Using Sport to Reduce Stigma Towards Mental Illness
School of Sport and Exercise Science

UNIVERSITY OF LINCOLN

Background and Study Need

- Around 20% of university students experience a mental health concern each year due to stressors they face as undergraduates (Hill et al., 2018; Auerbach et al., 2016).
- Only 16% receive treatment largely in part due to stigma associated with mental health (Auerbach et al, 2016; Clement et al., 2015).

Stigma associated with mental health
- Three types of stigma towards mental illness exist and are associated with negative help-seeking attitudes and reduced help-seeking behaviours (Pedersen & Paves, 2014; Nam et al., 2013).

Personal Stigma
- 'reflects an individual's attitudes towards those with mental illness (Griffiths et al. 2004)

Perceived Public Stigma
- 'the perceptions of negative stereotypes and prejudices that people hold towards those experiencing or seeking help for mental illness' (Corrigan, 2004).

Self-Stigma
- 'an individual's identification with the group based on internalisation of negative stereotypes and perceptions of public stigma' (Corrigan & Shapiro, 2010).

Intervention types for reducing stigma
Mental health literacy (MHL)
- MHL focuses on educating individuals in areas including knowledge, recognition and attitude related to mental health.
- Among young people, interventions are effective at improving components of MHL, however their effectiveness at reducing stigma and enhancing help-seeking attitudes and behaviours is mixed (Ito-Jaeger et al., 2021).

Contact
- Contact interventions use either face-to-face or recorded contact to reduce majority group members (those without mental illness) prejudice of a minority group (those with mental illness) (Schiappa et al., 2005).
- Limited support for video type contact with further research on long term effects and disorder or population specific interventions required (Jonouskova et al., 2017; Yamaguchi et al., 2011).

Our research and need for this study
- The documentary *A Royal Team Talk: Tackling Mental Health* involves elite football athletes and amateur players discussing their experiences of mental ill health and contains components of MHL and parasocial contact.
- Elite athletes have recently been appraised for speaking out on their mental health difficulties.
- However, no empirical research exists on the influence this might have on stigma among the general population especially young people.
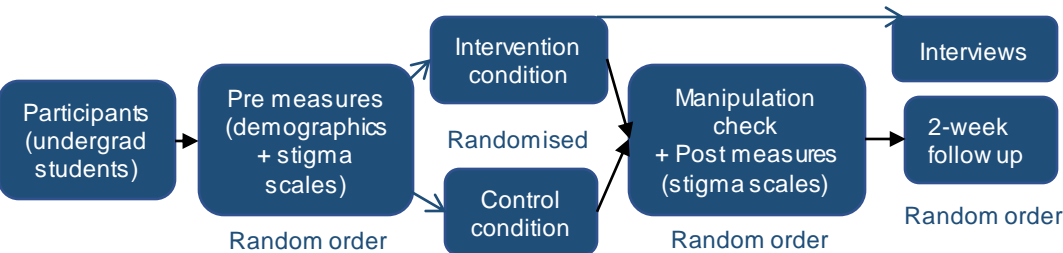
Method

Aims of the study
(1) To assess the effectiveness of a parasocial contact mental health documentary (vs control condition) has on reducing stigma toward mental health from pre to post and follow-up timepoints.
(2) To identify how a parasocial contact intervention influenced participants stigma toward mental illness.

Research Design
- A sequential mixed-method approach was used (quan -> QUAL).
- Three stigma surveys (one for each stigma) were completed at pre, post and follow up timepoints plus a manipulation check post condition.
- Semi-structured interviews were conducted with participants of the intervention group.
- Quantitative data was analysed using multiple two-way repeated measures ANOVAs.
- Qualitative data was analysed using thematic analysis (Braun & Clarke, 2006). To improve the studies rigour, a critical friend was incorporated.

Participants (undergrad students) → Pre measures (demographics + stigma scales) *Random order* → Randomised → Intervention condition / Control condition → Manipulation check + Post measures (stigma scales) *Random order* → Interviews / 2-week follow up *Random order*

Participants and Results

Participants
- 10 undergraduate students from sport related degree programmes (male $n = 7$, female $n = 3$).
  - 10 completed pre and post measures. 8 completed pre, post, and follow-up.

Quantitative Results
- Three separate two-way repeated measures ANOVAs showed no significant interaction of condition*time on any stigma variable for the pre and post data.
- Findings were similar when conducting separate two-way repeated measures ANOVAs on the pre, post, and follow-up time points.

Qualitative Themes
Increased awareness of mental illness prevalence
- Realisation of how common mental health is within society and sport.

How to tackle mental illness
- Identifying ways including talking with others may provide support.

What mental illness looks like
- An increased understanding of how the triggers and symptoms of mental illness can vary.

Self-Stigma — line chart of Means vs time for Intervention and Control conditions
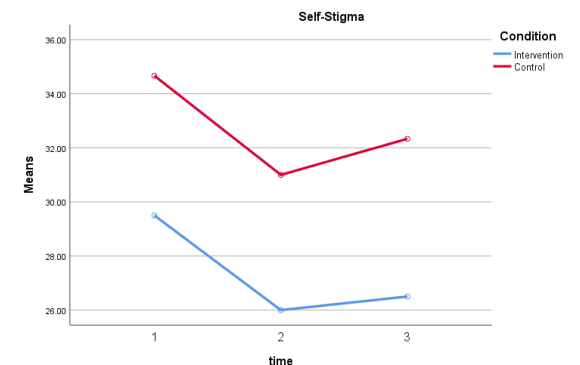
Discussion and Future Directions

Findings
- Quantitative results suggest watching *A Royal Team Talk: Tackling Mental Health* has a similar influence on different stigmas across time as the control condition.
- Qualitative results show participants reported learning information related to mental health (e.g., what mental illness looks like).
  - "The problems of mental health are so widespread. And it is not just one event, or it's not one disorder...it can be triggered at any point."
  - This may be interpreted as a better understanding of MHL.

Limitations and Future Directions
- The small sample size limits the statistical power of the quantitative analysis.
  - Participant recruitment will continue until the desired sample of 28 is achieved.
- Participant attrition was also a problem as some participants dropped out before completing the follow-up measures.
- Future studies could investigate how documentaries like the one used in this research influence MHL.

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