

PHEG – Webinar on stigma related to mental health

Welcome and Introduction

DG SANTE European Commission 10.10.2024

Today's agenda

Item	Speaker
1. Welcome and introduction	Advisor on Stakeholder Relations, European Commission
2. Experience on how to deal with stigma	Mental Health Europe EuroYouthMentalHealth
3. EU support package against stigma	European Commission Chair of the Drafting group on Mental Health European Commission
4. The case of "One of Us" in Denmark	Danish Health Authority
5. A toolkit to support work against stigma	World Health Organization, Regional Office for Europe National Institute of Mental Health (Czechia)
6. Discussion session	Advisor on Stakeholder Relations, European Commission
7. Closing remarks	Advisor on Stakeholder Relations, European Commission





Experience on how to deal with stigma

Mental Health Europe



Equal rights.
Better mental health.
For all.

Breaking Barriers: Understanding Stigma, Discrimination, and the Power of Co-Creation





STIGMA AND DISCRIMINATION

Lack of understanding, negative stereotypes, and misinformation → stigma + discrimination

People with MH problems can be stigmatised and viewed in a negative way because they experience or have experienced mental health issues.

Stigma can be:

- > practiced by others (social or public stigma),
- practiced by the person themselves (self-stigma)
- > entrenched in systems (institutional or structural stigma).

Discrimination in the field of mental health is when people are treated differently because of a mental health issue they experience.





CONSEQUENCES AND THE WAY FORWARD

Prejudices and negative stereotypes \rightarrow marginalisation, unfair treatment, exclusion.

Stigma and discrimination:

Exacerbate mental health challenges	Amplify feelings of shame and isolation
Create barriers to seeking help	Limit opportunities to fully engage in society

Solutions? E.g. change in language; empathic communication and social contact

If we want to achieve mentally healthy communities, we must tackle stigma and discrimination, and we must do it together.





THE POWER OF LANGUAGE



Words can guide the change we want to make

Words

 Make sense of the world

Associations

- Concepts
- Societal movements
- Opinions

Influence

- Feelings
- Attitudes
- Actions



Powerful tool for advocates, politicians, and policy makers to guide thinking.



Mental Health Europe's Glossary

The way we talk about mental health can hurt, discriminate, reinforce negative stereotypes, lead to discrimination, hinder recovery.



Right changes = right words



We are guided by the UN CRPD

UN CRPD: people with disabilities, including people with psychosocial disabilities, must fully enjoy their human rights.

Signed and ratified by the European Union (EU) in 2010 and all the EU Member States.

Since its release large positive impact on the mental health field, moving countries and organizations towards a more human rights-based approach.

Our glossary is written to reflect its principles.

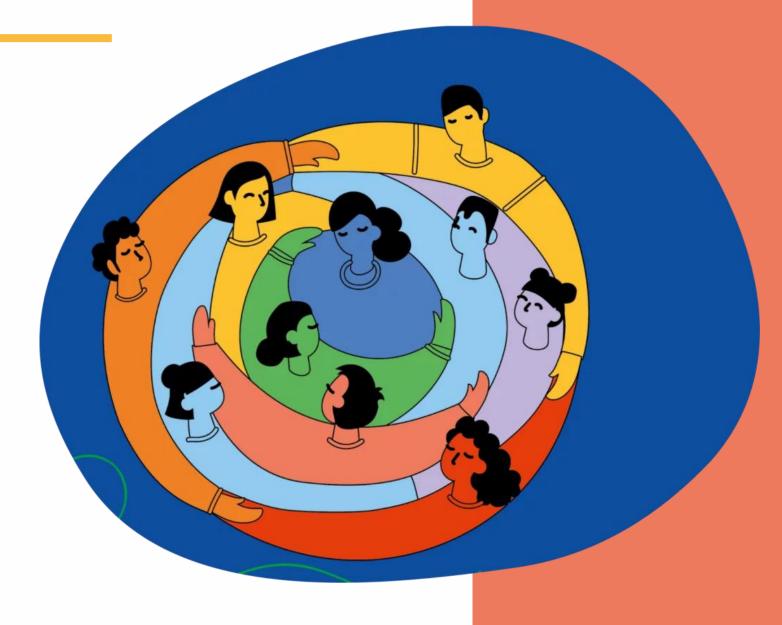


THE KEY IS TOGETHER



CO-CREATION

- ✓ Collaboration
- ✓ All key stakeholders
- ✓ Working together on an equal basis
- ✓ Fostering positive mental health
- ✓ psychosocial model and human rights-based approach





PRINCIPLES

Inclusivity

Equality

Respect

Reciprocity

Power-Sharing

Accessibility

Transparency

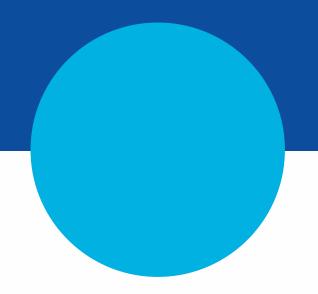








RESOURCES



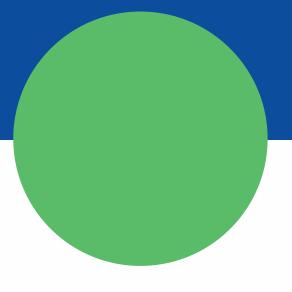


https://www.mentalhealtheurope.org/library/co-creation/



GLOSSARY

https://www.mentalhealtheu rope.org/library/mhereleases-glossary/



HELPLINES

https://www.mentalhealtheurope.org/library/youth-helplines/



thank you.



Equal rights.

Better mental health.

For all.



Young Expert Euro Youth Mental Health's Young Expert Network







EU support package against stigma

European Commission, Unit Disease Prevention and Health Promotion



Stigma and discrimination in the Communication on a comprehensive approach to mental health

Communication on a comprehensive approach to mental health

- 20 flagship initiatives
- EUR 1.23 billion in funding opportunities



Tracking Framework to monitor the implementation.

Flagship 18: Tackling stigma and discrimination.

Set up of the drafting group on stigma and discrimination under the Public Health Expert Group to help prepare and implement the work.

Organise a joint webinar on World Mental Health Day.



Support package against stigma

Overview



A **background paper on stigma**, produced by Member States with input from WHO and Mental Health Europe, that provides guidance on how to address stigma



A **spotlight section on the EU in the WHO toolkit on stigma**, which collects hands-on resources supporting national actions



The 'In this Together' communication campaign, aimed at raising the public profile of the awareness on stigma around anxiety and depression.



A selection of **best and promising practices on stigma**, available at the EU Best Practice Portal



Close collaboration with Joint Actions **PreventNCD** and **MENTOR** which are invited to take elements of the work forward in their work on stigma.



Relevant best and promising practices

Best practices		
Denmark	Act Belong Commit: enhance mental health and wellbeing at individual, community, and societal levels, with a focus on sports communities	
Denmark	One of Us: fighting stigma at work	
Greece	Living and Learning Together : build resilience in school communities and awareness on stigma	
Italy	H-work project: mental health in the workplace, including addressing stigma	
Spain	ACOMPANYA'M: comprehensive plan to take care of children and adolescents who suffer from a complex mental disorder	
Promising practices		
France	Beyond Barriers : innovative mental health care model that empowers patients through diminished stigma and enhanced care	
Spain	BIZI Programme: training tool to develop competencies in suicide prevention within community settings	





PHEG Subgroup – Drafting group on stigma

Co-chair of the PHEG Drafting Group on Stigma and Discrimination



PHEG drafting group on stigma and discrimination

- A Member States' led drafting group on stigma was set up under the Public Health Expert Group (PHEG).
- Co-chaired by Finland and the European Commission.
- It met three times: 29 November 2023, 28 February 2024, and 6 June 2024.
- Around 14 Member States have joined the discussions.
- It agreed on the EU support package on stigma, including a background paper.
- Exchanges and involvement with joint actions between Member States that address stigma, such as the Joint Action on PreventNCD and Joint Action MENTOR.



Member States' background paper on stigma*

A background paper on stigma, produced by national experts and with input from WHO and Mental Health Europe, will provide guidance on how to address stigma. It will be released soon.

Main points of the paper are:

- Tackle discrimination and social exclusion of people with mental health conditions
- Address self-stigma with evidence-based interventions
- Enhance population mental health literacy and resilience
- Promote participation of people with lived experience
- Use positive, respectful and non-derogatory language across all policy areas
- Strengthen mental health advocacy groups and networks for people with lived experience
- Work with media, including social media
- Special attention should be given to intersectional stigma



^{*} drafting under the lead of Czechia



ONE OF US – the Danish anti-stigma programme

Danish Health Authority





ONE OF US - the Danish anti-stigma program



10 October 2024

Senior Adviser and Program Lead



Agenda

- Vision
- Background
- Ambassadors
- Highlights from each of the five target areas
- Successes and challenges





Vision of ONE OF US



To create a better life for all by promoting inclusion and combating discrimination related to mental illness



Organisation of the Danish anti-stigma program ONE OF US



2011-2021: Partnership



2021-: Danish Health Authority → Denmark only country in the world to have an antistigma program integrated in government structure



Organisation and Interventions at both national, regional and local level - **ambassadors** are based at the regional level (psychiatric information units).



Nationwide, we have approximately 175 active ambassadors

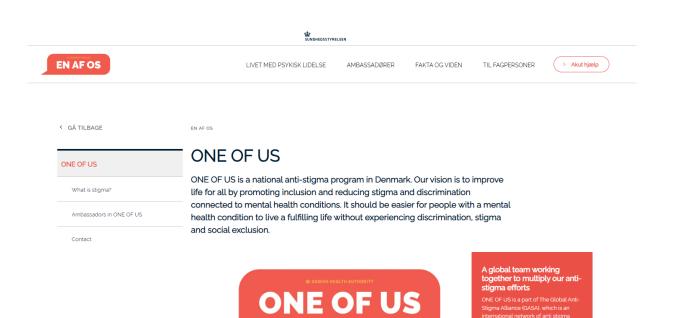


Ambassadors are involved in almost everything we do in ONE OF US and now also in other contexts of the Danish Health Authority's work.





Find us here: sst.dk/en-af-os



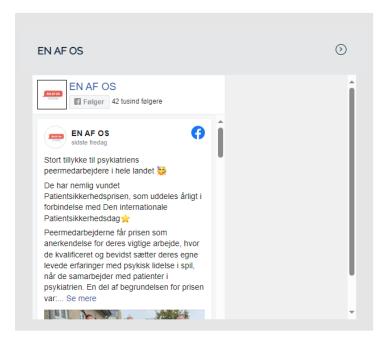
No more doubt, silence and

taboo about mental illness

> Go to The Global Anti-Stigma

Alliance website

Følg med på vores Facebookside





Criteria for ambassadors

- ✓ People with **lived experience of mental illness**. Many with a history of severe mental illness.
- ✓ An ability to **put their personal experience into perspective**. Vital that the ambassadors are well on the way in their recovery process or in a good place in their lives.
- ✓ Support objectives in ONE OF US
- ✓ Motivation for participating in communication training (identifying messages, target groups, structuring presentation, body language etc.)
- ✓ Age: from age 18 an up
- ✓ Being an ambassador promotes recovery and empowerment



T-shirt: Hope is part of recovery



Ambassadors at different levels

- Face to face presentation to different audiences
- Film, tv, printed media, radio, social media
- Workshops and training
- Conferences
- Representation in internal bodies in the health and mental health system
- Scientific research
- Representation in The Danish Health Authority:
 - Working groups, e.g. patient pathways related to psychosis
 - National council monitoring Denmark's 10-year mental health action plan





Highlights from the target areas

Service users and relatives

Discrimination survey Self-stigma toolkit

Professionals in health and social sectors

Tool kit targeted somatic professionals in ER's focusing on selfharm and psychosis - evaluation

The labour market

Toolkit for workplaces

Young people

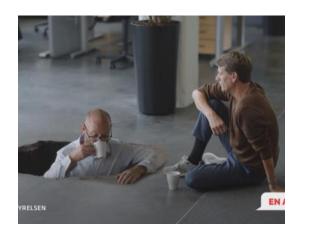
The interactive website Break the Silence

The public and the media

Campaign targeted men
Analysis and guidelines for media coverage - Think Before You
Type











Successes and challenges

- Cultural adaptation of organisation and campaigning is vital
- Important to have **visions and missions**. But plans should allow for **flexibility** and grabbing the moment when opportunities arise
- Social contact/ambassadors has great effect also for recovery
- Communication training of ambassadors important
- **Involvement** of relevant stakeholders takes time, patience and effort but increases quality and ownership
- Identifying relevant **criteria for success** and documentation of long term effect is a challenge





A toolkit to support work against stigma

World Health Organization - Regional Office for Europe

National Institute of Mental Health, Czechia

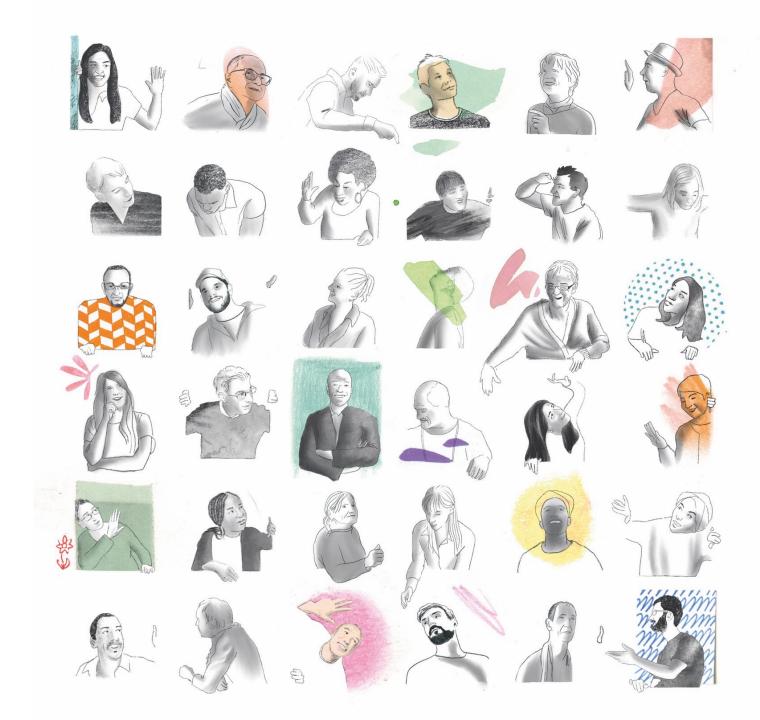


Mosaic toolkit to reduce stigma and discrimination in mental health









ENDING STIGMA AND DISCRIMINATION SAVES LIVES



Stigma and discrimination in mental health are common worldwide

- Experiencing stigma and discrimination can:
 - prevent help-seeking, increase hopelessness
 - make it harder to pursue relationships, education, employment, etc. – "what matters most"
 - lead to decreased life expectancy, increased suicide risk
- In a survey of 391 people with lived experience (1):



said stigma and discrimination had not decreased in past 10 years



said stigma and discrimination were worse than their condition

PURPOSE OF TOOLKIT

To assist in the design and implementation of anti-stigma activities using three evidence-based principles:









is built upon inclusive partnerships

WHO IS THIS TOOLKIT FOR?



"For everyone who wants to be involved in antistigma work. It aims to demystify the process of reducing stigma and discrimination, and to lower barriers to entry for individuals and organizations that have conducted no or few anti-stigma activities so far. Those who have engaged in anti-stigma work in the past may also find it useful, however – for example, to use as a reference when advocating buy-in from stakeholders, and to promote adoption of evidence-based stigma-reduction principles in sectors where such work might not have been conducted before."

OUTLINE OF TOOLKIT



How to use this toolkit

1. The overwhelming case for reducing stigma and discrimination in mental health

2. What to do to reduce stigma and discrimination in mental health

3. Case studies

4. Conclusions

Annexes and Resources

1. THE OVERWHELMING CASE FOR REDUCING STIGMA AND DISCRIMINATION IN MENTAL HEALTH

- What are the types of stigma?
- What are the main principles of stigma reduction?
 - led or co-led by people with lived experience
 - social contact
 - inclusive partnerships



2. WHAT TO DO TO REDUCE STIGMA AND DISCRIMINATION



STEP 1

IDENTIFY AND DEFINE

Explore the problem
Understand the context
Engage partners



REFLECT AND PROCEED

Sustain or expand? Disseminate learning STEP 2

PLAN AND PREPARE

Design intervention
Adapt to the context
Build readiness
Plan for monitoring & evaluation

STEP 3

LAUNCH AND LEARN

Support change process Monitor progress Communicate

3. CASE STUDIES



- 1. Activity by an individual: Ben Ogden, UK
- **2. Activity created by young people:** Facettes Festival, France
- 3. Workplace anti-stigma programme: Bearapy, China
- 4. **Grass-roots activities:** Living Libraries, France
- 5. Scaling up activities: Yellow September, Iceland
- 6. Working with the media: Speak Up, Kenya
- 7.Activities for health-care personnel: READ-MH intervention, Tunisia
- 8. Adapting an anti-stigma activity to another culture: SMART MH project, India
- 9. **National anti-stigma programme**: Na Rovinu, Czechia
- National anti-stigma programme: ONE OF US,
 Denmark
- 11.Structural change through decriminalization of suicide: Taskeen, Pakistan

4. CONCLUSIONS

- keep it simple
- learn as you go along
- share with others
- do what you can with the resources you have
- use the ideas, materials and approaches that make sense in your context
- network and create communities
- you are stronger than you think.

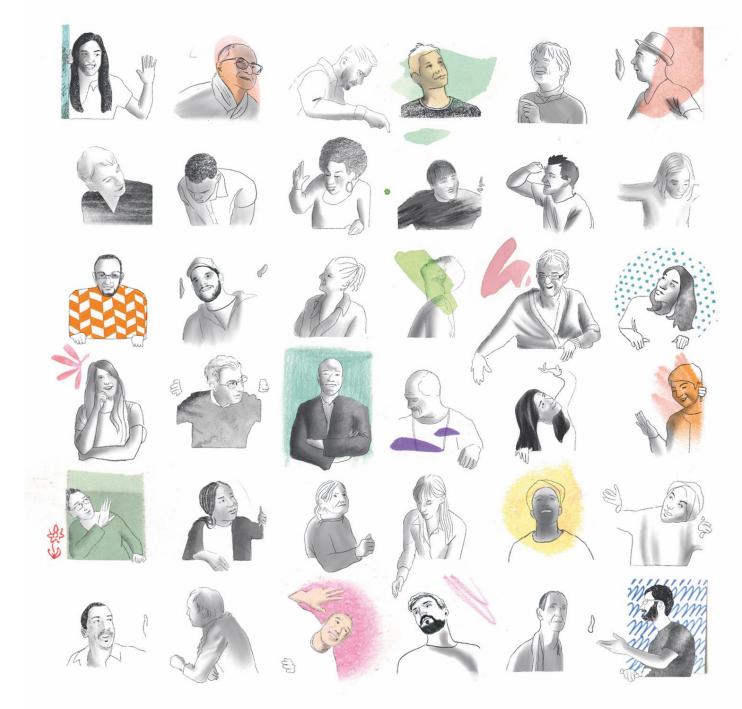


ANNEXES



- 1. Frequently Asked Questions
- 2. Resources and tools
- 3. Rights-based and disability perspectives in mental health
- 4. Common myths and misconceptions about mental health stigma and discrimination and how to tackle them

WHO Mosaic toolkit to end stigma and discrimination in mental health









Discussion session

Discussion session

Multiple choice questions/Rankings

Q: What do you see as the main barriers to reducing mental health stigma?

Q: What kind of actions are needed in your opinion to reduce stigma at a societal level?

- Lack of policies to promote the inclusion of people with mental health issues in the community and in the labour market.
- Lack of campaigns and awareness raising programmes targeting decision-makers, policymakers, employers, healthcare professionals, etc.
- Insufficient commitment to promoting mental health in schools.
- Lack of political will.
- · Other.
- Ensure policies to include mental health.
- Improve access to mental health services.
- Co-created actions, with experts by experience throughout the process.
- Raising awareness on the topic.
- Other.





Closing remarks and next steps



Thank you for your participation!