., 2018; Fergus & Zimmerman, 2005; Windle, 2011).

Media framing

Increasing awareness of mental health requires profound information and knowledge. Mass media provide a particularly important source for information about mental health to the public (Borinstein, 1992). But any media portrayal "select[s] some aspects of a perceived reality and make[s] them more salient in a [...] text" (Entman, 1993, p.52). This process of selecting and emphasising specific aspects of an issue always leads to a specific perspective. By focusing on "a particular problem definition, causal

interpretation, moral evaluation and/or treatment recommendation" (Entman. 1993, p.52), journalists create frames that people use and thereby construct reality. The public, meanwhile, recognises those frames, makes sense of them through their own preexisting models and personal experience and uses them to understand the world they live in (e.g., Entman, Matthes & Pellicano, 2009; Gamson, 1995). Thus, the media play a significant role concerning how people perceive mental disorders and persons affected and on what they think and know about mental health and resilience (Dorfman, Wallack & Woodruff, 2005; Gamson, 1995). This framing effect particularly occurs if people neither have their own direct experiences with mental health issues nor are in touch with people suffering from a mental disorder.

As part of the process by which individuals construct meaning, "changes in the media discourse [can also] cause changes in public opinion" (Gamson & Modigliani, 1989, p.2). As a consequence, to influence meaning and drive change, those who aim to establish a certain perspective in the public - i.e., to set a frame - must communicate for the media (i.e., to get journalists' attention) and for content (tell the story from the perspective of the advocate) (Wallack & Dorfman, 1996). Hence, public health promotion efforts should take into consideration how the 'public's communication environment' is shaped, particularly by the media.

Mental health and the media

But in many cases, the way the media frame health issues conflicts with health promotion and preventive goals. Regarding mental health, it must be assumed that the way the mass media frame mental health and disorders is predominantly negative protective factors – positive. salutogenetic (health- and preventionoriented) aspects – are not an issue in the media at all. Instead, the mass media cover the issue from a pathogenetic, risk- and problem-oriented perspective emphasising the dangerousness and peculiarities of people affected and often report in the context of violence and crime (Aragones et al., 2014; Coverdale, Nairn & Claasen, 2002; Klin & Lemish, 2008; McGinty et al., 2014; Slopen et al., 2007). This suggests social distance from the outgroup, i.e. people with mental disorders who are often being held individually responsible for being affected while neglecting social and structural factors (Aragones et al., 2014; Zhang et al., 2016). Further, media coverage of mental disorders is estimated to convey inaccuracies, exaggerations, or misinformation which perpetuates misconceptions and stigma instead of emphasising the importance of coherence and increasina resilience- and prevention-oriented beliefs (Aragones et al., 2014; Coverdale, Nairn & Claasen, 2002; Goulden et al., 2011; Henson et al., 2009; Klin & Lemish, 2008).

To successfully develop health promotion efforts and a media advocacy strategy addressing journalists as gatekeepers requires not only knowing the existing media frames. Also understanding how members of different target groups perceive the media environment (Wallack Dorfman, 1996). Therefore, investigated how German newspapers cover mental illness, mental health and resilience and how health experts and members of the public perceive the media coverage. We further aimed to figure out if the way the media frame mental healthrelated issues matches the recipients' perceptions. Here, we focus on both, health experts and professionals as well as the general public. The project is part of the "Ways to Resilience Initiative" of the Pfalzklinikum in the Palatinate region in Germany (Bomke, Kendall-Taylor & Cawthorpe, 2014; Bomke, 2015).

Methods

We conducted a quantitative content analysis and interviews with health professionals and members of the public. The content analysis covers the complete coverage on mental health, mental disorders and resilience in the year 2018 in three German daily print newspapers: a regional (Die Rheinpfalz), a national (Frankfurter Allgemeine Zeitung) and a tabloid newspaper (BILD), each with the highest outreach in the Palatinate region. The relevant articles were identified by a full-text database search using significant keywords for mental health, mental disorders and resilience. Amona those, articles covering the issue as the main subject were extracted. Overall, 546 articles were coded (Die Rheinpfalz: n = 268, 49%; Frankfurter Allgemeine Zeitung: n = 171, 31%; BILD: n = 107, 20%) by three coders who were trained before and reached a satisfying intercoder agreement (percent agreement = .90).

Additionally, qualitative semi-structured interviews with 16 health professionals and providers via telephone and 44 face-to-face interviews with members of the public aged between 18 and 71 were conducted. They were all recruited in the Palatinate region. Health professionals and providers worked in the fields of health prevention and provision, health promotion, education, social welfare and in working environments in the Palatinate region. Members from the

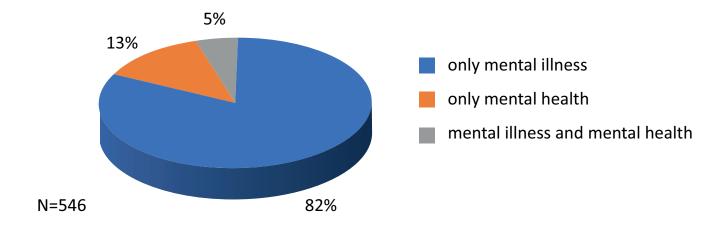


Figure 1: Focus of media coverage

public were recruited from different social contexts (rural vs. urban areas, economically underdeveloped vs. economically strong regions) and with different references to the issue (healthy versus directly affected from mental disorders vs. indirectly affected from mental disorders). The interviews focused (among other things) on the interviewees' perceptions of media coverage of mental health and mental disorders. Each interview lasted about 45 to 60 minutes and was recorded and transcribed literally. The transcripts were analysed using computer-assisted qualitative content analysis (Mayring, 2000), combining inductive and deductive strategies of coding.

Results

In the following, we contrast the results of the content analysis with the results of the interviews conducted with members of the public and health professionals and providers.

Scope of media coverage

Results of the quantitative content analysis reveal that out of 546 overall articles in the sample, 453 (83%) cover solely mental disorders, while only 68 articles (13%) focus exclusively on mental health (figure 1). 25 articles (5%) report on mental disorders as well as on mental health. 59 articles mention resilience either directly or indirectly (11% of all articles, 63% of all 93 articles covering mental health). But in all articles that deal with mental health, only 20% (n = 12) cover prevention. Members of the public only perceive few media coverage overall: "...mental illness is rather suppressed in the media." (Palatinate public, male, aged 32)

Content of media coverage

Even though members of the public only perceive some media coverage, they seem to have firm evaluations about how the media cover the issue. They've noticed an emphasis on burnout and celebrity suicides and a focus on crime: "...the media once again report on someone escaping from a mental institution, who is highly aggressive and violent..." (Palatinate public, male, aged 22)

These perceptions are partly supported by the results of the content analysis: The articles deal mostly with crime and

¹ All quotations were literally translated from German.

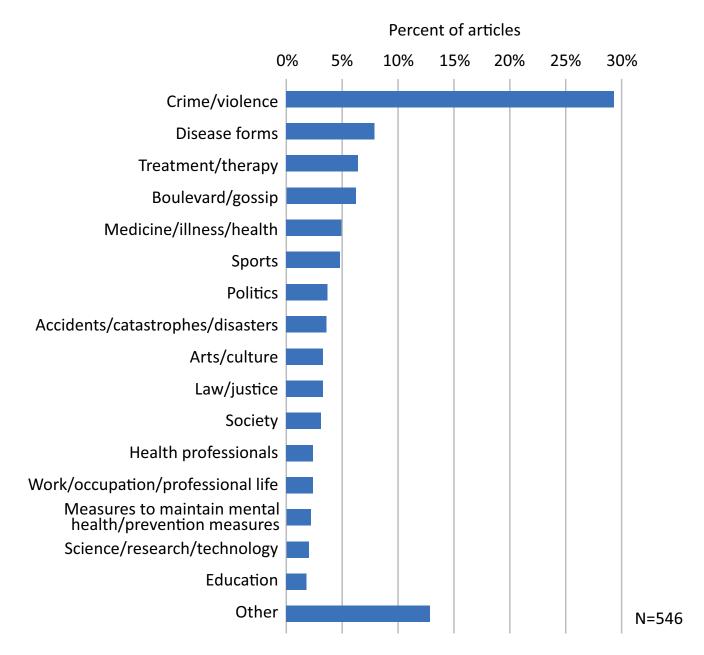


Figure 2: Main topics of media coverage

violence as a main topic (n = 160; 29%), far behind followed by types of the disease (n = 43; 8%), treatment options (n = 35; 6%) and boulevard/gossip issues (n = 34; 6%) as main topics (figure 2). This focus on crime also becomes apparent in that 190 articles (40% of all 478 articles covering mental illness) report on people affected by mental disorders as perpetrators. Prominent people are discussed in 118 articles (22%). Only twelve articles (2%) treat measures to maintain the own mental health and preventive measures as the

main topic and mental health and wellbeing are covered as the main topic by only seven articles (1%). The main topics covered are also reflected in the dominant occasions of reporting: 94 articles (17%) are written on the occasion of a crime or an act of violence, followed by 76 articles (14%) initiated by a lawsuit or judgment and 44 articles (8%) triggered by studies or empirical findings. Only 18 articles (3%) can be traced back to laypersons-oriented health or prevention programmes (e. g. information events, workshops).



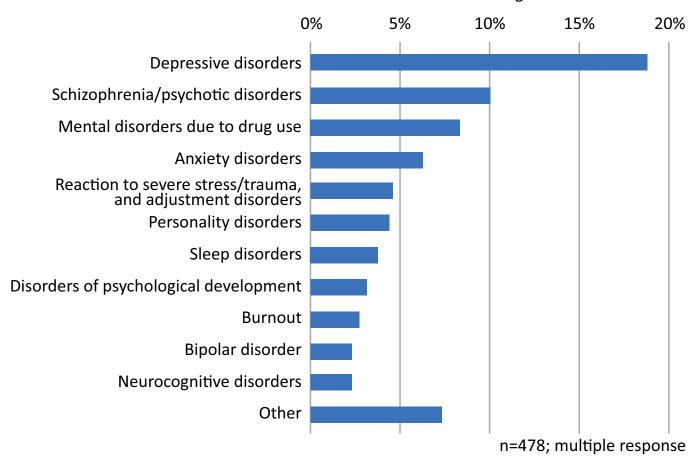


Figure 3: Mentioned mental disorders in all articles dealing with mental illness

However, the public's perception of a focus on burnout is not supported by the results of the content analysis: In articles dealing with mental illness, the most dominant disorders by far are depressive disorders² (n = 90; 19% of all 478 articles covering mental illness), followed by schizophrenia (n = 48; 10% of all articles covering mental illness) and disorders related to drug use (n = 40; 8% of all articles covering mental illness; figure 3). Meanwhile, burnout is only mentioned in 13 articles (3% of all articles covering mental illness).

Attributions of responsibility

Results of the semi-structured interviews with health professionals and providers

and members of the public reveal that their perceptions of the media depiction correspond to the dominantly negative media stereotyping found in previous studies with mental health and disorders predominantly being treated as issues of individual responsibility: "...such portrayal is dominating the media, that it is in the responsibility of every single one of us, how mentally healthy we are." (Health professional/provider, female, aged 42)

Contrary to these perceptions, most articles covering mental illness (n = 412; 86% of all articles covering mental illness) or mental health (n = 69; 74% of all articles covering mental health) don't include any responsibility attribution (figure 4). Only 3% of all articles covering mental illness (n = 15) and 13% of all articles covering mental

² We deliberately asked for burnout separately from depression, since it is usually not perceived as a form of depression in the public discourse.

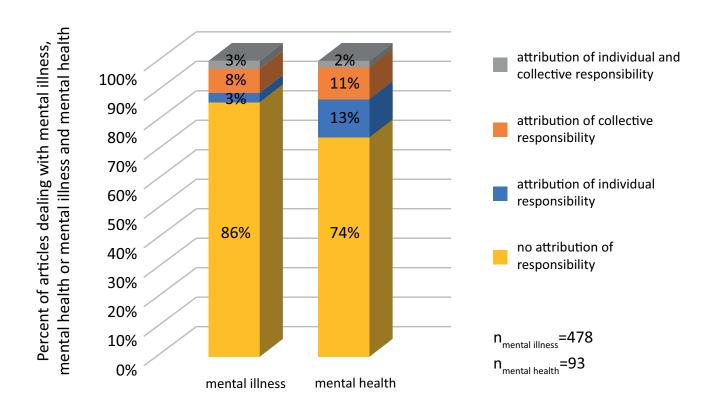


Figure 4: Responsibility attribution for mental health and illness in the media coverage

health (n = 13) treat mental illness or mental health as issues of individual responsibility, while 8% of all articles covering mental illness (n = 39) and 11% of all articles covering mental health (n = 10) attribute responsibility on a collective level and 3% of all articles covering mental illness (n = 12) and 2% of all articles covering mental health (n = 2) deal with mental disorders and mental health as issues of individual as well as collective responsibility.

Suggestions on the lack of scope and quality of coverage

As potential reasons for the lack of media coverage on mental health and a stereotyped way of portraying, one health professional identifies journalists' lack of knowledge about the issue, journalistic routines and the importance of news

factors: "Lack of better knowledge, that's the main point. And the second aspect is: What is interesting? I guess it is more interesting to portray things black-andwhite instead of showing complexity..." (Health professional/provider, male)

Corresponding to existing research results, one health professional notes that the depiction of mental disorders often isn't accurate and differentiated, e.g. the media misrepresent the reality about psychiatric clinics: "My impression is that psychiatric hospitals are portrayed in a false and biased way in movies and other media. This has nothing to do with real-life in these clinics. Watching such movies and seeing people in straightjackets sitting on the floor with a look of vacuity may frame what people think about these clinics." (Health professional/provider, female, aged 29)

Suggestions on the impact of media coverage about mental disorders

Respondents suggest strong effects of the media coverage of mental disorders on society, as well as on people affected and their relatives: "If a person affected by mental disorders (...) hears something like this, it can have a very negative impact – even suicide." (Palatinate public, female, aged 20)

"I think distorted portrayals can lead to fear. In the end, people may think that if someone has schizophrenia, he will automatically be aggressive or that mentally ill people always have a sexual preference disorder." (Health professional/provider, female, aged 29)

They criticise potentially stigmatising effects of inaccurate, negative and stereotyped media portrayals of mental disorders and people affected that could increase self-stigma by making them feel ashamed which may result in delayed help-seeking: "Movies often show very extreme cases no one wants to get in touch with. This can make people think that their own situation is not that bad. Or they just don't want to belong to that group. This makes them avoid dealing with the disorders, seeking help or talking about it." (Health professional/provider, female, aged 29)

Suggestions to improve media portrayals

Both health professionals and members of the public claim for positive examples and success stories of people affected by mental disorders in the media: "The media should show more positive stories." (Palatinate public, male, aged 71). They further demand more background information: "...just more explaining to increase understanding." (Palatinate public, female, aged 24). Media portrayals should further be case-oriented: "...it only works with best practice cases, with concrete projects and locally achieved results. (...) Making things more tangible. Thus, doing good and talking about it, for me, that is the key." (Health professional/provider, male, aged 59)

Discussion

Our results show that the audience's perceptions of media coverage of mental health and mental disorders match existing evidence from previous media analyses: The media environment is perceived as being rather stigmatising and sensationalising, covering mental disorders as an issue of individual responsibility, thereby neglecting social and structural responsibilities. However, our own content analysis can only partly support the audience's perceptions and past results. While data from our study confirm that media coverage focuses on mental illness with an emphasis on crime and violence, while rather neglecting mental health, resilience and prevention, contrary to previous studies, we didn't find a focus on individual responsibility – as in most cases, no responsibility was attributed at all.

Nevertheless – to successfully foster the promotion of mental health in the society – the results clearly underline the need for a frameshift from the prevalent risk-, deficitand problem-oriented perspective to a health- and capacity-oriented perspective. To support the achievement of this goal and use the media as a powerful driving force of social change, some recommendations to the media can be derived from our study: it seems promising to involve audiences by using narratives, especially of recovery and success stories.

Moreover, the quality of the coverage should be improved by providing more accurate, differentiated, balanced and authentic portrayals. Such positive media portrayals may be able to improve public understanding—not only regarding mental disorders and treatment options but also concerning resilience, prevention and protection. To sum up: knowledge about existing media frames and dominant frames in the public can and should be used to guide the development of a media advocacy strategy addressing journalists as gatekeepers (Wallack & Dorfman, 1996).

To shift this thinking, it is also relevant to use a public health approach for professionals, users and policy decision-makers. The future challenges around mental health can only be solved, if societies will focus on community-based strategies in promoting mental health, working together with civic-engaged groups and connecting service providers with the local municipalities (Bomke, 2016; Bhugra et al., 2017).

Limitations and future perspectives

The results must be interpreted under consideration of some limitations: The results regarding the audience's perception is based on data from qualitative interviews. Therefore, they aren't representative, but they still allow an exploration of the existing thinking patterns in society. Even though the respondents of our interviews were from the Palatinate region and the sample for the content analysis consisted of newspapers with the highest outreach in the Palatinate, we cannot test nor assume direct effects of the articles under analysis.

The empirical studies described here are parts of a research programme, in which we develop a theoretically and empirically based framework as a basis of a reframing strategy in the field of mental health promotion (Baumann & Bomke, 2018; Bomke, Baumann & Schwepe, 2016). The aim is to reframe mental health from a pathogenetic (disease- and treatmentrelated) to a salutogenetic (health- and prevention-oriented) approach, that has the power to motivate and engage members of society from different settings and social contexts as advocates to develop new, more productive attitudes and beliefs that have the potential to change culture and policy and improve mental health and social outcomes. Our empirically driven strategic communications process integrates different perspectives. Here, we presented results from the perspectives of health professionals and providers as well as the public and the media, in further research steps, we integrate the perspective of researchers and experts in the field of mental health. mental disorders and resilience as well as relevant organisations in the field.

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