



Viewpoint

EPA position paper: Improving the image of psychiatry and psychiatrists



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Psychiatry is an exciting and growing medical specialty that has seen an exponential growth in knowledge and understanding accompanied by ever increasing excellence in quality of clinical care. Achieving equitable care for mental illness and the mentally ill is a longstanding goal of all those involved in the field of psychiatry. Less well known but equally important in this context is the task of promoting a positive and successful image by mental health professionals and psychiatrists themselves.

Fair resourcing and corresponding attitudes affect all groups involved in the field of mental healthcare, including patients, their relatives, carers and care providers. This applies also to psychiatry as an academic discipline, as a medical profession and as an important component of the mental healthcare services. In the past, many efforts have been made to improve the situation of those affected. However, there is still a strong need for initiatives in mental health to promote excellence and aspiration in order to positively and robustly project the image of psychiatry [1].

Evidence suggests that psychiatrists' positive perceptions of themselves as medical professionals is important [2] and can affect psychiatry and psychiatrists in two ways:

- by supporting and enhancing patients' help-seeking behaviour, treatment adherence and social inclusion;
- by affecting psychiatry and psychiatrists directly through increased esteem of psychiatry and psychiatrists amongst other health professions.

Many existing interventions to improve attitudes [3] targeting mental health professionals and medical students are in place, but further measures to promote excellence and enhance the image of psychiatry and psychiatrists are needed, including awareness-raising campaigns and programs, contact with mental health patients in medical schools, and information about the diagnostic and therapeutic procedures in psychiatry and their success.

1. The image of psychiatry and psychiatrists

Public attitudes and also those of other professionals affect the image of psychiatry and mental health services. The reasons for these attitudes are many and often not dissimilar to those held regarding mentally ill individuals [4].

The effects of expectation and confirmation bias have been known and researched over many decades. The message coming from this research is very clear. The repeated use of negative imagery or terminology in association with psychiatry carries with it a real risk that we inadvertently create a fertile ground for unhelpful expectation or confirmation bias and hence, a self-fulfilling prophecy. Each use of this negative terminology unfortunately reinforces the very thing we seek to combat and may even contribute to stigma or discrimination [5,6].

There will naturally continue to be contexts in which judicious and careful use of terms associated with a negative connotation relevant to psychiatry and psychiatrists is necessary. However, an awareness of the potential risks should inform this usage. We should consciously and actively strive to promote psychiatry whenever possible using evidence of excellence as part of a strategy for eliminating prejudice.

The image of psychiatrists may be affected by history and psychiatry's societal role in applying coercive measures, but can of course also be positively connoted by its current and future scientific advances and breakthroughs: it should be acknowledged that there have been enormous gains in both research and clinical practice in recent times.

A positive and upbeat image of psychiatry can lead to increased patient access to mental health services, ensuring early and prompt intervention and thereby increasing response rates, creating a virtuous circle of further ongoing quality improvement. People with mental disorders would find it easier to consult medical professionals due to better awareness and sources of information. Patients and carers would increasingly tend to refer first to mental health professionals, opening the way to appropriate and timely mental health care.

Moreover, a positive image of psychiatry would in turn be reflected in increased resourcing of psychiatric services, which could further lead to improved recruitment and retention of psychiatrists.

2. Approaches to improve the image of psychiatry

There have been many exciting and innovative breakthroughs in the field of psychiatry, yet some challenging attitudes among the

general public, medical students, health professionals and the media remain [1].

Taking into account well-established attitudes, multiple approaches are required to further improve the image of psychiatry. Promising methods to create a better image of psychiatry include combined approaches that address aspects like legislation, advocacy and the implementation of media guidelines. Social acceptance and the promotion of positive images can be fostered by direct contact based-education and by supporting dialogue between the affected and non-affected groups. When improving attitudes, it is vital to focus on changing knowledge, attitudes and behaviour of all involved groups [3].

3. EPA recommendations

The European Psychiatric Association (EPA), with its 40 National Psychiatric Associations (NPA) from 37 European countries and individual members (representing together almost 80,000 European psychiatrists), considers that to further improve the image of psychiatry and psychiatrists, there is a strong need to move forward, by engaging all relevant actors, including patients, their carers and families, the media, (mental) health professionals and medical students, as well as policy makers.

As a network of professionals, the EPA can be a valuable partner in advocating at national/regional/local level for and with patients and their families, in close collaboration with general practitioners, primary care professionals and social services. Many joint activities can be put into place, ranging from implementing awareness-raising actions to influence public opinion, to training and capacity building on specific psychiatry related issues.

After exploring causes, explanations and consequences of the current image of psychiatry elsewhere [1], the EPA puts forward the following recommendations to further improve the image of psychiatry and psychiatrists.

3.1. The attitude and language of excellence

The EPA, psychiatrists and all interested parties should always strive to promote positive attitude and language, and celebrate excellence and optimism in psychiatry. Moving away from a discourse that too often uses unfounded negative terminology, towards an attitude and language of aspiration, achievement and excellence will put the research lessons on expectancy and confirmation bias into practice. Terms with negative connotations should wherever possible be actively avoided.

3.2. Policy makers

Sharing information with policy makers about therapeutically and financially effective interventions is beneficial to both sides.

Involving policy makers at an early stage of service planning is key to effective interventions.

Shaping evidence-based public health policies: making evidence available to key decision makers is crucial for improving practice and achieving realistic policy outcomes.

3.3. Media

Collaborating with the media and working with them on reporting reliable information will allow for informed and accurate positive messages and will help to promote an excellent public image of psychiatry. Educational reporting without sensationalism is an important aspect of good quality media coverage.

Psychiatrists need to be clear about their messages: advocating in a direct, transparent and evidence-based way on selected topics of psychiatric competence and innovation.

3.4. Patients and their carers

Patient engagement in service assessment: regular assessment of clinical services will enable clinicians to understand what changes are needed and how to even deliver services. Audits about patient satisfaction and feedback will encourage staff to provide better services.

Information and education: regular courses, leaflets and new information technology methods can provide relevant information to patients, families and carers to identify early signs and manage symptoms. Increasing self-esteem and self-confidence of patients has the potential to improve well-being [1].

Working with patient and family organizations and building trust [7] is key to improving knowledge and practice.

Cross-sector collaboration in social and mental healthcare leads to increased commitment and improved outcomes, which will also further improve the image of psychiatry.

3.5. Health professionals and medical students

Delivering excellence: delivering, modelling and teaching the highest standards in clinical and academic–direct contact with positive role models has a powerful effect in changing perceptions.

Leadership: psychiatrists as professionals must take the lead in taking pride in and promoting high quality clinical practice, looking after the most challenging and underserved patients. The message has to be supported and encouraged to promulgate the truth that many psychiatric conditions can be effectively treated, and long-term outcomes substantially improved.

Evidence-based research results should be circulated widely. Guidelines and guidance [8] based on scientific research must be produced and used across all psychiatric settings.

Culturally-sensitive interventions: services must take into account different cultural backgrounds when dealing with psychiatric illnesses [9].

The focus on physical and mental health service integration must be considered and supported by specific and fair funding.

Teaching: exposure to enthusiastic teachers in undergraduate settings should be encouraged and teachers rewarded accordingly. New technologies and e-learning should be used widely.

Training: involving medical students in tailored projects and activities will help them in understanding the effectiveness of treatment on patients' clinical status and well-being.

Disclosure of interest

The authors declare that they have no competing interest.

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