

**Leveson Inquiry:  
Culture, Practice and Ethics of the Press**

**Submission by Mind and Rethink Mental Illness**

Mind and Rethink Mental Illness are pleased to have the opportunity to contribute to the Leveson Inquiry and welcome the chance to contribute to the future regulatory regime of the press.

We have been encouraged to make this submission by our many supporters who frequently draw our attention to what they perceive to be negative, damaging and stigmatising coverage. The voice of people with mental health problems is one that sadly is all too often missing from the press, and we hope that our submission will address some of the main issues concerning the large group of people we represent.

This submission aims to provide the Inquiry with information relating to stigmatising reporting of mental health in the print media, with specific reference to:

- Dangerousness and violent crime
- Speculation about individuals' mental health
- Language and tone in reporting
- Rhetoric around welfare claimants
- Poor reporting on scientific research

This submission makes the following recommendations for the future regulatory regime:

1. That the regulator is given increased powers to enforce decisions on breaches of the Code, particularly surrounding training for journalists and editors.
2. To give consideration to how lay views and recommendations may be taken into account when adjudicating complaints under the new regulatory regime, so the voices of people outside the media industries can contribute to discussions that affect them.
3. That the regulator seeks a commitment from the press to:
  - a. refrain from speculating on the mental health of an individual without evidence to support this;
  - b. avoid using psychiatric terminology unless relevant;
  - c. specifically avoid damaging terminology in headlines as means of grabbing attention;
  - d. acknowledge the rarity of violent crimes by people with mental health problems when reporting on such an issue;
  - e. seek impartial comment when publishing articles on scientific research that may lead to behaviour change.
4. That the new regulatory regime gives due consideration to introducing guidelines that address coverage that denigrates a group in society and not merely individuals.
5. That the Inquiry accepts the recommendations made in the submission by Samaritans on reporting of suicide.

**For further information or queries regarding this submission please contact:**

## 1. Mind and Rethink Mental Illness

- 1.1. Mind and Rethink Mental Illness are both registered charities.
- 1.2. Mind believes no one should have to face a mental health problem alone. We listen, give support and advice, and push for a better deal for everyone experiencing a mental health problem. We provide advice and support to empower anyone experiencing a mental health problem, and campaign to improve services, raise awareness and promote understanding.
- 1.3. Rethink Mental Illness is a charity that believes a better life is possible for millions of people affected by mental illness. For 40 years we have brought people together to support each other. We run services and support groups that change people's lives and challenge attitudes about mental illness. We directly support almost 60,000 people every year across England to get through crises, to live independently and to realise they are not alone. We give information and advice to 500,000 more and we change policy for millions.
- 1.4. Mind and Rethink Mental Illness also jointly run Time to Change, England's most ambitious programme to end the stigma and discrimination faced by people with mental health problems. The programme is funded by the Department of Health and Comic Relief. A key part of Time to Change's remit is to work with the media to improve standards of reporting and representations of mental health issues.

## 2. Background

- 2.1. One in four people will experience a mental health problem in any one year, and the World Health Organisation predicts that within 20 years depression will be the second most common cause of ill health.
- 2.2. A Time to Change survey of nearly 3,000 people with mental health problems revealed that 9 out of 10 people report facing stigma because of their mental illness.<sup>1</sup>
- 2.3. A later survey revealed that 60% of people said that stigma and discrimination are either as damaging and distressing as, or more damaging than, the symptoms of their mental illness. Thirty five per cent reported that stigma had made them give up on their ambitions, hopes and dreams, and 27% said stigma had made them want to give up on life.<sup>2</sup>
- 2.4. A further survey of young people echoed this last statistic, with 26% of under 25s with mental health problems reporting that the stigma attached to their mental illness has made them want to give up on life.<sup>3</sup>
- 2.5. The Institute of Psychiatry's 2011 Mind Over Matter report into the reporting of mental illness in print media found that almost half (45%) of the UK's articles on the subject were stigmatising. The most frequent stigmatising elements in reporting were portraying the person with mental health problems as a 'hopeless victim' (featuring in 22% of all articles), being a 'danger to others' (14%), and exhibiting 'strange behaviour' (13%).<sup>4</sup>

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<sup>1</sup> Time to Change 'Stigma Shout', September 2008, survey of 3,038 mental health service users and 661 carers by Rethink Mental Illness's research department

<sup>2</sup> Time to Change 'The State of Stigma', October 2011, survey of 2,770 Time to Change supporters, conducted online using SurveyMonkey via social media

<sup>3</sup> Time to Change Children and Young people survey, conducted online using SurveyMonkey. The survey was publicised via social media between 25 May and 8 June 2012 and was completed by a total of 1,132 young people in the UK who are under the age of 25 and who have experienced a mental health problem

<sup>4</sup> Thornicroft M, et al., 2012, 'Mind Over Matter VII: An Analysis of Print Media Reporting of Mental Illness in 2011', Institute of Psychiatry

- 2.6. Newspapers are the key source through which people see or hear stories and reports about mental health. However, only 59% of people think that newspapers report on the issue realistically while 43% think they do so sensitively, compared to 72% and 66% who believe the same for TV News. The figure drops to just 54% and 38% respectively for people who have, or have ever had, a mental health problem.<sup>5</sup>
- 2.7. A survey in of 515 people with mental health problems conducted by Mind in 2000 found that 50% of all respondents reported that media coverage had a negative effect on their mental health, with 24% saying that they had experienced hostility from their neighbours and local communities as a result of media reports. Almost a quarter (23%) who were employed or volunteering, or had been within the previous three years, has experienced discrimination or harassment from their employer or work colleagues, that they blamed on media coverage of mental health issues.<sup>6</sup> While this survey provides old data, we believe that the findings are still highly relevant.
- 2.8. Mind and Rethink Mental Illness still frequently hear from our supporters of the effect that negative media coverage can have on an individual. One such example of this anecdotal feedback, from an anonymous Facebook fan, reveals the realities of this:

*"I was hugely reluctant to see a doctor. I had been badly depressed for four years and feeling suicidal for three months before I finally saw a doctor. My reluctance must to a certain extent be due to the media representation of mental illness. You don't want to seek treatment, because you don't want to be seen as a lunatic."*

### 3. Dangerousness

- 3.1. Dangerousness in mental health has been described as: "an unpredictable and untreatable tendency to inflict or risk serious, irreversible injury or destruction, or to induce others to do so",<sup>7</sup> and "a propensity to cause serious physical injury or lasting physical harm".<sup>8</sup>
- 3.2. Looking specifically at newspaper headlines rather than body copy, the most common message communicated in the headlines of UK newspaper coverage about mental health is a "risk of violence", while almost a third of newspaper coverage on the subject focuses on violence and homicides. This has a clear effect on readers, with 1 in 4 people saying their belief in a link between mental illness and violence stems from the media.<sup>9</sup>
- 3.3. In reality, this perceived link between dangerousness and mental illness has been grossly exaggerated. A study looking at the 5,189 homicides to have occurred in England and Wales between 1997 and 2005 revealed that approximately 1 in 10 (510) were committed by individuals known to have mental health problems at the time of the offence.<sup>10</sup> It has been estimated that around 1 in 6 people will have a significant mental health problem at

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<sup>5</sup> Survey of 2,050 UK adults by Populus for Mind, November 2011

<sup>6</sup> Mind 'The Daily Stigma', February 2000, survey of 515 mental health service users conducted by Mind

<sup>7</sup> Scott PD 1977, 'Assessing dangerousness in criminals', *British Journal of Psychiatry*, vol. 131, pp. 127–142.

<sup>8</sup> Butler Report. 1975, 'Report of the Committee on Mentally Abnormal Offenders', London, The Stationery Office.

<sup>9</sup> <http://www.gresham.ac.uk/lectures-and-events/press-coverage-of-mental-health-and-suicide>

<sup>10</sup> Large M, et al., 2008, 'Homicide due to mental disorder in England in Wales over 50 years', *British Journal of Psychiatry*, vol. 193, pp. 130–133.

any one time<sup>11</sup>.

- 3.4. In contrast, there is far more evidence suggesting a link between drink and drug abuse and violent crime. According to the British Crime Survey almost half (47%) of the victims of violent crimes believed that their offender was under the influence of alcohol and about 17% believed that the offender was under the influence of drugs.<sup>12</sup> Another survey suggested that about 30% of victims believed that the offender attacked them because they were under the influence of drugs or alcohol. In contrast, only one per cent of victims cited mental illness as the cause of the violent incident.<sup>13</sup>
- 3.5. Someone with a mental health problem is not only far more likely to be the victim of a crime than the perpetrator, but they are more likely than people without a mental illness to be a victim of crime. One study found that more than 1 in 4 people with a severe mental illness had been a victim of crime in one year.<sup>14</sup> Mind's Another Assault campaign in 2007, which explored the extent to which people with mental health problems are exposed to crime, fear and victimisation, further revealed that:
- 71% of respondents had been victimised in the last two years
  - 22% had been physically assaulted
  - 27% had been sexually harassed and 10% sexually assaulted
  - 41% were the victims of ongoing bullying
  - 26% had their homes targeted
  - Nearly 90% of respondents living in local authority housing had been victimized<sup>15</sup>

#### Case studies – mental health speculation

- 3.6. The dangerousness myth is not communicated solely through volume of coverage but also in the tone adopted by much of the coverage of homicides that seeks to imply a link with mental illness without any proof.
- 3.7. The shootings in Cumbria committed by Derrick Bird in June 2010 saw a wave of coverage that appropriated language from psychiatric diagnoses in a pejorative manner, with The Sun twice calling him a 'psycho'<sup>16 17</sup> and the Daily Mail referring to him as a 'crazed killer'<sup>18</sup>, while a Daily Mirror editorial described his actions as a 'psychotic explosion'<sup>19</sup>. Most distastefully of all, Daily Mail columnist Peter Hitchen speculated that the cause of Bird's actions may in fact have been

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<sup>11</sup> The Health & Social Care Information Centre, 2009, Adult Psychiatric Morbidity in England, 2007, Result of a household survey

<sup>12</sup> Home Office, 2009, Crime in England and Wales 2008/09, Vol. 1, Findings from the British Crime Survey and police recorded crime, Statistical Bulletin, 11/09, vol. 1.

<sup>13</sup> Coleman K, Hird C, Povey D. 2006, 'Violent Crime Overview, Homicide and Gun Crime 2004/2005', Home Office Statistical Bulletin

<sup>14</sup> Teplin L, McClelland M, Abram K, Weiner D, 2005, 'Crime victimization in adults with severe mental illness', *Archives of General Psychiatry*, vol. 62, pp. 911–921.

<sup>15</sup> Mind survey of 304 people with experienced of a mental health problem alongside focus groups featuring 52 different people who also had experience, conducted between Jun – Sep 2007

<sup>16</sup> <http://www.thesun.co.uk/sol/homepage/news/3001154/Mass-murderer-Derrick-Bird-hid-an-obsession-with-a-young-Thai-prostitute.html>

<sup>17</sup> <http://www.thesun.co.uk/sol/homepage/news/2999552/Psycho-cabbie-Derrick-Bird-flipped-over-100k-tax-bill.html>

<sup>18</sup> <http://www.dailymail.co.uk/news/article-1362687/Cumbria-gunman-Derrick-Bird-waved-friend-seconds-shot-work-rival.html>

<sup>19</sup> <http://www.mirror.co.uk/news/uk-news/cumbria-shootings-dark-side-of-mr-226098>

due to anti-depressant usage<sup>20</sup>. This was despite the fact that it had already been reported that Bird had no history of mental health problems and was not taking any medication.<sup>21</sup>

- 3.8. This rampant speculation is deeply harmful to people with mental health problems, not just because of the effect it has on the attitudes of others towards them, but because it prevents people from seeking help due to doubt about the side-effects of the medication that they may need.
- 3.9. This pattern of behaviour is repeated whenever there is a high profile killing or series of killings. The Sun labelled Raoul Moat a 'psycho'<sup>22</sup> long before it was revealed that he had no history of mental illness.<sup>23</sup> Similarly, before his first psychiatric evaluation resulted in a since contested diagnosis of schizophrenia, Anders Behring Breivik had already been labelled a 'madman' by The Sun.<sup>24</sup>
- 3.10. Anecdotal comments from our Facebook supporters gives a flavour of how this type of coverage affects people living with a mental health problem:

*"Just last night on the TV the word 'psychotic' was used freely to refer to an archetypal mass murderer rather than the literal meaning. The word has become hijacked by the press, media, TV and sadly society as a whole to denote evil, rather than suffering."*

*"I'm sick of the media scaremongering everyone into thinking we are all monsters when a good percentage of people with mental health issues are very kind and loving human beings, who are being denied the chance to lead a fulfilling life due to ignorance and stigma."*

#### 4. Mental health language as metaphor

- 4.1. Language drawn from psychiatric diagnoses is not solely misused in the context of violent crime, but has become a seemingly acceptable way to refer to anything, or anyone, perceived to be different, unstable or unpredictable, further reinforcing stigma.
- 4.2. A 2007 study of the terms "schizophrenia" and "schizophrenic" in the UK national press found that 11% of references were metaphorical, with broadsheet papers more likely to deploy such phrasing than tabloids. By contrast, cancer was only used in this manner in 0.02% of cases.<sup>25</sup>
- 4.3. By using the word schizophrenia in this way, it embeds a definition of the condition as something to be treated with suspicion, in a way that few other illnesses are. It leads to misconceptions, as shown by a Rethink Mental Illness survey showing that nine out of ten people believe at least one myth about schizophrenia. More than half (52%) believe that having schizophrenia means 'having a split personality' and more than 1 in 4 (26%) believe that people with the illness need to be monitored at all times. The polling also revealed that 42% of UK adults believe that people with schizophrenia can never recover and 12%

<sup>20</sup> <http://www.dailymail.co.uk/debate/article-1284311/PETER-HITCHENS-Perhaps-deadly-rampages-arent-inexplicable-all.html>

<sup>21</sup> <http://www.telegraph.co.uk/news/uknews/crime/7802041/Cumbria-shootings-Derrick-Bird-his-twin-and-the-60000-tax-inquiry.html>

<sup>22</sup> <http://www.thesun.co.uk/sol/homepage/news/3045679/Psycho-commando-Raoul-Moat-can-live-wild-for-weeks.html>

<sup>23</sup> <http://www.guardian.co.uk/uk/2011/sep/09/paranoid-raoul-moat-king-kong>

<sup>24</sup> [http://www.thesun.co.uk/sol/homepage/news/sun\\_says/3714649/The-Sun-Says.html](http://www.thesun.co.uk/sol/homepage/news/sun_says/3714649/The-Sun-Says.html)

<sup>25</sup> <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1963407/>

incorrectly believe they can't do a normal job, while 15% think people with schizophrenia are dangerous.<sup>26</sup>

- 4.4. In actual fact, schizophrenia is a treatable condition that can be managed by treatment and many people with the condition lead a 'normal' life. This misinformation, which is reinforced through media misuse of the word, only succeeds in dehumanising people living with schizophrenia in the minds of others.
- 4.5. This metaphorical appropriation also pertains to the word 'psychotic', which is also frequently used in newspaper reports. Instead of referring to the often deeply distressing sensation of experiencing thoughts, sounds and sights that others do not share, it is frequently taken to mean dangerous, violent and unpredictable, either in relation to violent crime as above or in more general language.<sup>27</sup>

## 5. Language in headlines

- 5.1. Derogatory language and inaccurate terminology is particularly damaging when deployed in headlines, where the need for an eye-catching strapline may tempt journalists into using sensationalist language.<sup>28 29 30</sup>
- 5.2. As demonstrated above (at point 4.2) the most common message communicated in newspaper headlines about mental health is a "risk of violence."
- 5.3. We accept that articles may go on to correct dramatic assertions made in headlines, but it is clear that, in many cases, the damaging reinforcement of inaccurate stereotypes has already occurred. This is especially the case for online articles where, on many website homepages, only titles are initially visible. For a reader who does not click to read the story further, these damaging assertions remain uncorrected.

## 6. Derogatory tone of coverage

- 6.1. Stigmatising coverage is not, however, limited to the language employed by the press. There is a substantial body of coverage that is derogatory and demeaning in tone, questioning the validity of mental health problems and dismissing the experiences of those to have had them.

### Case study – Jeremy Clarkson suicide column complaint

- 6.2. In December 2011, Mind, Rethink Mental Illness, Samaritans, SANE and PAPYRUS Prevention of Young Suicide, lodged a joint complaint to the Press Complaints Commission ('PCC') against The Sun about a Jeremy Clarkson column about rail suicide.
- 6.3. In his column of Saturday December 3, Clarkson joked about people who killed themselves by jumping in front of trains, who he referred to as "Johnny Suicide", referring to their actions as "very selfish" and writing that their bodies should be

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<sup>26</sup> Survey of 2,216 UK adults for Rethink Mental Illness by YouGov, October 2011

<sup>27</sup> <http://www.dailymail.co.uk/tvshowbiz/article-2163093/SOAP-WATCH-Insight-EastEnders-Hollyoaks-Coronation-Street.html>

<sup>28</sup> <http://www.sundaysun.co.uk/news/north-east-news/2012/06/10/vile-fantasies-of-schizo-knifeman-paul-dempsey-79310-31149943/>

<sup>29</sup> <http://www.mirror.co.uk/news/uk-news/forced-sedation-of-schizo-woman-was-ok-250569>

<sup>30</sup> <http://www.independent.co.uk/news/world/americas/cannibal-gay-porn-psycho-killer-luka-magnotta-caught-on-cctv-in-berlin-internet-caf-before-arrest-7817791.html>

left for scavenging animals.

- 6.4. As the column did not denigrate specific individuals but, rather, referred to a hypothetical situation, the complaint fell outside of the strict remit of Clause 5 of the PCC Editors' Code of Practice. Instead, the PCC negotiated a meeting between Samaritans (representing the charities) and The Sun.
- 6.5. Following this meeting, The Sun wrote to the PCC to confirm that it accepted that parts of the column had overstepped the mark and apologised for the offence caused. The Sun agreed to support the Time to Change programme and to offer training to its staff on mental health reporting.
- 6.6. The complaint was officially resolved on 19 April 2012. To date, The Sun has not responded to Time to Change's attempts to engage them further with the programme and to arrange training, nor to Samaritans' attempt to contact them.
- 6.7. This was a grossly offensive column, especially for people who have lost a loved one to suicide. However, as it fell outside the ambit of the Code, we are left without the ability to enforce The Sun's agreement to provide extra training.

#### **Case study – Janet Street Porter “trendy” depression**

- 6.8. In July 2010, Daily Mail columnist Janet Street Porter penned an article in which she described depression as the “latest must have accessory” and “trendy” illness, and told people affected by the condition to “get a grip”.<sup>31</sup>
- 6.9. In response to this, Rethink Mental Illness issued a complaint to the PCC and sent a letter of complaint to the Daily Mail, in which they described the article as “misleading”, and said “Depression isn't rare. One in six people will be diagnosed with depression during their lifetime and millions will experience symptoms but won't seek help. Depression doesn't affect only those who 'have enough money.' It can affect anyone, regardless of background...it's highly unlikely that a whole (earlier) generation of people were entirely unaffected by it, as Ms Street-Porter suggests. The idea that people affected by mental illness aren't stigmatised would be laughable if the impact of stigma wasn't so detrimental.”
- 6.10. Once the PCC decided to investigate the complaint the Daily Mail agreed to print the letter and the complaint was resolved on this basis, with the regulator taking the view that the writer was entitled to her opinion but that the piece contained factual inaccuracies.
- 6.11. Articles like this may not specifically denigrate an individual but, instead, demean a wide group in society. They reinforce the misconception that mental illness is somehow less valid than physical illness, and make it harder for people experiencing a mental health problem to seek help.

#### **Case study – Frederick Forsyth**

- 6.12. Another recurring feature of reporting on mental health is where the writer dismisses the experience or opinion of someone with mental health problems as less trustworthy than someone without.
- 6.13. A recent article from Daily Express columnist Frederick Forsyth reflected this view. This piece addressed the case of a GP who had been warned by the GMC

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<sup>31</sup> <http://www.dailymail.co.uk/debate/article-1278510/Depression-Its-just-new-trendy-illness.html>

for pushing his religious views on a patient, refusing to offer treatment to a man experiencing severe mental distress and stating that “the Devil haunts people who do not turn to Jesus”.

- 6.14. Forsyth was heavily critical of the GMC, complaining that “The telephoned ‘evidence’ [from the patient] was accepted in totality, though Dr Scott testified that his accuser had ‘massive and multiple problems’. Case proved.” Forsyth described the process as a “kangaroo court” and also stated that the GP “didn’t ruin his patient’s health”.<sup>32</sup>
- 6.15. The underlying tone of this article suggests that someone with mental health problems should not be believed on any count. This is reflected in a common belief among people with mental health problems that, when they are subject to abuse or victimisation, their complaints are not taken seriously. Mind’s Another Assault campaign revealed that 60% of people with mental health problems who reported a crime felt that the appropriate authority did not take the incident seriously, while 36% of respondents who didn’t report a crime that had occurred chose not to do so because they felt they would not be believed.
- 6.16. The assumption in the article that the patient’s health was left unaffected also fails to consider the possible recriminations that being denied treatment can have on someone’s mental health, and the potential for feelings of self harm and suicide.
- 6.17. Articles like the three examples above clearly demonstrate that stigmatising coverage is alive and well in the UK print media. It is clear that the current regulatory regime fails to prevent this type of coverage from being printed; coverage that has a demonstrably negative effect on the lives of people with mental health problems. Even where the regulator has acted, in the case of The Sun, the proposed method of redress has not been completed and, with no regulatory powers to enforce this, it is perhaps unsurprising that this is the case.

## 7. Media rhetoric on disability benefits recipients

- 7.1. Recently, Mind and Rethink Mental Illness have heard many of our supporters tell of the impact that press coverage of welfare reform and ‘benefits scroungers’ has had on their lives.
- 7.2. A 2011 study by the University of Glasgow revealed that there has been a significant increase in negative reporting on disability issues. A large part of this change was due to the volume of coverage focusing on disability benefit fraud, rising from 2.8% of 713 disability related articles in 2004/5 to 6.1% of 1,015 articles in 2010/11. This was reflected in the language used, with terms such as ‘scrounger’, ‘cheat’ and ‘skiver’ employed in 18 per cent of articles in 2010/11 compared to 12 per cent in 2004/5.<sup>33</sup>
- 7.3. This increase in negative coverage is underscored by a deeply worrying trend in how the press has presented Department of Work and Pensions (‘DWP’) figures on how many people claiming some form of disability benefit are actually ‘fit for work’. A Mind review of one particular spate of stories around just one set of figures shows that the press have reported anywhere between 39% and a staggering 93% of claimants are in fact fit to work. Analysing the same DWP figures, Mind discovered that the reporting was deeply

<sup>32</sup> <http://www.express.co.uk/ourcomments/view/328184>

<sup>33</sup> ‘Bad news for disabled people: How the newspapers are reporting disability’, Strathclyde Centre for Disability Research and Glasgow Media Unit, available at [http://www.gla.ac.uk/media/media\\_214917\\_en.pdf](http://www.gla.ac.uk/media/media_214917_en.pdf)



misleading, with the 93% figure including not just people found fit for work but those given long-term support who could return to employment at some time in the future but not imminently and those who had stopped their claim before being assessed, which could be for a myriad of reasons ranging from recovery from illness to the death of the claimant. Furthermore, while 39% of people had been found fit for work, this figure did not include the 40% of people who appeal their decision and the 40% of those who are successful in their appeal.<sup>34</sup>

- 7.4. This Mind review was backed up by separate analyses from independent fact-checking organisation Full Fact.<sup>35 36</sup>
- 7.5. Perhaps more concerning than the basic misinterpretation of data is the language that is used to describe these stories. In January 2011 the Daily Express's front page headline reported that "75% on Sick are Skiving"<sup>37</sup>, claiming that anyone to have not been found able to work had been acting fraudulently. The new fit for work test, the implementation of which has led to these new statistics, is far more stringent than previous tests and means that people who had previously been assessed as not being fit for work are now found to be fit for work. This does not mean that they had been previously 'skiving'. This is supported by the DWP's own data, which shows that the fraud rate for incapacity benefit is actually just 0.5%.<sup>38</sup>
- 7.6. The University of Glasgow study showed just how this labelling of benefits claimants as 'skivers' can become accepted as being true. Their focus groups revealed that benefit fraud was seen as the most dominant topic in all disability coverage to be found in the media. When questioned, group participants felt that the percentage of people who were fraudulently claiming disability benefits was anything from 10 to 70% - far in excess of the DWP's 0.5% figure. When asked to justify the figures, respondents cited newspaper articles as evidence.
- 7.7. The focus groups also revealed a belief that it was easy to 'fake' disability symptoms. This belief is of particular relevance to people with mental health problems as their symptoms are invisible and, where it is not possible to see why someone cannot work, it is easier to assume that they are faking. Contrary to the opinion of certain sections of the press, our supporters repeatedly tell us how difficult it is to receive benefits for mental health conditions and how difficult life on benefits can be.
- 7.8. The relentless media demonising of those who are too ill to work has a drastic effect on the way they are perceived by others. This in turn leads to a worsening of many people's mental health. Mind conducted a survey of its supporters that revealed the effect that the welfare reform process, and its coverage, was having upon them. Three quarters of respondents reported that the prospect of having their benefits reassessed was making their mental health worse, with 51% saying they had experienced suicidal thoughts. The most common source of information about the reforms was through the media (62%) with 95% of people stating that they did not think they would be believed in their reassessment. This is a clear example of the effect that negative coverage of a group in society can have

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<sup>34</sup> [http://www.mind.org.uk/blog/5394\\_benefits\\_claims\\_whos\\_doing\\_the\\_real\\_deceiving](http://www.mind.org.uk/blog/5394_benefits_claims_whos_doing_the_real_deceiving)

<sup>35</sup> [http://fullfact.org/factchecks/incapacity\\_benefit\\_94\\_per\\_cent\\_can\\_work-2458](http://fullfact.org/factchecks/incapacity_benefit_94_per_cent_can_work-2458)

<sup>36</sup> [http://fullfact.org/blog/express-errors-incapacity-benefit-fit-for-work\\_2460](http://fullfact.org/blog/express-errors-incapacity-benefit-fit-for-work_2460)

<sup>37</sup> <http://www.express.co.uk/posts/view/225311>

<sup>38</sup> 'Fraud and Error in the Benefit System: Preliminary 2011/12 Estimates (Great Britain) Revised Edition', 2012, DWP, p14, available at [http://research.dwp.gov.uk/asd/asd2/fem/fem\\_preliminary\\_1112\\_revised.pdf](http://research.dwp.gov.uk/asd/asd2/fem/fem_preliminary_1112_revised.pdf)

on the health of an individual.<sup>39</sup>

- 7.9. This increase in negative coverage has also occurred at the same time as a dramatic increase in hate crimes committed against disabled people. In June 2012 The Independent reported that Freedom of Information request findings had shown that 1,942 disability hate crimes were recorded by 43 of 44 police forces in England, Wales and Northern Ireland in 2011; a 14% rise on 2010 and a doubling since 2008.<sup>40</sup> Disability charity Scope has also reported the effect that scrounger rhetoric has had, with two thirds of respondents to their regular polling reporting hostility or taunts in September 2011, up from 41% just four months previously.<sup>41</sup> We believe that this increase is no coincidence and that the increase in demonising coverage of disabled people is fuelling this rise.

## 8. Scientific misinformation

- 8.1. New research into mental health, its causes and treatments is a source of much press coverage. As an issue that will affect a sizeable proportion of any newspaper's readership this is to be welcomed. However, where reporting of these stories is not done responsibly, coverage of this nature can turn out to be dangerous for that readership.

### Case study – exercise and depression

- 8.2. In June 2012 articles appeared in most national press titles proclaiming that research had concluded that exercise did not help in treating depression. This was a major news story; a course of physical activity is a NICE-recommended treatment for mild-moderate depression that can be prescribed instead of, or as well as, medication or therapy. Mind's research has shown that exercise can be as effective a treatment as medication for mild to moderate depression.<sup>42</sup>
- 8.3. The report from the Guardian, which was sourced from the Press Association, is typical of the coverage, leading with a headline of "Exercise doesn't help depression, study concludes"<sup>43</sup>, while BBC online led with "Exercise 'no help for depression', research suggests".
- 8.4. However, a reading of both stories suggested that the headline did not match the reality of the story, with each report making it clear that the research only looked at exercise when it was combined with conventional treatments, rather than being looked at in isolation. A comment from Professor Alan Maryon-Davis of King's College London made it clear that the findings were in fact narrower still:

*"...we need to bear in mind that these patients were already on medication, so it considers exercise on top of medical care. It did not look at mild depression nor did it consider exercise as an alternative to medication."*

- 8.5. It is clear that the headline bore little or no relation to the story as it actually existed. Indeed, a comment to a Mind blog on the subject<sup>44</sup> from one of the report authors revealed as much and also the steps he had taken to correct the BBC headline:<sup>45</sup>

<sup>39</sup> Survey of 316 people with mental health problems who were in receipt of Incapacity Benefit, March 2011

<sup>40</sup> <http://www.independent.co.uk/news/uk/crime/hate-crimes-against-disabled-people-soar-to-a-record-level-7858841.html>

<sup>41</sup> <http://www.guardian.co.uk/society/2012/feb/05/benefit-cuts-fuelling-abuse-disabled-people>

<sup>42</sup> Halliwell E. (2005), Up and Running? Exercise Therapy and the treatment of mild to moderate depression in primary care, Mental Health Foundation, London

<sup>43</sup> <http://www.guardian.co.uk/society/2012/jun/06/exercise-doesnt-help-depression-study>

<sup>44</sup> [http://www.mind.org.uk/blog/6948\\_getting\\_your\\_headline\\_straight-exercise\\_and\\_depression](http://www.mind.org.uk/blog/6948_getting_your_headline_straight-exercise_and_depression)

*“As one of the authors of the study I was dismayed by the BBC website headline, which prompted me to complain through a reporter I know at the BBC about the headline. An apology was received and the website headline changed within minutes. This was an unfortunate error created by the speed at which we often work, with the headline ‘written overnight by a newsroom sub editor who takes a more swashbuckling approach to catching the eye,’ and the original reporter having to cover other emerging health stories instead of having time to check.*

*“I know the damage has been done as the news item spread around the world, and I have had e-mails from lots of people trying to make sense of the news.*

*“This is just weeks after the BBC reported on a meta analysis of the positive effects of walking on depression, published in the journal I co-founded, *Mental Health and Physical Activity* (<http://www.journals.elsevier.com/mental-health-and-physical-activity/>). No wonder most people don’t take science seriously or understand it, when so many mixed messages come out, and we are in the hands of sensationalism in the media.*

*“Prof Adrian Taylor (University of Exeter)”*

- 8.6. This coverage is not just misleading but dangerous where, as here, it has the potential to lead to negative behaviour change, potentially making someone stop, or not start, an exercise regime in the mistaken believe that it won’t help their depression. This is something that could have been easily averted; a quick call to the researchers at Mind, Rethink Mental Illness or another mental health charity to check the interpretation of the research would have corrected the error, and improved the quality of reporting.

## **9. Media reporting of suicide**

- 9.1. We are pleased to see that Samaritans has already made a detailed submission to the Inquiry on this subject and would like it to be made clear that we support their recommendations in their entirety.

## **10. Improvements in press coverage**

- 10.1. While there are significant areas for concern in the reporting of mental health in the press, it is equally clear that there have been significant improvements in recent years.
- 10.2. The Mind over Matter report revealed there was a significant increase in the proportion of articles on mental health considered to be anti-stigmatising, rising from 31% in 2008 to 41% in 2011 (compared to 46% and 45% respectively for stigmatising coverage). There was also a decrease from 21% to 14% in the proportion of coverage concerning people with mental health problems being a ‘danger to others’.<sup>46</sup>
- 10.3. Media reactions to stories around high-profile individuals has also greatly improved. When England cricketer Michael Yardy was forced to return home from an overseas tour due to depression, the coverage was largely sympathetic, with any negative coverage focused on the stigmatising comments of commentator Geoff Boycott rather than on Yardy himself. Particularly noteworthy was the positive and supportive response of The Sun,<sup>47 48</sup>

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<sup>45</sup> <http://www.bbc.co.uk/news/health-18335173>

<sup>46</sup> Mind over Matter 2011

<sup>47</sup> <http://www.thesun.co.uk/sol/homepage/sport/cricket/3488502/Michael-Yardy-heading-home-from-World-Cup.html>

<sup>48</sup> <http://www.thesun.co.uk/sol/homepage/woman/health/health/3500826/England-cricketer-aces-positive-spin-on-mental-health.html>

contrasting with their infamous “Bonkers Bruno Locked Up” headline of 2003.

- 10.4. We also recently saw an overwhelmingly positive response to the decision of four MPs to publicly disclose their mental health problems in Parliament during a debate on mental health. Both broadsheets<sup>49</sup> and tabloids<sup>50</sup> covered this issue with great sensitivity and tact, applauding the MPs for speaking out. While this reporting is certainly worthy of praise, it is also worth contrasting with the fevered speculation as to the mental health of Prime Minister Gordon Brown, noting the difference in reporting standards when the story is not of someone disclosing a mental health problem of their own accord, but where journalists are attempting to ‘out’ them and questioning whether they are ‘fit for office’.<sup>51</sup>

#### **Case study – The Sun and Shirlena Johnson**

- 10.5. On 25 August 2010, The Sun ran a story about X Factor contestant Shirlena Johnson, who had reportedly been removed from the show due to mental health problems.<sup>52</sup>

- 10.6. The article claimed that Shirlena was a ‘ticking timebomb’ and ‘a risk to her child’, however no medical evidence was given of what mental health problem she had actually been diagnosed with.

- 10.7. The groundless assumption that, because someone has a mental health problem, they are automatically incapable of being a responsible parent and could even present a risk to their child has a devastating impact on people with mental health problems. This can lead to people not seeking help for fear that a mental health diagnosis may lead to being viewed as a bad parent and having their children taken away from them.

- 10.8. The following quotes from Time to Change Facebook fans illustrate the impact that such assumptions in the media can have on people with mental health problems:

*“When I saw the Sun article I was devastated that people might think having a mental illness stops you being a good parent.”*

*“Examples like that show why people keep quiet about their mental health problems.”*

- 10.9. Time to Change made contact with The Sun to raise these concerns. The paper subsequently began covering the story differently, featuring a more sensitive interview with Shirlena<sup>53</sup> and launching a campaign for her to be reinstated, including running a reader poll in which 70% said they supported this.<sup>54</sup>

<sup>49</sup> <http://www.independent.co.uk/news/uk/politics/mps-discuss-mental-health-problems-in-emotional-commons-debate-7851770.html>

<sup>50</sup> <http://www.thesun.co.uk/sol/homepage/news/politics/4374212/Tory-MP-Charles-Walker-My-OCD-torment.html>

<sup>51</sup> <http://www.theweek.co.uk/politics/20033/gordon-brown-%E2%80%98drugs-control-depression%E2%80%99>

<sup>52</sup> [http://www.thesun.co.uk/sol/homepage/showbiz/tv/x\\_factor/3108649/X-Factor-mum-as-fragile-as-SuBo.html](http://www.thesun.co.uk/sol/homepage/showbiz/tv/x_factor/3108649/X-Factor-mum-as-fragile-as-SuBo.html)

<sup>53</sup> [http://www.thesun.co.uk/sol/homepage/showbiz/tv/x\\_factor/3112286/X-Factors-Shirlena-Johnson-insists-she-can-handle-pressures-of-fame.html](http://www.thesun.co.uk/sol/homepage/showbiz/tv/x_factor/3112286/X-Factors-Shirlena-Johnson-insists-she-can-handle-pressures-of-fame.html)

<sup>54</sup> [http://www.thesun.co.uk/sol/homepage/showbiz/tv/x\\_factor/3113856/Sun-readers-demand-reinstatement-of-X-Factors-Shirlena-Johnson.html](http://www.thesun.co.uk/sol/homepage/showbiz/tv/x_factor/3113856/Sun-readers-demand-reinstatement-of-X-Factors-Shirlena-Johnson.html)

- 10.10. As well as reacting to individual stories such as this, part of Time to Change's remit is to work with the media to improve portrayals of, and reporting on, mental health. The initial response to our programme has been encouraging, showing a clear demand for our services. Training sessions have been scheduled with different areas of the media, and a recent event for journalists working on women's lifestyle magazines that provided a forum to discuss mental health stories was particularly well received. We have produced a training film that will shortly be made freely available and are developing online resources to help journalists tell important stories in the right way.
- 10.11. We believe it is important to recognise positive examples of mental health reporting as well as highlighting those areas that are falling short of the required standard. The Mind Media Awards commends a Journalist of the Year for persistently good reporting and has seen entries from news, features and lifestyle journalists and columnists.
- 10.12. It is also clear that there is an appetite for well-written informative content on mental health. Recent good examples of this have been Glamour magazine's 'Hey, It's OK' campaign on depression and the Sunday Express's crusade on mental health. Both of these features have resulted in overwhelmingly positive feedback from readers, showing the demand there is for outlets to demonstrate commitment to mental health stories.
- 10.13. We welcome the improvements in reporting standards that have been made in recent years. However, we still believe that there is a noticeable difference in the treatment of a high-profile figure talking about their mental illness and the general press attitude to mental health. Progress has been made but it is clear that far more needs to be done to improve attitudes and reduce stigma.

## **11. Conclusion and recommendations**

- 11.1. Coverage of mental health in the print media is often stigmatising and reinforces inaccurate perceptions of mental illness.
- 11.2. The current regulatory regime provides insufficient protection for people with mental health problems and permits this widespread negative coverage.
- 11.3. As shown above, this is not simply a matter of style in newspaper reporting, but has three demonstrably negative impacts on the people with mental health problems; worsening their mental health, affecting the ways they are viewed by others, and affecting the treatment they receive at the hands of others.
- 11.4. In light of the areas covered above, we make the following recommendations to the Inquiry:
- That the regulator is given increased powers to enforce decisions on breaches of the Code, particularly surrounding training for journalists and editors
  - To give consideration to how lay views and recommendations may be taken into account when adjudicating complaints under the new regulatory regime, so the voices of people outside the media industries can contribute to discussions that affect them.
  - That the regulator seeks a commitment from the press to:
    - refrain from speculating on the mental health of an individual without evidence to support this;
    - avoid using psychiatric terminology unless relevant;
    - specifically avoid damaging terminology in headlines as means of grabbing attention;
    - acknowledge the rarity of violent crimes by people with mental health problems when reporting on such an issue;

- seek impartial comment when publishing articles on scientific research that may lead to behaviour change.
  - That the new regulatory regime gives due consideration to introducing guidelines that address coverage that denigrates a group in society and not merely individuals.
  - That the Inquiry accepts the recommendations made in the submission by Samaritans on reporting of suicide.
- 11.5. Mind and Rethink Mental Illness recognise the difficulties in trying to balance the needs of a free press and the rights of individuals under the new regulatory regime, and would welcome any further opportunity to engage in discussions about how this may be achieved.

Steps before publication

1. If you are happy for the Inquiry to publish your submission **please add and sign the following statement of truth to the end of your submission/statement:**

**Statement of Truth**

**I believe the facts stated in this witness statement are true.**

Signed ...  ..(on behalf of Mind)

**Date ...11 July 2012**

Please be aware that by signing the statement of truth you are confirming that you agree that the contents of the submission/statement are true. Please take extra time to ensure that you are completely happy with your submission/statement before you sign it.

If you have provided a submission/statement in your private capacity you should state your full name in the submission/statement but should provide in a separate document personal details (e.g. address, contact address, mobile telephone number and e-mail address), which will not be published.

Please remove any personal details such as home address or telephone number before forwarding the final signed submission/statement.

If you have provided the submission/statement on behalf of an organisation, please state this clearly in the first line of the submission/statement.

2. Your signed submission/statement, in its entirety, should be returned to us by email.

3. Returning your signed submission/statement will confirm that you are content for the Inquiry to publish it on its website in the form you have provided. If this is not the case and you have any concerns or wish for certain sections to be withheld please make this clear in any response.

4. Your signed submission, once received, will initially be provided to those groups who have been designated as Core Participants to the Inquiry (a full list is available on our website: [www.levesoninquiry.org.uk](http://www.levesoninquiry.org.uk)).

5. If the Core Participants do not raise any matters your statement will then be referred to in open session and at that point it will be published, along with your name, on the Inquiry's website.