# Stigma and Global Mental Health: Association between Country-Level Characteristics and Mental Illness Stigma in 16 Countries

Ahmed M. Kassem, MBBCh (MD) [ahmed.kassem@nyu.edu] Master of Public Health Program, New York University

#### BACKGROUND

It is estimated that neuropsychiatric disorders affect 400 million people worldwide and they constitute about 14% of the Global Burden of Disease. The treatment gap for serious mental disorders is considerable; 35-50% unmet needs in developed countries and 76-85% unmet needs in developing countries. In addition to the scarcity of available resources for mental healthcare, stigma and discrimination are critical factors in the reluctance of individuals with mental disorders to seek or continue care. Stigma and discrimination are believed to account for a significant portion of the treatment gap for individuals with mental disorders. Since the stigma related to mental illness is implicated on multiple levels of influence, it is crucial to assess the impact of the various individual, social and cultural characteristics associated with it. The objective of this analysis is to examine the association between country-level characteristics and mental illness stigma in 16 countries.

### **METHODS**

Estimates of percent prevalence of perceived stigma among individuals with mental disorders in 16 countries were obtained from the World Mental Health Surveys (Alonso et al., 2008). Estimates of country indicators were obtained from the United Nations Development Program (UNDP). The following variables were examined: Human Development Index (HDI) rankings (2010), Internet Users/100 (2008), and Homicide Rate/100,000 (2008). The HDI variable is a composite measure of human development that reflects 3 country dimensions (health, education and living standards). HDI is inversely proportional to development. The Internet Users variable was used as a proxy for social globalization (Dreher, 2006) and the Homicide Rate variable was used as a proxy for violence and crime. Spearman's rank correlation coefficient was computed to assess the correlation between the Perceived Stigma and the 3 variables. Pearson product-moment correlation coefficient was calculated, however, the coefficients were not statistically significant. This is possibly due to the limited number of observations in this dataset.

### **RESULTS**

Table 1. Correlation between Perceived			HDI	Internet	Homicide
Stigma and HDI Ranking, Internet Users and			Ranking,	Users,	Rate,
Homicide Rate in 16 countries			2010	2008	2008
Spearman's	Perceived	Correlation	0.500	-0.509	0.562*
rho	Stigma	Coefficient			
		Sig. (2-tailed)	0.048	0.037	0.019

## CONCLUSION

On the country level, it is concluded that improved health, education and living standards, increased cultural awareness and social globalization through internet, and lower crime and violence rates, may be associated with reduced perception of stigma among individuals with mental illness.

## **REFERENCES**

- 1. Alonso, J., Buron, A., Bruffaerts, R., He, Y., Posada-Villa, J., Lepine, J. P., et al. (2008). Association of perceived stigma and mood and anxiety disorders: results from the World Mental Health Surveys. Acta Psychiatr Scand, 118(4), 305-314.
- 2. Ben-Zeev, D., Young, M. A., & Corrigan, P. W. (2010). DSM-V and the stigma of mental illness. J Ment Health, 19(4), 318-327.
- 3. Demyttenaere, K., Bruffaerts, R., Posada-Villa, J., Gasquet, I., Kovess, V., Lepine, J. P., et al. (2004). Prevalence, severity, and unmet need for treatment of mental disorders in the World Health Organization World Mental Health Surveys. JAMA, 291(21), 2581-2590.
- 4. Dreher, Axel. (2006). Does Globalization Affect Growth? Empirical Evidence from a new Index. Applied Economics, 38(10), 1091-1110.
- 5. Livingston, J. D., & Boyd, J. E. (2010). Correlates and consequences of internalized stigma for people living with mental illness: A systematic review and meta-analysis. Soc Sci Med. 71(12), 2150-2161.
- 6. Prince, M., Patel, V., Saxena, S., Maj, M., Maselko, J., Phillips, M. R., et al. (2007). No health without mental health. Lancet, 370(9590), 859-877.
- 7. Saxena, S., Thornicroft, G., Knapp, M., & Whiteford, H. (2007). Resources for mental health: scarcity, inequity, and inefficiency. Lancet, 370(9590), 878-889.
- 8. United Nations Development Programme UNDP (2008-2010). International Human Development Indicators. Retrieved from http://hdr.undp.org/en/statistics/. Accessed October 20, 2011.