

# Mental health research in the media: recommendations for a new function at the Science Media Centre

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## **Introduction: Mental health and the Science Media Centre**

The Science Media Centre (SMC) is an independent press office set up specifically to deal with the more controversial science stories that hit the headlines. Established in 2002 in the wake of science stories like GM Crops and MMR, the SMC has been a major success story helping scientists to get their voices heard on breaking news stories, running almost 100 press conferences a year and being used routinely by every major news organisation in the UK.

The centre has always reacted to media controversies around the science of mental health and run briefings on new research on controversial issues ranging from cannabis and schizophrenia to post-traumatic stress disorder and risks of anti-depressants. We have some of the UK's top mental health researchers on our database. However, our collaboration with Prof Til Wykes of the Institute of Psychiatry and the coalition organized around the Mental Health Declaration launched towards the end of 2009 demonstrated that there is potential for the SMC to do considerably more in this area if we were able to expand the SMC team to accommodate another person. This coincided with a powerful editorial in *Nature*<sup>1</sup> suggesting that, when it comes to profile, mental health issues are still a poor relation to other medical research such as cancer.

The concept of recruiting an additional press officer at the SMC who would focus on increasing our media work in this area is built on the success of a similar collaboration with the engineering community; with funding from a number of engineering bodies we were able to recruit a press officer to take a lead on this issue and have dramatically increased the number of engineers on the database and the number of engineering briefings as a result.

Til Wykes led fundraising for the new press officer. She secured funding for the position from Charlie Waller Memorial Trust, Rethink, Medical Research Council, Mental Health Foundation, Mental Health Research Network, Scottish Mental Health Network, Mental Health Research Network Wales, South London and Maudsley Charitable Funds and the Wellcome Trust. I (Claire Bithell, see biography in Appendix 2) joined the SMC as Head of Mental Health at the end of May 2010.

To ensure resources were used as effectively as possible I embarked on a series of meetings with experts (mainly press officers, academics, clinicians and journalists) in the field from June-August 2010. Although it was not clear at the outset whether the outcome would form a consultation report, the findings from these meetings have been informative and a clear remit for the role has arisen. This report summarises the conclusions of the meetings held so far and information taken from articles, papers and reports in the area. It is not intended to be an exhaustive exploration of mental health research and the UK media. Instead it aims, within limitations of time and resources,

to decide on activities for the SMC to engage with over the coming year. It is also important to note that this report is still a working document and we will continue to take on board the views of those in the community and respond to demands of key stakeholders as the need arises.

## **PART 1: Mental health, research and the media**

### **Media coverage of mental health problems tends to be negative**

A universal theme from meetings held and analyses of media coverage is that media coverage around mental health is often negative in tone. This is largely due to the type of media story covered, with a large proportion of coverage focussing on crimes committed by those with mental health problems. This type of media reporting has often been criticised as helping perpetuate a stigma around mental illness. Key analyses in this area find that:

- Mental health coverage tends to focus on criminal or violent acts and mental health service provision<sup>2,3</sup>
- Psychiatry receives less coverage than general medicine, and the coverage it does receive is four times as likely to be negatively framed<sup>4</sup>
- Media coverage tends to link severe mental illness and violence<sup>2,3</sup>
- Coverage of services for those with mental health problems tends to be negative in tone, whereas coverage of mental health treatments tends to be more positive<sup>2,3</sup>
- Audiences tend to take messages about mental illness from the media they favour more or less at face value<sup>2</sup>
- Coverage of mental health in the UK is more negative in tone than in Australia or the US<sup>5</sup>

*“We get called on to respond mainly to two types of stories; either surveys, research or reports on mental health carried out by big charities or when someone with mental health problem commits a crime.”*

Judith Moore, Mental Health lead in the Department of Health press office

*77% of adults state that the media does not do a good job in educating people about mental illness and 76% say that the media does not do a good job in de-stigmatising mental illness.*

Priory Group report (2007) Crying Shame<sup>7</sup>

Despite this apparently bleak picture, there has been, and continues to be, a concerted effort by a number of bodies to improve coverage, particularly stories about crime, violence and suicide and this work has yielded positive results. Bodies such as SHIFT, mental health charities, the Time to Change Coalition and the Press Complaints Commission have worked hard to improve the media coverage of mental health. They have often focussed on helping media improve the language used in reporting (to try to rule out the

use of terms such as psychosis, schizophrenia and bipolarity and to ensure reporting of suicide does not result in copy-cat cases. This work has led to guidelines for mental health reporting being developed.<sup>9,10</sup>

*"We have made some real progress, work by SHIFT and others has led to The Sun agreeing not to use the word 'schizo' and now a resolution by the Press Complaints Commission about the term. This decision draws a line in the sand for other journalists - 'schizo' is no longer acceptable language to use about people with schizophrenia."*

Robert Westhead, Project Manager, SHIFT

There was also a view that the news media tends to be more negative in its portrayal than other outlets. Examples of positive media coverage described in meetings included TV and radio documentaries, the feature pages of newspapers and women's magazines. The SMC has often found that news journalists, with their short deadlines and requirement to cover a number of stories each day, welcome expert comment on complex and emotive health and science stories that may also have an ethical or political dimension. Mental health appears to fit in this category and so it would be best to place our efforts working with news journalists. The main role of the SMC is to work with news journalists, so this recommendation is a good fit with the other roles the SMC carries out.

Much of the work in this area is aimed at long-term improvement by producing guidelines and engaging with journalists and editors to help change the tone of coverage. There does not appear to have been the same focus on dealing with short-term support, such as supporting individual news journalists when they are under pressure to file a story on deadline. The SMC has a great deal of expertise in providing news media with expert comment in rapid response to controversial headline stories. Therefore, a supporting role that the SMC could play to improve coverage of mental health in the media is to provide experts for comment on breaking news stories, including those about crime or violence. The SMC will put experts up for interview on stories that focus on individual cases of mental illness; we would also help experts be assertive about aspects of a story that they are unable to comment on (for example, experts would be expected to follow Royal College of Psychiatrists guidelines and not offer professional opinions on specific cases). More information about this role and the challenges involved in this are covered in Part 3 of this report.

### ***Conclusion 1: the SMC will mainly focus its efforts working with news journalists***

#### **Mental health research does not generate much media coverage**

It was striking that almost everyone I spoke to felt there was not enough mental health research in the media. I could only find one study that quantified the amount of mental health research that had appeared in the media.<sup>5</sup> The study, published in January 2010, evaluated BBC coverage of

mental health research and neuroscience from 1999 until 2008 and found that:

- Over the time period surveyed the amount of coverage of mental health research slowly increased
- Alzheimer's disease is relatively over-reported, while depression, together with alcoholism, is under-reported
- Comments within the text of the articles were most often from the two Alzheimer's disease charities and from the Institute of Psychiatry

The study suggests that coverage of mental health research in areas other than Alzheimer's disease is under-reported. As the BBC has more resources and a wider audience than most other outlets, it is possible that other outlets cover even less mental health research.

*"The media likes stories on Alzheimer's or populist topics like psychopaths but other areas are harder to pitch - particularly if they cannot be summarised in a soundbite."*

Louise Pratt, Acting Public Relations and Communications Manager, Institute of Psychiatry, King's College London

*"I'm afraid I think one of the main reasons mental health doesn't get much coverage is that it's not thought of on the whole as a sexy subject."*

Sarah Boseley, Health Editor, Guardian

Many people speculated that part of the reason mental health research does not have a higher profile is that there has not been an organisation that has focussed specifically on publicising this area. In particular, people pointed to a lack of a charity funding large amounts of research compared with other fields (e.g. British Heart Foundation or Cancer Research UK).

*"When I moved from the field of cancer to mental health, I was very surprised to find that there was no big research charity in the field. When I was a cancer researcher, our funders were always keen to publicise our latest research findings. I suspect this has not been the case for mental health research."*

Prof Clair Chilvers, Trustee, Mental Health Research UK

*"At the moment there is no mental health charity that funds large amounts of research, maybe this is why the stories aren't out there?"*

Prof Til Wykes, Professor of Clinical Psychology and Rehabilitation, Institute of Psychiatry

Journalists were keen to cover more mental health research stories, but also cautioned that there had to be interesting issues and a good story behind the research.

*“I would like to cover more mental health research - if the stories are there. Mental health is a hugely important and under-reported area - but it is a hard sell.”*

Jeremy Laurence, Health Editor, Independent

*“Would I like to cover more mental health research stories? Well yes - where there is an issue. By that I mean stories like the prison population being dominated by mental health conditions or the failure to provide help for all kinds of addicts.”*

Sarah Boseley, Health Editor, Guardian

If mental health research is going to be promoted to the media it would require careful selection of appropriate stories. Some of the journalists I spoke to pointed out that this is something that happens for Alzheimer's disease because the charities are very proactive in this field.

*“Alzheimer's disease charities do a good job with media work. They scour the journals for interesting papers and flag up the big stories to journalists. The interesting research in other areas of mental health is not always flagged up to journalists and we also may not know about topical debates in the area.”*

Clive Cookson, Science Editor, Financial Times

Other reasons that mental research may not have a higher profile are covered in Part 3.

***Conclusion 2: the SMC should concentrate proactive media work on mental health research***

## **PART 2: Why focus on mental health research?**

**Publicising research offers an opportunity to present a better informed narrative about mental health in the media**

Almost everyone I spoke to felt that coverage of research could give a better informed mental health narrative than currently exists in the media. Many were envious of the way that cancer has changed from something that largely misunderstood and feared in the past, to now being associated with much greater public understanding and a media narrative around surviving, research and treatment.

*“Cancer charities have changed the way people view cancer – media coverage is positive and focuses on fighting cancer, cutting edge research and breakthroughs. We want that for mental health.”*

Prof Til Wykes, Professor of Clinical Psychology and Rehabilitation, Institute of Psychiatry

*“One might conclude that conferences and research publications could be utilised more proactively to promote positive views of mental health care and to increase the general public’s awareness of psychiatry.”*  
Psychiatric Bulletin 2003<sup>5</sup>

Others felt that improving understanding of biological mechanisms involved in mental illness may indirectly reduce stigma relating to mental health.

*“In society we have often seen illnesses that are perceived as incurable being stigmatised, examples include cancer, epilepsy, leprosy and tuberculosis. What is interesting is that when the public has begun to understand these illnesses can be treated, the stigma falls away. It is possible that the same will happen for mental illness when the public understand there is a biological cause and possible treatments.”*

*“Years ago pointing to biological mechanisms of mental illness may have made a person feel different or stigmatised, as if they were somehow a weaker person. Now we are more comfortable in understanding there is a biological mechanism behind diseases, as in heart disease and cancer.”*  
Louis Appleby, Professor of Psychiatry at the University of Manchester and former National Director for Mental Health

Others urged caution about presenting an overly positive narrative, especially for severe mental illness, as this may not be realistic and may raise false hopes.

*“It would be naive to think that just knowing more means the public would have a better image of mental health – things are much more complicated than that and mental health disorders are often unpleasant, complicated and unpredictable.”*  
Prof Simon Wessely, Chair of Psychological Medicine, Institute of Psychiatry

Almost every journalist I spoke to during the period (both those included in Appendix 1 and those that I came into contact informally through media enquiries and SMC press briefings) were keen to cover more mental health research stories, including correspondents from the BBC, Sun, Mirror, Daily Telegraph, Daily Mail, Independent and Guardian. Although there may be some barriers to overcome (discussed further in Part 3) it is a clear outcome of this report that the SMC can do much to promote mental health research in the media. SMC press briefings are now popular with all UK news outlets; last year the centre ran 80 press briefings, each with an average of 10 national news journalists in attendance. The SMC should help launch important and topical mental health research in the UK national media.

### ***Conclusion 3: the SMC finds opportunities to run press briefings on mental health research for the national news media***

Many press officers I spoke to during the period were excited about the new function for mental health research at the SMC. They were already seeking opportunities to proactively promote mental health research and expertly

pitching stories to the media. However, many commented that being able to tap into SMC services, for example by putting an expert on an SMC press release or using the centre to launch a story, would be helpful. Most press officers I spoke to had lots of ideas for future stories and interesting research papers coming up. Many felt they would value more time talking to press officers from other organisations to help learn from each other and also to maximise opportunities.

***Conclusion 4: the SMC sets up a mental health research network to help share information and maximise opportunities***

**It is an exciting time for mental health research**

One universal theme of all meetings was enthusiasm and excitement about the future of mental health research. The recent MRC Review of Mental Health Research: Report of the Strategic Review Group 2010<sup>11</sup>, highlighted the mismatch between the investment in mental health research in relation to the social and economic burdens of mental health diseases. The review suggests ways to address the mismatch and suggested the UK's strategic ambitions in the area of mental health research should be to:

1. prevent mental disorder and disability and promote wellbeing, based on better understanding of causes, risk levels and new approaches to early preventive interventions;
2. accelerate research and development aimed at providing new, more effective treatments for mental illness, and implement them more rapidly.

This is likely to translate into greater funding in mental health research and to a greater research output.

*“We are seeing increased commitment to spending on mental health research, and the MRC Strategy Review leads the way for UK researchers to make a real impact on our biological understanding of mental illness.”*

Prof Chris Kennard, Professor of Clinical Neurology, Oxford University

*“Poor mental health is associated with high health burden and economic cost. We need to understand why we have a propensity for mental illness to affect 1 in 5 of us at some point in our lives and to be able to deal with it effectively or better still, prevent it in the first place. The recent review of Mental Health Research led by MRC, documented the exciting opportunities for the UK to accelerate progress towards prevention and treatment. MRC's commitment to targeted funding of mental health research will increase research capacity and capability to deliver innovation. By supporting training and experimental medicine, we should also see the brokerage of new partnerships between the public and private sectors that will speed up the translation of potential treatments discovered in the laboratory to pharma and the health service to provide health and economic benefit to the UK.”*

Gavin Malloch, Programme manager for mental health and addiction, Medical Research Council

*“It is just the right time for you to start this job, we are starting to realise the importance of mental health research and the future looks exciting. There is also a growing sense from the academic community that we need to be engaging the public more.”*

Prof Nick Craddock, Professor of Psychiatry, Cardiff University

Though almost all people were excited about the future, some cautioned against overselling the findings of this research. Many felt that there were many hurdles to be overcome and that much of the research is at a very basic stage.

*“There are great things happening in psychiatry but we must be careful not to overhype. For example, the applications of brain scanning have sometimes been over exaggerated.”*

Simon Wessely, Chair of Psychological Medicine, Institute of Psychiatry

### **Coverage around mental health research will help raise awareness of basic facts about mental illness**

There was also a view that research stories could provide a vehicle to give the public a greater understanding of mental health problems. This fits with the philosophy of the SMC; that launching and responding to breaking news stories are opportunities to give key information to the media on important issues. Mental health research stories in the media are likely to require relevant background information about mental health problems including prevalence, symptoms, biological mechanism and background information about treatments. There is also likely to be increased demand for comments from those who have experienced mental health problems and charities.

Many people felt that mental health research stories would be a good opportunity to get key messages across to the public; e.g. that most people with mental health problems fully recover and go on to live healthy and productive lives. Many felt that getting this message across could help reduce discrimination and stigma as well as encourage those who think they might have a mental health problem to seek medical help.

*“There are more general benefits to discussing research into mental health. Such research helps stimulate debate about, and understanding of, mental health problems and their causes. A clearer understanding of genetic factors provides a challenge to produce a clearer understanding of nongenetic factors as well.*

*“While successful treatment remains elusive, direct benefits of new genetic research for people with mental health problems will be scarce. However, there may be indirect benefits. The possibility of treatment and recovery will sustain hope, both for those with mental health problems and for healthcare providers. Furthermore, prominent discussion could help to reduce the stigma associated with mental health problems.”*

Fenno Outen, Head Occupational Therapist for Newham at East London NHS Foundation Trust<sup>8</sup>

## **PART 3: Challenges for communicating mental health research and roles for the SMC**

### **Editors may not realise that mental health research is relevant to their audience**

Stigma and lack of awareness about mental health problems is likely to have a knock-on effect to the way mental health research is reported. Between August and September 2010 I spoke to a number of national news journalists formally (those detailed in Appendix 1) and informally (those I have come into contact with during media enquiries and press briefings) about the new function at the SMC. Although most journalists I have spoken to said that they were keen to cover more mental health research, a couple also warned that their editors were subject to the same preconceptions as the general public and did not perceive that mental health problems would affect their audience. This perception of mental health problems may have contributed to media missing research stories that they would have covered if they related to other areas of health. This view may also prevent future efforts to get coverage of mental health research. One journalist even suggested running a press briefing to explain that middle class people get mental illness too to help their outlet cover more stories.

*“People assume that those with problems with mental health ‘aren’t them’, when the reality is everyone will know someone and it is not unlikely they will experience problems themselves at some point.”*

Prof Til Wykes, Professor of Clinical Psychology and Rehabilitation, Institute of Psychiatry

*“It isn’t surprising that the media doesn’t give prominence to mental health research – most people still believe mental health disorders are very rare. When people start to understand that 1 in 4 people will experience some kind of mental health problem in the course of a year journalists will realise mental health research is relevant to their audience.”*

Jane Harris, Deputy Director of External Affairs, Rethink

### **Conclusion 5: the SMC helps journalists/editors appreciate the relevance of mental health research to their audience by providing information on prevalence and impacts of disorders**

#### **Mental health research can be difficult to communicate to the media**

Almost everyone I met spoke of the difficulties in communicating mental health research, and broader issues relating to mental health, to the media. One of the main reasons cited was the complexity of the area and the fact there are few simple messages to communicate. Others talked of diversity of opinion that could appear as conflict in the media, whereas some were concerned they would be put up for interview against patient groups or

people that believe that psychiatry or mental health treatments are fundamentally damaging. Most people who held these views felt that this type of media coverage could be bad for the image of mental health research or psychiatry.

However, many people also cited the complexity and nuance in mental health research as being one of the things that drew them to the area. They explained that this was something that made the field exciting and a fertile ground for debate. The SMC has seen that areas that are complex and cause debate translate into interesting media stories. In addition, when health or science news journalists become interested in an area that is being debated in academic and medical communities they tend to read around the area and develop great expertise.

*“It is surprising how little we know about biological mechanisms that underpin mental illness. One of the main reasons for this is that it is so difficult to define and categorise mental illness, but it is exactly these complexities that makes the field so fascinating.”*

Dr Clare MacKay, Senior Research Fellow, University of Oxford

*“Mental health is complex, nuanced and there are ethical, societal and sociological components. However, there are analogies to other complex areas of research that have been portrayed accurately in the media e.g. stem cells or fertility.”*

John Williams, Head of Department, Neuroscience and Mental Health, Wellcome Trust

Another difficulty is that the public and journalists are more likely to hold strong views about mental health than other areas of health or medicine. Some experts speaking to media got the impression that journalists' personal views about mental illness made it more difficult to engage with them. Some researchers described feeling almost envious of those with specialities like particle physics or molecular biology where the public or news journalists are unlikely to have strong preconceptions.

*“In most areas people know what they don't know. For example, molecular biology is a hugely complex area and not many people would profess to have expertise. It is different in the field I work in, crime and mental health, everyone thinks they know about this area and people often seem to imply there is no sound science to draw on. As a result I have a harder job to communicate my work.”*

Prof James McGuire, Professor of Forensic Clinical Psychology, University of Liverpool

Some journalists I spoke to felt that those in the mental health community did not always have realistic expectations of the way the media works. In particular, they felt it wasn't widely understood that headlines are always catchy and pick up on the most interesting part of the article. One journalist said:

*“We are happy to cover mental health stories, but people have to realise that it is the most sensational part of the story that will make the headline. As a newspaper, it is our job to pick out the most interesting bits and an eye-catching headline will make people more likely to read the article. Once you get past the headline you will see the copy is accurate and we try our very best to get things right.”*

The SMC has extensive expertise in supporting scientists and clinicians working on complex and conflicted issues to help them communicate their area to the media. This could range from working with individual experts on particular stories to running an Introduction to the News Media day for mental health researchers to help improve their media skills.

***Conclusion 6: the SMC gives support and advice to mental health researchers to help them communicate complex issues to the media***

### **Psychiatry is often misunderstood by those outside the field**

A striking theme of many of the meetings is that there are problems with the perception of psychiatry from those outside of the field. In the meetings there was the concern that outdated stereotypes (such as the book and film *One Flew Over the Cuckoo's Nest*) had led to a wider view that psychiatrists mess with people's minds. Alternatively others view psychiatry as being to do with keeping the population mentally healthy. Many felt the nature of psychiatry, as a valuable field of medicine to treat those with severe mental illness, was not widely appreciated by the public or even those in other fields of medicine. Others described psychiatry as having wider problems with its identity and pointed to problems with recruitment into the profession as signifying a loss of confidence.

*“British psychiatry faces an identity crisis.”*  
The British Journal of Psychiatry (2008)<sup>12</sup>

*“Many people do not understand what psychiatry is, they think it is about the wellbeing agenda. Psychiatry is about a disordered brain, about individuals who have in many cases a serious chronic disease and is part of medicine.”*  
John Williams, Head of Department, Neuroscience and Mental Health, Wellcome Trust

*“Psychiatry is a part of medicine and we need people to perceive it as such. There is a fundamental misunderstanding about what we do e.g. primary prevention in mental health is not what we do – people come to us when they are ill.”*  
Prof Simon Wessely, Chair of Psychological Medicine, Institute of Psychiatry

It was of concern to some that a negative view of psychiatric medicine may discourage those with mental health problems from seeking help. Almost everyone who was concerned about the reputation of psychiatry also felt that

something needed to be done to improve the situation, and that the media was one way to improve things. Therefore, one of the things that the SMC could do is help psychiatrists communicate with the media. A by-product of this is likely to be better insight into the role of psychiatry in the news media.

***Conclusion 7: the SMC helps put the case for psychiatrists using the media as a way to improve understanding of their work***

### **Psychiatry and clinical psychology are different in their approaches and view mental illness in different ways**

The meetings I held highlighted the different views of mental illness held by psychiatrists and psychologists. This is unsurprising given the differences in the two disciplines; psychiatrists are medically trained to treat people with mental illness (often severe mental illness), while psychology is the scientific study of the human mind and behaviour, and psychologists tend not to have a medical background.

The different approaches the two disciplines take may be the reason that their views of the nature of mental illness, its treatments, causes and prevention tend to be quite different. Interestingly, many psychiatrists felt that a psychological or social approach (rather than a medical approach) tended to be given undue publicity, whereas psychologists often felt that a medical approach was the dominant view given in the media.

The SMC works with a wide range of experts in all fields of science, engineering and health. The SMC does not have position statements and so the different viewpoints of the groups can co-exist with our work and we will work with both disciplines to help inform debate. The SMC takes an evidence-based approach and we place considerable weight on peer reviewed research published in credible scientific or medical journals.

### **There are not enough mental health research spokespeople in the media**

Many people felt that there were not enough experts who know about mental health research speaking in the media. People tended to cite one or two people who do a large amount of media work, while the majority of people do not engage. Meanwhile journalists I spoke to during the period said that they would really benefit from more spokespeople to speak with. One national news journalist remarked:

*“I cannot name an expert in psychiatry or mental health research off the top of my head, but I could give you a long list of experts on stem cells or cardiology.”*

*“Compared to areas such as stem cells and genetics there are very few media spokespeople for psychiatry.”*

Prof Simon Wessely, Chair of Psychological Medicine, Institute of Psychiatry

Many of the University press officers who got in touch in response to an SMC introductory email said they did not know their mental health researchers/psychiatry/psychology department as well as experts in other areas. Some suggested this is because they get so few enquiries in the area of mental health which meant they hadn't had chance to build a good relationship with these experts. However, almost all University press officers were excited about the opportunities in this area and many invited the SMC to meet their experts and saw the new SMC role to be an opportunity for them to build closer relationships.

There were a number of other reasons cited why an expert may not have engaged with the media. Many experts felt angry about the negative tone of mental health media coverage, in particular severe mental illness and crime or violence. For some, this had led to concern about the way their research would be interpreted by journalists. Although no one gave this as a reason that they had not engaged with the media, it is clear that for some it contributed to them taking a more cautious approach to dealing with journalists. It was also clear that experts felt this might put others off engaging.

Stigma may also have an impact on the readiness of the academic community to talk about their work in the media. In the meetings many talked of the reluctance of researchers and clinicians to be frank about the causes of mental health illness and historically the tendency to avoid talking about biological causes or the brain. One person I spoke to (who said they would rather not be attributed) said:

*“Put crudely, psychiatry is the only profession where people are embarrassed to talk about the organ involved.”*

The SMC has got a good track record of encouraging experts to engage effectively with the media. We have a database of over 2000 science, health and engineering experts, but do not currently have a large number of mental health researchers or experts. An important aim, therefore, is to strengthen the SMC database in key areas relating to mental health and mental health research. I will do this by working with press officers in the field as well as recruiting experts in response to media enquiries we receive. This will help us run press briefings on topical issues as well as respond to breaking news stories.

While a number of different groups of people already speak about mental health in the media, including service-users, politicians and charity spokespeople, the SMC will concentrate its efforts in helping psychiatrists, psychologists and mental health researchers to engage with the media. Promoting the views of these experts was a clear outcome from meetings held. This is also in line with SMC policy in all other areas of science.

It is important to note that the Royal College of Psychiatrists has a database of over 150 experts who can speak to the media. The British Psychological Society and other organisations also have expert databases. However, given the media's appetite for more spokespeople, strengthening the SMC database will help meet demand.

A few journalists and press officers talked about their difficulty finding experts to engage with controversial issues hitting the headlines. They spoke of fewer people willing to engage with media issues such as crime, suicide or violence or those that had a complex political or ethical dimension. The SMC has a track record of recruiting experts to its media database on topical issues and considerable experience and expertise helping them speak to the media. The SMC should therefore prioritise recruitment of experts working in high-profile fields that attract controversy.

*"I don't struggle to find experts to talk to on mental health issues, but like any journalist I would say that we need more experts who are able to speak out on controversial issues."*

Sarah Boseley, Health Editor, Guardian

***Conclusion 8: the SMC encourages more mental health researchers, psychiatrists and psychologists to become media spokespeople. It also strengthens its database to include more experts in key areas***

### **It can be difficult to respond to breaking news stories in the area of mental health**

Breaking news stories about mental health often focus on controversial areas and experts quoted may not necessarily be the best qualified to comment. Initiatives to tackle this type of coverage tend to be focussed on longer-term editorial improvements instead of providing experts for the media to interview. Many people were concerned about engaging with breaking news stories as they are often centred on individual cases. Many bodies, including the Royal College of Psychiatrists and Institute of Psychiatry highlighted the dangers for mental health experts of being drawn into discussion about individual cases in the media. The Royal College of Psychiatrists have guidelines<sup>13</sup> in this area that state:

*"On occasion psychiatrists are asked for an opinion about an individual who is in the light of public attention or who has disclosed information about himself/herself through public media. In such circumstances, a psychiatrist may share with the public his or her expertise about psychiatric issues in general. However, it is unethical for a psychiatrist to offer a professional opinion unless he or she has conducted an examination and has been granted proper authorization for such a statement."*

Most people felt it was important to engage with the media on breaking news stories to give generic information without allowing themselves to be drawn to comment on any particular case in question. The SMC champions this

approach and has considerable experience advising scientists/clinicians on how to deal with the media in these situations. We have seen how experts can dramatically influence the media coverage by engaging, and can also use a breaking news story to get more accurate, evidence-based information into the media about mental health issues.

In 2005 a major study of media coverage around mental illness<sup>2</sup> concluded: *“Broadcast producers were also frequently frustrated about being unable to secure the right balance of guests and interviewees: one reported difficulty getting a Department of Health spokesperson on a discussion panel, as a result of which the panel was not as balanced as they had hoped. Feature writers and those putting more feature-style pieces together were more likely to contact mental health organisations, as they would generally have more time to research and to cultivate on-going relations, where as news production was limited in time and length.”*

For many news journalists getting comment on stories in a timely way was the most important thing. Often there is little warning for stories that break in the news media and journalists were keen to have access to experts and to get the comment quickly. The SMC specialises in providing news media access to expert comment within very tight deadlines. This service is supported by a database of over 800 press officers and 2000 experts. The ability to issue quick responses is also helped by the fact the SMC does not have a position on any of the issues for which it provides experts, widening the pool of people available to comment.

*“It is easy to get instant comment for stories about Alzheimer’s disease. For other areas, say depression or anxiety, it can be more difficult to get expert reaction.”*

Clive Cookson, Science Editor, Financial Times

*“I could always do with more experts. The key thing though is to find experts who are willing to answer their mobile and respond to queries - they are few and far between.”*

Jeremy Laurence, Health Editor, Independent

Therefore, the SMC should prioritise ensuring that the media have access to experts when they are working to short deadlines. This will involve strengthening the database but also supporting and advising mental health researchers to ensure they feel confident enough to speak out in the media.

It is also worth noting that the SMC takes the view that stories in the headlines, even if they are negative or inaccurate, present an important opportunity to engage with the media and we have built up expertise in seizing opportunities as they are presented. This approach has worked well when working on complex and controversial areas of science, engineering and health and there is every indication this approach would also work for mental health research.

*“The SMC sees science in the headlines as an opportunity rather than a threat. While many have noted that science and news are a poor fit, the centre works to ensure that scientists exploit the opportunities provided by science in the headlines to engage the public when they are most interested in and concerned about science.”*

Fiona Fox, Director of the Science Media Centre

***Conclusion 9: the SMC supports and advises experts to help them engage with breaking news stories about mental health in a timely way and to use headline stories as an opportunity to get important messages across***

**To cover mental health research, journalists need access to case studies of people who have experience of mental health problems**

Many journalists spoke of the importance of case studies to help them get mental health stories into the news. In addition, charities all agreed that it was essential to get the voices of service-users into the media to give the public a better understanding of mental health problems. SHIFT, Mind, Rethink and the Mental Health Foundation already have databases of service-users who are able to do media interviews. Mental health researchers may also be able to provide case studies of people that they have worked with. Therefore, in preparation for promoting stories to the media, the SMC should engage with other organisations to ensure case studies are provided where appropriate.

*“The stigma associated with mental health disorders is a major problem to overcome, despite 16% of adults in Britain suffering from a common mental health problem. People generally do not seek help early enough, nor do most celebrities discuss their substance abuse problems or depression with the media. It is important for others who may be suffering that people speak to the media frankly about what it is like to have a mental health problem, including what symptoms to look out for, and most importantly to discuss what helped them to get better.”*

Barbara Sahakian, Professor of Clinical Neuropsychology, University of Cambridge

*“It is essential that service-users feature in media coverage to give the public a better understanding of mental health problems.”*

Alison Kerry, Head of Press, MIND

***Conclusion 10: the SMC works to give journalists access to interviews with service-users through other organisations***

## Summary

This report identifies a clear remit for the new mental health press officer at the SMC as well as identifying activities for the coming year. Key findings include:

- A significant proportion of media coverage of mental health, particularly of severe mental illness, is focussed on crime or violent incidents. Overall mental health reporting tends to be more negative in tone than positive and there is concern this perpetuates stigma and discrimination against those with mental health problems
- Many groups, including SHIFT and the Time to Change coalition, are trying to improve media understanding of mental health problems and tackle the way crime, violence and suicide stories relating to mental health are covered by the media. This work has included creating media guidelines and engaging editors and is having a positive impact
- News media coverage tends to be more negative than features or documentaries where journalists have longer to research the issues

### **Conclusion 1: the SMC will mainly focus its efforts working with news journalists and the 24-hour news media**

- Mental health research in areas other than Alzheimer's disease is under-represented in the media

### **Conclusion 2: the SMC should concentrate proactive media work on mental health research**

- Media coverage of mental health research could provide a better informed narrative about mental health than currently exists

### **Conclusion 3: the SMC finds opportunities to run press briefings on mental health research for the national news media**

- Press officers in the area are already working hard to publicise mental health research in the media but the SMC could offer support by setting up a press officer network

### **Conclusion 4: the SMC sets up a mental health research network to help share information and maximise opportunities**

- There was concern from some journalists that their editors did not believe that mental health problems affected their audience and this may prohibit stories from appearing in newspapers or on TV or radio

**Conclusion 5: the SMC helps journalists/editors appreciate the relevance of mental health research to their audience by providing information on prevalence and impacts of disorders**

- There appears to be a number of barriers to communicating mental health research to the media. One of the main barriers is the complex and conflicted nature of the research

**Conclusion 6: the SMC gives support and advice to mental health researchers to help them communicate complex issues to the media**

- In many of the meetings held there was a concern that the public does not understand the role of psychiatry. This may have led to psychiatrists not engaging with the media as readily as in other areas of medicine

**Conclusion 7: the SMC helps put the case for psychiatrists using the media as a way to improve understanding of their work**

- There are fewer spokespeople who comment in the media on mental health research than for other areas of medicine. Journalists would like access to more experts

**Conclusion 8: the SMC encourages more mental health researchers, psychiatrists and psychologists to become media spokespeople. It also strengthens its database to include more experts in key areas**

- Many headlines news stories about mental health are about mental health problems of an individual or their actions. This can make it difficult for experts to engage, as there is concern they may be seen to be commenting on individual cases. However, failure to engage may mean that valuable opportunities are missed

**Conclusion 9: the SMC supports and advises experts to help them engage with breaking news stories about mental health as an opportunity to get important messages across**

- Case studies are important to help media cover stories and it is important to have the voice of those who have experienced mental health problems in the media coverage. A number of charities have databases of people who are happy to talk to the media

**Conclusion 10: the SMC works to give journalists access to interviews with people who have experienced mental health problems through other organisations**

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## **Appendix 1 – Meetings/phone conversations held**

June, July and August 2010 I held a number of meetings and phone conversations. These meetings varied in format from those with a primary focus on the new role and where to place resources, to other meetings where the focus was the research being carried out by those I spoke to. Even though these meetings were all very different in format and objectives, the common themes of the meetings form the basis of this report. The names of those spoken to during the period are included below.

### **Association of Medical Research Charities (AMRC)**

Dr Sophie Petit-Zeman, Head of External Relations  
Becky Purvis, Policy and Public Affairs Manager

### **British Association for Counselling & Psychotherapy (BACP)**

Alison Croft, Press & Public Relations Manager  
Cristian Holmes, Director of Marketing, Communications and Membership

### **Cardiff University**

Prof Nick Craddock, Professor of Psychiatry  
Prof Kevin Fox, Joint Head of Research  
Prof Mike Owen, Head of Department  
Dr Marcela Votruba, Senior Lecturer, Consultant Ophthalmologist

### **Department of Health**

Judith Moore, Mental Health lead in the Department of Health press office

### **Financial Times**

Clive Cookson, Science Editor

### **Guardian**

Sarah Boseley, Health Editor

### **Independent**

Jeremy Laurence, Health Editor

### **Institute of Psychiatry, King's College London**

Louise Pratt, Acting Public Relations and Communications Manager  
Prof Simon Wessely, Chair of Psychological Medicine  
Prof Til Wykes, Professor of Clinical Psychology and Rehabilitation

### **Medical Research Council (MRC)**

Emma Knight, Senior Press Officer  
Dr Gavin Malloch, Programme Manager for Mental Health and Addiction  
Grace Money, Chief Press Officer

### **Mental Health Foundation**

Fran Gorman, Public Relations Manager

Alistair Martin, Public Relations Officer  
Dr Andrew McCulloch, Chief Executive

**Mental Health Research UK**

Prof Clair Chilvers, Trustee  
Dr Laura Davidson, Trustee

**MIND**

Alison Kerry, Head of Press

**National Institute for Health and Clinical Excellence (NICE)**

Wendy Jarrett, Head of Press  
Alice Law, External Communications Executive

**Progress Educational Trust**

Sarah Norcross, Director  
Sandy Starr, Press Officer

**Rethink**

Vanessa Pinfold, Deputy Director of Knowledge and Learning  
Jane Harris, Deputy Director of External Affairs

**Royal Society of Medicine**

Carmel Turner, Media Manager

**Royal College of Psychiatrists**

Elizabeth Fox, Press Officer  
Deborah Hart, Director of Communications & Policy

**SHIFT**

Robert Westhead, Project Manager

**The Sun**

Kate Wighton, Health Reporter

**University of Cambridge**

Barbara Sahakian, Professor of Clinical Neuropsychology

**University of Liverpool**

Prof Atif Rahman, Chair in Child Psychiatry  
Prof James McGuire, Professor of Forensic Clinical Psychology  
Prof Phil Davis, Head of the University's School of English  
Dr Josie Billington, Honorary Fellow  
Dr Clare Williams, The Reader Organisation  
Prof Christoph Lauber, Professor of Adult Psychiatry  
Dr Peter Fisher, Senior Lecturer in Clinical Psychology  
Prof Peter Kinderman, Professor of Clinical Psychology

**University of Manchester**

Prof Louis Appleby, Professor of Psychiatry and former National Director for Mental Health for Department of Health

### **University of Oxford**

Dr Jennifer Lau, University Lecturer

Dr Clare MacKay, Senior Research Fellow

Prof Dorothy Bishop, Professor of Developmental Neuropsychology

Dr Paul Ramchandani, Senior Research Fellow

Prof Mark Williams, Wellcome Trust Principal Research Fellow

Prof Christopher Fairburn, Professor of Psychiatry and Head of the Centre for Research on Eating Disorders

Prof Alan Stein, Professor of Child and Adolescent Psychiatry

Prof Chris Kennard, Professor of Clinical Neurology

### **Wellcome Trust**

John Williams, Head of Department, Neuroscience and Mental Health

Craig Brierley, Senior Media Officer

### **West London Mental Health Trust**

Lucy McGee, Director of Communications

Dr Craig Ritchie, R&D Director and Honorary Consultant in Old Age Psychiatry

## **Appendix 2 – Biography of Claire Bithell**

Claire has a degree in Cell Biology and a PhD in Biochemistry from the University of Manchester. Claire joined the SMC for the first time in 2004 and was promoted to Senior Press Officer in 2005. During this time she worked to help experts, working in areas such as embryonic stem cell research, fertility, animal research, engage with the news media. In February 2008 she took on a new challenge; to manage the press office of an independent regulator, the Human Tissue Authority. During her two years at the Human Tissue Authority, Claire worked with the media on stories as varied as raising awareness of new types of transplantation to dealing with adverse incidents around tissue retention following post-mortem examinations.

Claire was appointed as Head of Mental Health at the SMC in May 2010.