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**The Press and The Public on Mental Health:  
A Corpus Linguistic Analysis of UK Newspaper  
Coverage of Mental Illness (1995-2014), Compared  
with the UK National Attitudes to Mental Illness  
Survey**

Ewan David Hannaford

*Submitted in fulfilment of the requirements for the degree of  
Master of Philosophy (Research)*

*English Language and Linguistics  
School of Critical Studies  
College of Arts  
University of Glasgow*

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## **Abstract**

Stigmas associated with mental illness have been shown to have a severe impact on the lives of people with mental health conditions. Mass media influence on the formation and perpetuation of stigmas is well-documented, and prior research has found the media to present several stigmatising representations of mental health issues. Due to the influence of the media in informing public opinion on mental illness, there have been concerted efforts in recent times to de-stigmatise press coverage of mental illness. However, whether coverage has changed in response to these efforts, and whether recognised stigmas and stereotypes have been dispelled from UK press discourse on mental health has not yet been fully established.

To evaluate this, this study analysed a corpus of 12,000 UK newspaper articles from 1995-2014, with keyword and collocate analyses being implemented. The results of these analyses were compared between years of coverage and types of British newspaper, determining how UK press coverage of mental health issues changed over a 20-year period, with particular focus on the presence or absence of stigmas in this coverage. Keyword and collocate results were then compared with responses to questions in the UK national *Attitudes to Mental Illness Survey* (TNS BMRB, 2015), to ascertain the extent to which public attitudes correlated with press coverage of the same period. Decreases in key stigmas were uncovered in press coverage and found to correlate with decreases in negative public attitudes relating to these stigmas, as well as increases in press coverage of mental health stigma correlating with increased public awareness of stigma. However, whilst improvements in press coverage of mental illness were identified, stigmatising coverage was also found to have remained present to a significant degree in the UK press, demonstrating the need for continued de-stigmatisation efforts.

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# 1. Introduction

Mental illness is well-recognised as a stigmatised subject in society (National Institute of Mental Health, 1996; Corrigan, et al., 2005a; Rüsçh, et al., 2005; Seeman, et al., 2015). Stigmas about mental illness evolve from stereotypes about what people with mental illness are usually like, as well as prejudice and discrimination towards people with mental illness based on these stereotypes (Crowe, et al., 2016: 98). As a result of societal stigmas, the public has been shown to hold several negative and discriminatory attitudes towards people with mental health conditions (Angermeyer & Dietrich, 2006; Klin & Lemish, 2008; Sickel, et al., 2014). Stigmas about mental illness can also produce: ‘self-stigma’, whereby people with mental illness stigmatise themselves by internalising negative public attitudes; ‘help-seeking stigma’, whereby people are reluctant to seek help for mental health conditions due to fear of being stigmatised; ‘anticipated stigma’, whereby people are reluctant to disclose their conditions due to fear of mental health stigma; and ‘associative stigma’, whereby those associated with people with mental illness also experience stigma (Crowe, et al., 2016: 98).

Consequently, stigmas can have wide-ranging impacts on the lives of people with mental illness. Stigmas have been shown to negatively affect the ability of people with mental illness to find housing, access education, attain employment, and satisfy other basic needs (Corrigan, et al., 2005a; Thornicroft, 2006; Sickel, et al., 2014; Rhydderch, et al., 2016). Consequently, stigmas lead to the social exclusion of people with mental illness (Schneider & Bramley, 2008). This can lead to further problems of self-stigma in people with mental illness, with recovery from mental disorders being negatively impacted by low self-esteem and a ‘why try’ attitude towards personal growth, caused by internalised negative public attitudes and societal rejection (Link, et al., 2001; Corrigan, et al., 2016). Stigmas can also make policy makers and governmental bodies hesitant to fund mental health services (Sartorius, 2007; Pescosolido, et al., 2010). People working within such services can also experience associative stigma, with mental health professionals being viewed as more unpredictable than GPs, as well as being perceived to have lower ‘societal status’ and as being ‘undesirable for long-term contact’ (Ebsworth & Foster, 2016). Thus, stigmas can not only affect the quality of life of people with mental illness, but also the quality of services and treatment available for such conditions. As a consequence: ‘The stigma of mental illness can be more disabling than the illness itself ...’ (Guruge, et al., 2017). Understanding and reducing such stigma is therefore crucial to improving the treatment of mental illness and the lives of people with such conditions.

Previous research has positioned the media as central to the establishment and continuation of mental health stigmas (Stout, et al., 2004; Corrigan, et al., 2005a; Rüsçh, et al., 2005). The public has been shown to derive many opinions about mental illness from



mass media coverage (Borinstein, 1992; Philo, 1999; Brown & Bradley, 2002; Dietrich, et al., 2006), with stereotypes and prejudices forming out of negative representations of mental illness in the media (Wahl, et al., 2002; Knifton & Quinn, 2008; Goulden, et al., 2011; Zexin, 2017). Newspapers, specifically, have been shown to play a pivotal role in forming public opinion on mental illness (Thornton & Wahl, 1996; Corrigan, et al., 2005b; Stuart, 2006; Slopen, et al., 2007; Shepherd & Seale, 2010), and recent experimental studies have demonstrated that media articles continue to have significant influence on public attitudes (see Wilson, et al., 2016; Brewer, et al., 2017). Therefore, whilst the rise of alternative media sources may have diminished the influence of print media, the press holds significant sway over the opinions of a large proportion of the general public, and continues to affect societal perceptions and stigmas surrounding mental illness.

Stigmas about mental illness are varied and nuanced, but for the purposes of this study they were grouped into four broad categories – danger, criminality, benevolence, and severity. *Danger stigma* refers to the stigma that people with mental illness pose a threat to wider society, based on stereotypes that such people are generally dangerous or violent individuals (Wahl, et al., 2002; Goulden, et al., 2011; Varshney, et al., 2016). This stigma leads to fear and exclusion of people with mental illness by wider society (National Institute of Mental Health, 1996; Corrigan, et al., 2005a; Stuart, 2006). Of course, some mental disorders are associated with a higher tendency for violent behaviour, most notably schizophrenia (Välimäki, et al., 2016). However, many mental illnesses are not associated with violent behaviour, and the proportion of total societal violence attributable to people with mental illness is low (Walsh, et al., 2002), which ‘... clearly contradicts the general belief that patients with severe mental illness are a threat.’ (Varshney, et al., 2016: 223). Danger stigma can therefore be characterised as an over-estimation of the threat that people with mental illness pose to the public, and a false belief that people with mental illness are commonly involved in dangerous or violent behaviour. Media representations have been shown to contribute significantly to this stigma, consistently portraying people with mental illness as dangerous and disturbed individuals, and emphasising dangerousness as a potential feature of mental illness (Philo, 1999; Wahl, 2003; Stuart, 2006; Goulden, et al., 2011). Corrigan, et al. (2005b) found that 39% of US articles on mental illness focused on dangerousness or violence; meanwhile, Ward (1997) found that 49% of UK articles associated mental illness and aggressive behaviour, whilst Coverdale, et al. (2002) found this figure to be 61% in New Zealand newspapers. Similarly, in the Italian press, around 40% of articles relating to violent acts credited these acts to an individual with mental illness (Carpiniello, et al., 2007). This far exceeds the actual proportion of violence attributable to

people with mental disorders – demonstrating the extent of danger stigma in the media – with other studies finding that: ‘... the percentage of general violence associated with MD is low, indeed not above 14% ...’ (Klin & Lemish, 2008).

Associated with danger stigma is *criminality stigma*, which is the stigma that people with mental illness are disproportionately involved in criminal behaviour (Wahl, 2003; Corrigan, et al., 2005a; Stuart, 2006; Klin & Lemish, 2008). In press coverage, criminality stigma also generally contributes to danger stigma, since these stigmas are often perpetuated by articles about mental illness and violent crime (Penn, et al., 1999; Klin & Lemish, 2008; Goulden, et al., 2011; Brewer, et al., 2017; Zexin, 2017). However, coverage relating to danger does not always overlap with coverage relating to criminality: in Coverdale, et al.’s 2002 study of New Zealand press coverage, 61% of articles associated mental illness with dangerousness, whilst only 47% of articles associated mental illness with criminality. Equally, criminality stigma does not necessarily contribute to danger stigma: people with mental health problems may be ‘... portrayed in the media as victims of the criminal justice system ...’ (Mulvey & Schubert, 2017: 238), or coverage may relate to legislative issues surrounding mental illness, such as criminal responsibility (Whitley, et al., 2017). In such cases, mental illness may be stigmatised as relating to criminality, without being associated with danger. For this reason, whilst there is significant overlap between these two stigmas, they were treated as distinct in this study. As with danger stigma, criminality stigma contributes to attitudes of fear and exclusion towards people with mental illness, due to the perceived threat of antisocial behaviour from such people, and stereotyping of such people as criminals (Wahl, et al., 2002; Corrigan, et al., 2005a; Rüsç, et al., 2005; Brewer, et al., 2017).

As well as the more overt stigmas of danger and criminality, there are stigmas of mental illness which manifest themselves more subtly. *Benevolence stigma* refers to the treatment of people with mental illness as individuals who are disempowered and incapacitated by their illness, reducing such people to objects of pity (Corrigan & Watson, 2004). Consequently, media coverage which attempts to share the ‘plight’ of people with mental illness, even if intended to engender sympathy, can actually further stigmatise people with mental illness; as Wahl, et al. describe: ‘... depictions of those with mental illnesses as helpless unfortunates, however benignly intended, are not truly favorable or attractive images.’ (2002: 28). Perceptions of people with mental illness as objects of pity can damage their sense of self-worth, leading to self-stigma, lower self-esteem, and increased depression (Fominaya, et al., 2016). Benevolence stigma can also produce belittling and authoritarian attitudes towards people with mental illness, with wider society believing that people with

mental illness need their lives managed for them (Brockington, et al., 1993; Corrigan, et al., 2001).

Mental illnesses are also often perceived, and represented, as being highly enduring and debilitating disorders. Early academic studies identified ‘... a media bias toward presentation of severe, psychotic disorders’ (Wahl, 1992: 345), and subsequent studies have demonstrated that the media generally depicts mental illnesses as strongly disabling diseases from which people do not recover (Wahl, et al., 2002; Wahl, 2003; Corrigan & Watson, 2004; Stuart, 2006; Rhydderch, et al., 2016). Recently, Seeman, et al.’s world survey of mental illness attitudes (2015) found that fewer than 8% of respondents from the UK agreed that ‘individuals with mental illness can overcome their illness’, demonstrating the prevalence of this stigma. For the purposes of this study, the stigma that mental illnesses are always highly serious and/or long-lasting disorders has been dubbed *severity stigma*. As with benevolence stigma, severity stigma can result in wider society overestimating the impact which mental illness has on people’s lives, leading to people with mental illness being devalued and diminished (Wahl, 2012). This can result in perceptions of people with mental illness as burdens on society, who are unable to contribute due to their illness (Crowe, et al., 2016). In turn, this can result in self-stigma and decrease the chances of recovery from such conditions, due to decreased self-belief amongst people with mental illness that they can recuperate (Yanos, et al., 2010; Corrigan, et al., 2016). Therefore, whilst mental health conditions are undoubtedly serious conditions, excessive portrayals of severe mental illness, which undermine the agency of people with such disorders, can also be stigmatising.

With the impact of stigma on the lives of people with mental illness and the significant role of the media in establishing and perpetuating these stigmas apparent, the importance of research into media coverage of mental illness is clear. This study chose to focus on UK press coverage, using a corpus linguistic methodology to examine newspaper articles from 1995-2014. Several studies have already been conducted into UK press coverage of mental illness (see Robertson, 2009; Shepherd & Seale, 2010; Goulden, et al., 2011; Thornicroft, et al., 2013; Rhydderch, et al., 2016), which found improvements in British press coverage of mental health issues over time, with stigmatising coverage decreasing and de-stigmatisation-related coverage increasing. However, these studies were limited in their scope by the use of more traditional methods of linguistic analysis, typically examining coverage from only 1-3 years. By adopting a corpus linguistic approach, this study was able to cover a much larger time-scale (20 years), and could analyse a larger quantity of articles from each year within that timeframe. This allowed for a more extensive picture of mental health discourse in the UK press to be produced, with the possibility of

long-term trends being uncovered that were not apparent in smaller-scale analyses. Studies in changes in public attitudes towards mental illness in the UK have also been conducted (see Mehta, et al., 2009; Evans-Lacko, et al., 2013; Thornicroft, et al., 2013; TNS BMRB, 2015), with stigmatising attitudes being found to have generally decreased over time. However, previous studies on press coverage and public attitudes have tended to be conducted in isolation of one another, without comparisons being made between the two. This has been identified as a significant gap in the research by previous studies (Klin & Lemish, 2008; Goulden, et al., 2011); as Goulden, et al. note (2011: 7): ‘... there is clearly scope for more longitudinal studies ... Ideally, such research should be linked with audience reception studies, to see how changes in coverage might translate into changes in public opinion.’ To fill this gap, this study used the UK national *Attitudes to Mental Illness Survey (AMIS)* (TNS BMRB, 2015) to compare UK public attitudes with the results of corpus analysis of press coverage between 1995-2014. Thus, a large-scale, diachronic analysis of UK press discourse on mental health was conducted and compared with public attitudes, answering the key research question: How did UK press coverage of mental illness change from 1995-2014, and how did this correlate with changes in attitudes towards mental illness amongst the British public?

## **2. Methodology**

## 2.1. Methodological Choice

For this study into press coverage of mental health, a corpus linguistic methodology was chosen, in which large collections of texts are analysed using computational methods. A major advantage of corpus linguistic analysis is that it allows for data to be analysed on a much larger scale than other means of linguistic analysis, allowing it to uncover: ‘... linguistic patterns and frequency information that would otherwise take days or months to uncover by hand, and may run counter to intuition.’ (Baker, 2006: 2). Being able to analyse discourse on this scale was particularly important in this research due to its diachronic nature, with the examination of press coverage from 1995-2014 necessitating analysis of a large range of data. A corpus linguistic approach allowed 12,000 articles, spanning 20 years of press coverage, to be analysed with relative ease; analysis on this scale would have been impossible in the given timeframe of this research using more traditional methods of linguistic analysis. This extensive set of articles also meant that research findings had large quantities of data supporting them, increasing their reliability.

Corpus linguistic analysis also mitigates against researcher bias because the fundamental data analysis is conducted by impartial computer software, rather than individual researchers. This helps to prevent bias because; ‘... we are starting (hopefully) from a position whereby the data itself has not been selected in order to confirm existing conscious (or subconscious) biases.’ (Baker, 2006: 12). Of course, there remains significant space for bias to influence the outcome of a corpus linguistic study, such as in the interpretation of results or the selection of statistical measures (Baker & McEnery, 2015: 8), but, nonetheless, the objectivity of automated software analysis helps to safeguard the validity of findings. This is particularly important for research which investigates stigmas and biases, such as this study, since preconceptions or prejudices are more likely to influence analysis of stigmatised subjects. Other discourse studies of press coverage of mental health have tended to adopt a ‘content analysis’ approach (see Coverdale, et al., 2002; Wahl, et al., 2002; Slopen, et al., 2007; Goulden, et al., 2011; Thornicroft, et al., 2013; Rhydderch, et al., 2016), which relies on individual researchers appraising newspaper articles and coding them for thematic content. Whilst such studies utilise precise coding systems to tag article themes, with tags usually being cross-reviewed by multiple coders, there exists the possibility of internal biases influencing the coding of articles in such analysis, which is avoided by a corpus linguistic approach. Additionally, these previous studies were limited by the time and effort required to code articles, whereas computational analysis allows for many more articles to be compared at once and could uncover large-scale discourse trends that were

previously overlooked. Subsequently, the shortcomings of prior studies into press coverage of mental illness provided further motivation for adopting a corpus linguistic approach in this study.

## **2.2. Corpus Construction**

To conduct this corpus linguistic analysis of UK press discourse on mental health, the corpus to be analysed first had to be compiled. Though several large digital newspaper corpora already exist, these were either too general or did not align with the period being investigated for use in this research. A new corpus was therefore created for the purposes of this study. Since this study aimed to compare press coverage with public attitudes on mental health issues, a time-frame of 1995-2014 was selected for the corpus, allowing for direct comparison with survey responses from *AMIS* (TNS BMRB, 2015), which ran throughout 1994-2014. Although *AMIS* began in 1994, articles from this year were not included in the corpus due to difficulties in sourcing articles from *The Daily Mirror* in this year, as well as to provide a clean 20-year period for dividing into further sub-periods for analysis.

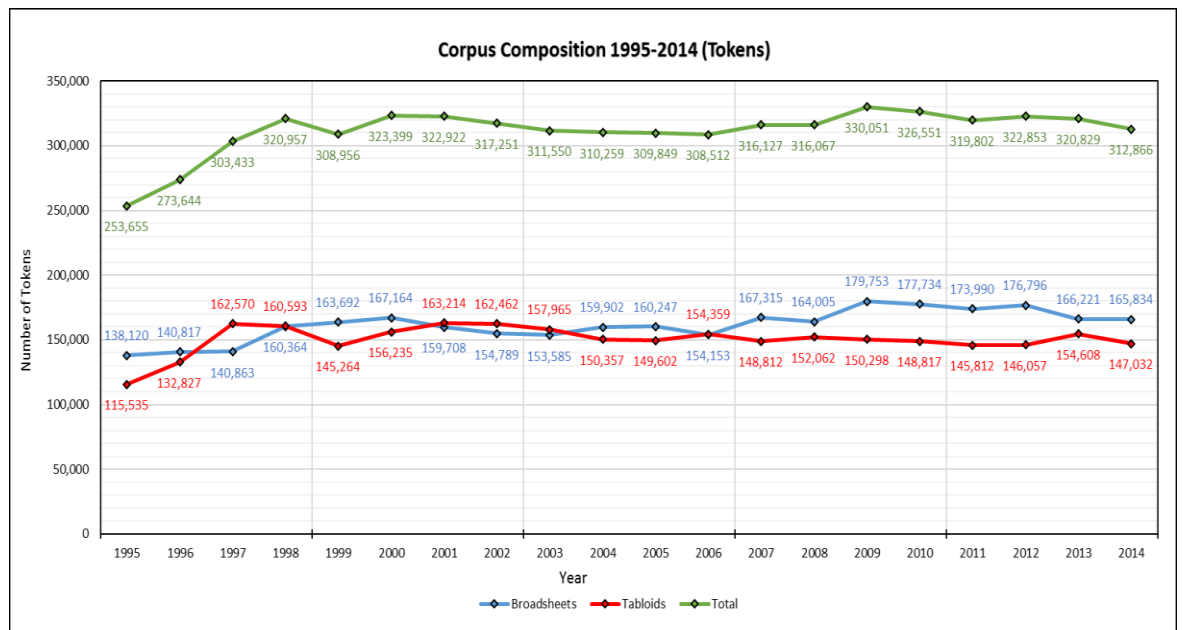
The online newspaper archive *LexisNexis* (2017) was used to source articles for the corpus; this has been shown to be an effective and reliable source of press coverage in previous studies (e.g. Gabrielatos & Baker, 2008; Shephard & Seale, 2010; Goulden, et al., 2011; Allen & Blinder, 2013; Thornicroft, et al., 2013). Six UK newspapers were selected as the sources of articles for the corpus – *The Daily Mail* (tabloid), *The Daily Mirror* (tabloid), *The Evening Standard (London)* (tabloid), *The Guardian* (broadsheet), *The Independent* (broadsheet), and *The Times* (broadsheet). A mixture of tabloid and broadsheet newspapers was chosen to ensure that the corpus was as representative of general press coverage as possible, and that findings were not limited to an individual newspaper, or specific type of newspaper; since a corpus can almost never contain the entirety of the discourse being investigated, representativeness in corpus design is important to allow conclusions from corpus analysis to be extrapolated to the wider discourse being examined (Leech, 1991; Biber, 1993). Including articles from broadsheets and tabloids also enabled the corpus to be divided into corresponding sub-corpora, meaning changes in the mental health discourse of different categories of newspaper could be compared and correlations between different categories of newspaper and public attitudes could be assessed. The use of a third category of UK national newspaper, ‘mid-markets’ (defined as sitting in-between tabloids and broadsheets by the Audit Bureau of Circulations (Franklin, 2009)), was

considered. However, mid-market articles were not available for the full 1995-2014 period in *LexisNexis*, other than, potentially, *The Daily Mail* (see below). Some critics have also questioned the validity of the mid-market category in modern journalism, suggesting a growing polarisation ‘... between the quality and the popular, at the expense of those middle newspapers which we might term the ‘serious popular’.’ (Sparks, 1992: 37). Mid-markets are instead often defined as a sub-category of tabloids (see Connell, 1998; Goulden, et al., 2011). Consequently, a mid-market category was not utilised, but *The Daily Mail* was included in the tabloid sub-corpus. However, even with the inclusion of *The Daily Mail* in the tabloid sub-corpus, there were only two UK national tabloids in *LexisNexis* with articles from each year of the 1995-2014 timespan. As a result, the largest regional tabloid newspaper, *The Evening Standard (London)*, was selected as the third tabloid newspaper instead, since articles from this newspaper were available for the full 1995-2014 period – this approach follows that of Goulden, et al. (2011).

A word range was imposed on the article search to ensure parity between lengths of articles in the corpus: since broadsheet articles tend to be longer than tabloid articles, this range ensured that similar amounts of data from each newspaper category were included in the corpus, maintaining corpus representativeness. However, too narrow a range could also have negatively impacted the representativeness of the corpus, by oversaturating the dataset with particular types of article. For example, opinion pieces tended to be longer than other tabloid articles, meaning when a higher, more narrow range was tested, the results contained an over-abundance of opinion pieces, with shorter-form articles being excluded. A very narrow range therefore favoured genres of articles with lengths within that chosen range, skewing the final corpus from being as representative of general press discourse as possible. Too narrow a range would also have limited the number of articles available for collection, with too low a maximum removing excessive broadsheet articles and too high a minimum removing excessive tabloid articles. Balancing these concerns, a range of 200-1000 words was selected for article length; this range was narrow enough to ensure articles were roughly the same length but was wide enough to maintain diversity in the articles collected. As Fig. 2.2.1 shows, this technique successfully balanced the amount of data included in each year of the corpus, other than slightly lower levels in 1995 and 1996.



Fig. 2.2.1:



Using these parameters, a search was conducted for any articles archived under the index terms ‘Mental Illness’ or ‘Mental Health’ in *LexisNexis*, for each of the selected newspapers. Duplicates with moderate similarity were grouped in the results, preventing slightly reworded versions of articles from individual newspapers being included multiple times in the corpus. Results were sorted by relevance, to ensure articles included in the corpus were those most related to the index terms. The top 100 most relevant articles from each selected newspaper were then downloaded as plain text files, for each year of the corpus; the inclusion of more articles was tested but there were insufficient articles in certain years to collect over 100 per year per newspaper. In 1996, for *The Daily Mail*, and 1997, for *The Evening Standard*, the imposed word range limited the search results too greatly for 100 articles to be collected. Therefore, the word range was removed from article searches for *The Daily Mail* in 1996, and for *The Evening Standard* in 1997, to allow sufficient articles to be collected. Though this was not ideal, since it led to discrepancies in the amount of data from these newspapers in these years, it was the only viable solution to maintain representativeness in the corpus, and was counter-balanced by the word range imposed on the other newspapers. Once article collection was complete, the corpus contained 600 articles for each year from 1995-2014, generating a corpus of 12,000 articles, containing slightly over 6.2 million words.

When downloaded from the Nexis archive, each file of 100 articles also included various metadata about each article which was automatically included by the archive, such as dates of publication, copyright information, and author names. Consequently, the final

stage of corpus construction was to tag this additional information and prevent it from showing up in the corpus analysis results. This was done by developing a set of regular expressions in *Notepad++* (Ho, 2017) which placed each piece of metadata into angled brackets, with the corpus analysis software then being set to exclude words in angled brackets from results. All expressions were tested in *Notepad++* before being implemented, to ensure that they did not unintentionally tag any actual article content and prevent this data from appearing in results. The full set of regular expressions was then run on the untagged corpus, producing a tagged corpus to use in the analysis – a complete list of the regular expressions used to hide metadata is presented in Appendix A. Corpus articles were also categorised into five periodic sub-corpora, with each being comprised of data from four consecutive years – 1995-1998, 1999-2002, 2003-2006, 2007-2010, and 2011-2014. Sub-corpora based on newspaper type (‘categoric sub-corpora’) were also implemented within these periods – e.g. Broadsheets 1995-1998, Tabloids 1995-1998, Broadsheets 1999-2002, Tabloids 1999-2002, etc. These multi-year periodic groupings were created to mitigate against temporary, short-term changes in press coverage, and ensure that corpus analysis results represented genuine, sustained changes in press discourse on mental health; the categoric sub-corpora, meanwhile, allowed for the comparison of coverage between types of newspaper.

### **2.3. Keyword Analysis**

All corpus analysis was conducted using the corpus analysis toolkit *AntConc* (Anthony, 2017). The first stage of analysis was keyword analysis. Keyword analysis uses statistical measures to compare the frequency of a word in a corpus with the frequency of that word in a reference corpus, revealing which words occur more frequently in the examined corpus than would normally be expected (Baker & McEnery, 2015: 2). The reference corpus chosen for this study was the *British National Corpus (BNC)*, since it provided the largest freely-available corpus that was representative of general British English over the chosen span of the research. By identifying which terms appear more often in a selected discourse than in standard language, keyword analysis can uncover ‘... the saliency of certain text features, such as the “aboutness” of a text, stylistic characteristics, or descriptors of text genres’ (Pollach, 2012: 269). Analysis of keywords can thus reveal themes and ideologies in different discourses, and; ‘Words and phrases that are key in a text or in a corpus may be shown to be indicative of the writer’s position and identity, as well as of the discourse

community, with its values and beliefs about the subject matter ...' (Bondi, 2010: 7). Keyword analysis therefore provided an excellent means of identifying general changes in mental health discourse, with the different keywords of each period revealing how salient themes in UK press coverage of mental illness have changed over time.

Typically, keyword analysis uses Log-Likelihood (L-L) or Chi-Squared statistical measures, with corpus software determining the likelihood that a term's higher-than-expected frequency occurred by chance (Oakes, 2009; Scott, 2017). Using these measures, each term in a corpus is assigned a p-value, and '... the smaller the p value, the more likely that the word's strong presence ... isn't due to chance but a result of the author's (conscious or subconscious) choice to use that word repeatedly.' (Baker, 2006: 125) Log-Likelihood thus determines how confidently we can say that a particular term is 'key' to a given text or corpus. However, whilst this test allows us to determine statistical significance, and '... remains the most widely used keyness statistic' (Potts, et al., 2015: 154), it does not allow us to determine the strength or influence of a keyword (Oakes, 2009: 168; Gabrielatos & Marchi, 2012). As an alternative metric of keyness, Gabrielatos & Marchi (2012) identify effect size, which can be calculated as the difference between the frequency of a word as a percentage of the study corpus and its frequency as a percentage of the reference corpus. Comparing relative frequencies in this way allows us to determine the *strength* of a given term's keyness, rather than the *certainty* that it is key. Therefore, since '... significance is only important for deciding if we have an observation of association or not' (Johansson, 2013: 217), effect size provides a better metric for ranking the keywords of a corpus, once statistically significant keywords have been determined.

The latest version of *AntConc* provides measurements for effect size and statistical significance, and so a combination of both metrics was used in this study to calculate the strongest statistically-significant keywords. The Log-Likelihood (L-L) measurement of statistical significance was used, with the significance threshold being set to  $p < 0.01$  (a widely-accepted corpus linguistic standard for keyword analysis (Gabrielatos & Marchi, 2012)). *AntConc* was also set to utilise the Bonferroni correction in L-L calculations, which helps to avoid type-1 errors, whereby terms are deemed to be key due to chance variation (Oakes, 2009: 168). With keywords below the significance threshold being excluded from results, the 'Ratio of relative frequencies' measurement for effect size was then used to calculate the strongest keywords, up to a maximum of 1000 keywords. Using these settings, keyword lists were generated for each year of corpus data, and for each category of newspaper in each year of corpus data – e.g. 1995 keywords, 1995 broadsheet keywords, 1995 tabloid keywords, etc. Once these keyword lists were generated, they were grouped

into the five periodic sub-corpora mentioned earlier and processed using the VLOOKUP function in *Microsoft Excel* (2016), identifying keywords which occurred in all four years of each periodic grouping to provide lists of periodic keywords for comparison. This was based on Scott's (1997) concept of 'key-keywords' – words which are key in many texts – with the key-keywords in this study being identified by their presence in multiple years of corpus coverage.

Whilst the calculation of periodic keywords would have been simpler if keyword analysis had been conducted on the data of each four-year period as a whole, this approach was intentionally avoided. This was because events which received significant coverage in individual years of a period could skew keyword results for the whole period if all four years were analysed together, as one 'text'. The calculation of periodic 'key-keywords' avoided this, since keywords relating to events in specific years did not appear in all four years of a period, thereby being excluded from key-keyword results. Comparisons between periodic key-keywords therefore allowed for stable, consistent changes in press discourse to be discovered; this process was repeated for broadsheets and tabloids, allowing for the comparison of broadsheet and tabloid key-keywords for each period. However, major short-term shifts were also of interest to this study, so their total loss was also undesirable. By calculating individual year's keywords first, any important shifts screened out by key-keyword processing were picked up during initial results, and could still be discussed. Adopting a key-keyword approach therefore meant the corpus could be analysed on both an annual and periodic level. Key-keyword lists were sorted by average effect size, with the effect size of each term being averaged for each four-year period, placing keywords that were consistently strong at the top of key-keyword rankings.

After key-keyword lists were produced, one drawback of effect size as a ranking metric became apparent, with low frequency, unique keywords being over-represented in rankings, due to their absence in the reference corpus. This meant that annual keyword lists were dominated by proper nouns naming people involved in individual stories across different years. Whilst this was interesting, since most of these terms related to criminal cases, the promotion of unique, low-frequency terms in keyword rankings was incongruous with the aims of this study: having annual keyword lists dominated by terms unique to that year made comparisons between individual years highly challenging, as well as obscuring changes in more standard keywords relating to mental health stigmas. Consequently, to ensure that singular, low-frequency terms did not obstruct annual keyword analysis, an L-L threshold of 150 was set for annual keywords, with lower L-L keywords being removed from results. These final keywords were then ranked by effect size. This combination of L-L and

effect size ensured that annual keywords were highly reliable, due to the L-L threshold, and that the strongest were at the top of each keyword list, due to effect size ranking.

Twenty keyword lists were produced using these criteria, one for each year in the corpus, and each of these was examined for significant events and tropes. Following annual keyword analysis, key-keywords were investigated for each period, with key-keywords being grouped and analysed according to semantic themes (with particular focus on any potentially stigma-related terms). In cases where the meaning of a key-keyword was unclear, the context of the term was expanded and the term analysed in its original location in corpus articles, before being grouped with similar keywords according to its usage. Broadsheet and tabloid key-keywords were also produced and assessed using the same procedures, to determine whether general themes in each period's coverage of mental illness were equally apparent across newspaper categories.

## **2.4. Collocate Analysis**

Following keyword analysis, collocate analysis was also conducted on the corpus. Collocate analysis reveals information about a corpus or text at a lower level of analysis than keyword analysis, since it identifies words which frequently co-occur with one another (Sinclair, 1991). By searching for the collocates of a specific target term or phrase, collocate analysis can uncover how that term is usually used, and identify other concepts with which it is frequently associated. As Baker (2006: 96) points out; 'Words ... can only take on meaning (that which is signified) by the context that they occur in', and the collocates of a term can thus imbue that term with additional senses by their frequent co-occurrence, in a process known as 'semantic prosody' (Louw, 1993: 157). This means that collocates can become carriers; '... of certain cultural stereotypes, or domain specific meanings' (Bartsch, 2004: 12), with collocate analysis showing how specific concepts or entities are represented in a discourse, by revealing the other concepts with which they are regularly linked. By analysing the collocates of a target term representing 'mental illness', this study could identify the ideas, themes, and stigmas which were commonly associated with mental illness, and how these changed over time. As the target term for collocate analysis, the term 'mental illness' was chosen, since it was the term most frequently used to discuss general mental illness throughout the corpus, as well as maintaining a high presence in each period's key-keywords. Other possible target terms were tested, but each came with its own problems. The term 'mental disorder' was high-ranking in key-keywords but was relatively infrequent

in the corpus, and thus produced few collocates for analysis. Preliminary investigation of ‘mental health’ as a potential target term found that this term was more often used to discuss surrounding issues, such as mental health services or the Mental Health Act, than mental health conditions themselves; ‘mental illness’ was therefore deemed more suitable for this investigation.

Having selected the most appropriate target term, *AntConc* was used to calculate the collocates of ‘mental illness’ in each of the five periodic sub-corpora, and for each category of newspaper in each period. It was initially planned that collocates would be analysed in the same way as keywords, with annual collocates being calculated and then used to produce tables of ‘key-collocates’ (i.e. collocates which appeared in all four years of a period) for each period. However, since ‘mental illness’ only appeared a few hundred times in each year of analysis, the sample size was vastly reduced for collocate analysis. Consequently, there were only 100-200 collocates in each year which passed statistical thresholds, and even fewer when assessing broadsheet and tabloid collocates; this meant that when key-collocates were then calculated there were too few for meaningful analysis. The decision was therefore made to analyse collocates of ‘mental illness’ for each period as a whole, and for each newspaper type within each period, with collocates being calculated from the combined data of all four years of each period. Though this meant that individual years could potentially skew collocate results for the period, the reduction in sample size inherent to collocate analysis rendered this the only practical solution.

As with keywords, *AntConc* offers multiple measurements for identifying significant collocates. These different measurements follow the same dichotomy observed in keyword measurements: T-score, and the similar Log-Likelihood, provides a measure of the statistical significance of a collocation, indicating how certain we can be of a connection between two terms, whilst Mutual Information (MI) compares the number of times two words occur as collocates in a corpus against how many times they appear separately, indicating how strong a collocation is (Harper Collins, 2008). Similar to effect size measurements, higher MI-scores are attributed to ‘... rare words that produce unique collocations than to collocations containing frequent words’ (Pollach, 2012: 270), and can ‘... tend to put too much emphasis on infrequent words’ (McEnery, et al., 2006: 220). However, T-score can promote ‘uninteresting pairings’ with high frequencies (Harper Collins, 2008), as can L-L, due to the similarity of these measurements (Lyse & Andersen, 2012: 93). Consequently, it is generally recommended to use a combination of measures when calculating collocates (Lindquist, 2009; Pollach, 2012). A combination of L-L and MI-scores was therefore adopted for this study, ensuring results were both reliably and strongly collocated with the target term. The

latest version of *AntConc* allows for the calculation of collocates using a combined measure of L-L and MI-scores – this calculates the MI-score and L-L score of each collocate and assigns collocates with a L-L p-value greater than 0.05 an MI-score of 0, meaning these collocates can easily be excluded from results. Collocates were calculated using a window span of four words to the left or right, using Louw’s (2000) concept of a ‘... nine-word window of acknowledged collocational force’ in which collocates influence the target term. As advocated by Stubbs (1995), collocates with a frequency of 1 were filtered from results, due to their statistical unreliability.

Using these settings, a list of collocates for ‘mental illness’ was calculated for each period, and for each category of newspaper in each period, and ranked by MI-score. Collocates were grouped according to semantic themes and compared between periods, with particular focus on stigma-related terms. Key motifs for each period were also analysed in broadsheet and tabloid collocates, to assess whether the same themes were present in each type of newspaper.

## **2.5. Attitudes to Mental Illness Survey Comparison**

Following corpus analysis, keyword and collocate results were compared with responses to questions in the UK national *Attitudes to Mental Illness Survey (AMIS)* (1994-2014) (TNS BMRB, 2015). This comparison ascertained how changes in press coverage correlated with changes in public attitudes over the same period. The comparison was primarily focused on the four main stigmas of mental illness identified in this study’s literature review – namely, danger, criminality, benevolence, and severity. Survey questions which related to each of these four stigmas, as well as questions relating to the de-stigmatisation of mental illness, were identified, and grouped accordingly. Questions were deemed to relate to a stigma when it was considered likely that responses would be affected by the public’s belief in the respective stigma. However, responses to these questions may not necessarily have related to the stigma they were grouped with – for example, someone could agree with the statement ‘I would not want to live next door to someone who has been mentally ill’ without necessarily believing that people with mental illness are a threat. Nevertheless, it was judged that most responses to this statement would be strongly affected by whether or not the respondent believed people with mental illness to be dangerous or violent, and so this question was categorised as relating to danger stigma. This approach was adopted for all stigma groupings.

Responses to each question were calculated as an average for each of the five periods of corpus coverage, with the percentage of people agreeing or disagreeing with each survey question being added together and divided by the number of years in which responses were available. Between 1997 and 2007, the survey was only run every three years, and did not run in 2006, meaning that data was only available for one year of the 1999-2002 and 2003-2006 periods (2000 and 2003, respectively). This also meant that only three years of attitude data could be obtained for the 1995-1998 period – 1995, 1996, and 1997. Whilst this was not optimal, there was at least one year's worth of responses for each period, allowing for comparisons between public attitudes and corpus analysis to be made across the entirety of corpus coverage. Changes in responses to questions relating to each grouping were then compared with changes in levels of the associated stigma found in keyword and collocate analysis. Graphs were created for each grouping in *Microsoft Excel* (2016), using the responses to each question documented in *AMIS* (TNS BMRB, 2015).



### **3. Corpus Analysis**

## **3.1. 1995-1998**

### **3.1.1. Annual Overview**

Keywords were calculated to uncover significant themes in individual years of coverage, with key-keywords being calculated from these to identify long-term trends in UK press coverage. As well as helping to contextualise the key-keyword findings, the increased granularity of annual keywords meant that significant yearly events which were filtered out of key-keywords, but which might have impacted public opinion in the period, were uncovered. Exemplifying this was the prevalence of unique proper nouns in the top keywords of all four years of the 1995-1998 period: e.g. “alesworth” (1<sup>st</sup> – 1995), “inwald” (3<sup>rd</sup> – 1995); “gadher” (4<sup>th</sup> – 1996), “mursell” (5<sup>th</sup> – 1996); “mursell” (1<sup>st</sup> – 1997) “kurter” (3<sup>rd</sup> – 1997); “elgizouli” (3<sup>rd</sup> – 1998), “boonprasisit” (6<sup>th</sup> – 1998). Though the terms themselves differed between years of coverage, the number of such terms in annual keywords was equivalent across the period, and almost all of these terms related to cases in which people with mental illness were the perpetrators of violent crimes. This demonstrates the regularity with which people with mental illness were linked with violent crime in 1995-1998 press coverage, even though the stories themselves were often specific to individual years. Consistent at the top of all four years’ keyword rankings was the story of Jonathan Zito, a man stabbed by someone diagnosed with schizophrenia, Christopher Clunis; this case was widely covered and was the most dominant story in mental health coverage of the period, as demonstrated by its prominence in 1995-1998 key-keywords. Another of the most significant events of the period was the Dunblane school massacre in 1996 – “dunblane” (16<sup>th</sup> – 1996). The psychological health of the killer was frequently discussed, despite the fact that he did not have a mental illness, which is likely to have perpetuated danger stigma.

Coverage of Princess Diana’s mental health problems also featured in 1995 and 1996 coverage, “diana” being the 82<sup>nd</sup> and 90<sup>th</sup> ranked keyword, respectively; this was much more prominent in tabloids than broadsheets. In 1997 and 1998, discussion of “paedophiles” (9<sup>th</sup> – 1997; 10<sup>th</sup> – 1998) was prominent, though exclusive to tabloids, which might increase public fear and disgust towards people with mental illness, as well as contributing to self-stigma. Other significant topics in annual keywords, which did not appear in key-keywords, were the side-effects of various drugs – “ritalin” (10<sup>th</sup> – 1995), “larium” (3<sup>rd</sup> – 1996) – as well as new ‘wonderdrugs’ – “viagra” (2<sup>nd</sup> – 1998), “seroxat” (12<sup>th</sup> – 1998). Finally, the presence of “untreatable” (14<sup>th</sup> – 1998) and “treatable” (19<sup>th</sup> – 1998) in 1998 keywords

demonstrated initial discussions of a loophole in UK law, often referred to as the ‘treatability clause’, which meant that people could not be compulsorily detained under the 1983 Mental Health Act if their disorders were deemed to be ‘untreatable’ (Cromby, et al., 2013: 337). This became a significant theme of 1999-2002 coverage, and is likely to have contributed to the persistence of several mental health stigmas (discussed further in Section 3.2). These annual keywords provided a snapshot of important events and features of the period, with the calculation of key-keywords then allowing for the analysis of long-term trends, and the identification of consistent features in each period’s coverage.

### **3.1.2. Key-keywords**

Key-keywords were calculated for each period using annual keyword lists, with keywords which did not appear in all four years of a period being removed from results; key-keyword lists were also produced for broadsheets and tabloids separately, following the same procedure. The average effect size of each key-keyword was then calculated, with key-keyword lists ranked from highest effect size to lowest – these rankings follow each key-keyword in this text in brackets. If the ranking was specific to either broadsheet or tabloid key-keywords, this is indicated following the ranking; otherwise, the rankings are from lists of ‘general key-keywords’ (i.e. key-keywords identified in articles from both broadsheets and tabloids). Some terms had higher frequencies in general key-keywords than when their frequencies in broadsheet and tabloid key-keywords were calculated separately and added together; this was because some terms were too infrequent to be statistically reliable keywords in the smaller sample sizes of the categoric sub-corpora but had enough supportive evidence to appear as keywords when the data from both categories was combined.

In mental health coverage between 1995-1998 there were 317 total key-keywords; of these, 45 key-keywords related to danger stigma (14.20% of key-keywords for the period) (Fig. 3.1.2.1). Terms relating to danger stigma were equally prevalent in broadsheet and tabloid coverage; 28 of 197 broadsheet key-keywords (13.71%), compared with 23 of 165 tabloid key-keywords (13.94%). The most prominent of these key-keywords referred to the stabbing of Jonathan Zito by a man diagnosed with schizophrenia, Christopher Clunis: “clunis” (1<sup>st</sup>) and “zito” (2<sup>nd</sup>), as well as “jayne” (39<sup>th</sup>) [Jonathan Zito’s wife], “jonathan” (130<sup>th</sup>), and “christopher” (168<sup>th</sup>). This story received large-scale coverage in both broadsheets and tabloids, and the high position of related terms demonstrates the significance with which

individual cases of dangerous mental illness tended to dominate mental health coverage. Other terms connoting violent events featured consistently in 1995-1998 key-keywords, with these events usually being perpetrated by people with mental illness. Terms referring to traumatic events also strengthened the connection between danger and mental illness (“traumatic” (41<sup>st</sup>), “trauma” (65<sup>th</sup>)), although these more frequently referred to traumatic events as a cause of mental illness. Terms relating to sexual attacks only appeared in tabloid key-keywords – “sex” (104<sup>th</sup> – tabloids), “attacks” (106<sup>th</sup> – tabloids), “attack” (119<sup>th</sup> – tabloids). This might suggest slightly more fear-inducing coverage in tabloids, since they presented people with mental illness as sexual predators when broadsheets did not.

Fig. 3.1.2.1:

Danger General Key-keywords 1995-1998				
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151-200	Rank 201+
clunis zito homicides psychopath psychotic jayne stabbed traumatic tragedies	stabbing manslaughter trauma killings killer murders assaulted	victims sexually killing violent disturbed jonathan tragedy knife	rape christopher kill deaths murder dangerous assault killed attacks	warned harm fears sex <i>[often referring            to sexual            attacks]</i> victim attack death crisis sexual risk fear died

Identifiers which positioned people with mental illness as threats were also present in key-keywords of the period, perpetuating danger stigma – “psychopath” (16<sup>th</sup>), “killer” (85<sup>th</sup>). Possible threat was likewise implied by terms relating to warnings – “warned” (202<sup>nd</sup>), “harm” (205<sup>th</sup>), “fears” (210<sup>th</sup>), “risk” (242<sup>nd</sup>), “fear” (247<sup>th</sup>). These terms were also used in non-stigmatising contexts, such as discussing the risk of contracting mental illness, or referring to the risks of inadequate mental health services. However, their innate association with danger, and their use in associating mental illness with risk to the public, meant that such terms served to perpetuate danger stigma. Equally, the terms “victims” (115<sup>th</sup>) and “victim” (214<sup>th</sup>) were used both to refer to people with mental illness as victims of their illness and to refer to victims of acts perpetrated by people with mental illness.

However, these terms were predominantly used for the latter, particularly in tabloids, further engendering a negative conception of people with mental illness as dangerous to the public.

A significant number of key-keywords related to criminality stigma: 60 key-keywords (18.93% of general key-keywords for the period) (Fig. 3.1.2.2). Several of these were terms which denoted danger as well, such as words relating to the Zito case, and other cases of violent crime – “clunis” (1<sup>st</sup>), “homicides” (7<sup>th</sup>), “stabbed” (40<sup>th</sup>), etc. There were also many terms which did not necessarily connote danger or violence but related to criminal or legal practice – “qc” (42<sup>nd</sup>), “jailed” (82<sup>nd</sup>), “inquiry” (87<sup>th</sup>), etc. Several terms relating to detention under the Mental Health Act further established the association between mental illness and criminal or misanthropic behaviour, with “broadmoor” and other secure mental hospitals ranking highly – “broadmoor” (3<sup>rd</sup>), “rampton” (12<sup>th</sup>), “sectioned” (29<sup>th</sup>), etc.

Fig. 3.1.2.2:

Criminality General Key-keywords 1995-1998				
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151-200	Rank 201+
clunis zito broadmoor homicides rampton sectioned detained ashworth jayne stabbed qc	stabbing manslaughter killings killer discharged jailed inquiry murders freed probation assaulted jail	convicted inquiries diminished killing bailey jonathan judge admitted sentenced discharge pleaded	secure jury commit released rape prison christopher kill verdict murder assault prosecution guilty killed	trial locked justice hearing court committed arrested police cases legal evidence case

Even terms relating to release from criminal institutions, which seemed initially positive – “discharged” (64<sup>th</sup>), “freed” (92<sup>nd</sup>), “probation” (98<sup>th</sup>), “discharge” (148<sup>th</sup>), “released” (161<sup>st</sup>) – were often used in a negative sense, criticising decisions to allow people with mental illness to reintegrate into society. These terms were higher-ranked in tabloids – “freed” (not present – broadsheets; 42<sup>nd</sup> – tabloids), “discharged” (42<sup>nd</sup> – broadsheets; 48<sup>th</sup> – tabloids), “released” (146<sup>th</sup> – broadsheets; 72<sup>nd</sup> – tabloids). Analysis of concordance lines showed that these terms usually referenced criminal cases where people with mental illness were released from prison and reoffended, with the press questioning the decision to integrate people with mental illness into society. As well as perpetuating criminality stigma, these stories also

connoted a lack of recovery from mental illness, increasing the likelihood of benevolence and severity stigma. Interestingly, terms relating to criminality were more numerous in broadsheets than tabloids, with 39 of 197 broadsheet key-keywords (19.80%) relating to criminality, compared with 25 of 165 tabloid key-keywords (15.15%). Of terms only present in broadsheets, over half related to legal proceedings – “inquiries” (72<sup>nd</sup> – broadsheets), “diminished” (86<sup>th</sup> – broadsheets), “prosecution” (130<sup>th</sup> – broadsheets) “justice” (137<sup>th</sup> – broadsheets), “trial” (151<sup>st</sup> – broadsheets), “cases” (168<sup>th</sup> – broadsheets), “evidence” (184<sup>th</sup> – broadsheets), “case” (190<sup>th</sup> – broadsheets). This suggested a focus on the proceedings surrounding criminal cases in broadsheets but not in tabloids. There was also a greater focus on detention under the Mental Health Act in broadsheets, with none of the following appearing in tabloid key-keywords – “sectioned” (29<sup>th</sup> – broadsheets), “detention” (73<sup>rd</sup> – broadsheets), “secure” (108<sup>th</sup> – broadsheets) [secure hospital], “act” (175<sup>th</sup> – broadsheets). This indicates that broadsheets more frequently discussed medically-motivated detainments of people with mental illness, rather than criminal imprisonment, which might reduce criminality stigma (although such terms still implied danger to the public).

There were 16 terms relating to benevolence stigma in 1995-1998 key-keywords (5.05% of the general key-keywords for the period) (Fig. 3.1.2.3); these were more prevalent in tabloids than broadsheets – 9 of 197 broadsheet key-keywords (4.57%), compared with 12 of 165 tabloid key-keywords (7.27%). Benevolence-related coverage was consequently less prevalent, as well as lower in key-keyword rankings, than coverage relating to criminality or danger stigma. Whilst much of this coverage may have been intended to evoke sympathy towards the ‘plight’ of people with mental illness, such coverage may be detrimental to de-stigmatisation efforts, since it can lead the public to view such people purely as objects of pity (Corrigan & Watson, 2004). Terms which painted people with mental illness as ‘sufferers’ – “sufferers” (55<sup>th</sup>), “suffering” (97<sup>th</sup>), etc. – seem particularly likely to lead to benevolence stigma, since these terms implied that such people were crippled by their illnesses and, consequently, incapable of surviving independently. Closer examination in *AntConc* found that tabloids tended to use such terms to discuss the suffering of victims of crimes perpetrated by people with mental illness, rather than the suffering of people with such conditions. This may explain the disparity between broadsheets and tabloids in the number of terms relating to criminality stigma, with broadsheet coverage of crimes focusing on legal proceedings, using terms more clearly linked with criminality, while tabloids focused on the consequences for victims, using more semantically opaque terms. The terms “tragedies” (50<sup>th</sup>) and “tragic” (131<sup>st</sup>) were also used in ways which often represented people with mental illness as objects of pity, and a focus on abuse as a possible

cause of mental illness may also engender a perception of people with mental illness as ‘damaged’ – “abused” (104<sup>th</sup>), “abuse” (129<sup>th</sup>), “sexual” (240<sup>th</sup>) [used to discuss sexual abuse as a cause of mental illness]. Terms such as “lottery” (58<sup>th</sup>) [used to discuss lottery funding for mental health charities] and “charity” (119<sup>th</sup>) may also inculcate a view of people with mental disorders as ‘charity cases’, leading to increased perceptions of people with mental illnesses as a burden on society.

Fig. 3.1.2.3:

Benevolence General Key-keywords 1995-1998				
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151-200	Rank 201+
tragedies	sufferers lottery suffering	suffers abused victims charity abuse tragic suffered suffer	carers vulnerable	sexual victim

Terms implying suffering may also produce severity stigma by suggesting that mental illnesses are usually severely debilitating or unmanageable; consequently, there were also slightly fewer severity-related terms in broadsheets (8 of 195 broadsheet key-keywords (4.10%)) than in tabloids (10 of 165 tabloid key-keywords (6.06%)). In total, there were 12 severity-related terms in the key-keywords of 1995-1998 (3.79% of general key-keywords for the period) (Fig. 3.1.2.4). The terms “severe” (169<sup>th</sup>) and “serious” (258<sup>th</sup>) established extreme representations of mental health conditions, whilst terms which implied longevity or recurrence implied a lack of recovery from such conditions – “breakdowns” (61<sup>st</sup>), “indefinitely” (76<sup>th</sup>), etc. Whilst severity-related terms were less prevalent than those denoting criminality or danger, the focus on extreme cases of violent crime enacted by people with mental illnesses could also engender severity stigma, by presenting such drastic behaviour as symptomatic of general mental illness to the public.

Fig. 3.1.2.4:

Severity General Key-keywords 1995-1998				
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151-200	Rank 201+
	sufferers breakdowns indefinitely suffering	suffers breakdown	carers severe	serious lives life years

Furthermore, coverage which related to severity stigma and/or benevolence stigma is likely to have propagated the stereotype that people with mental illness are a burden on society, since it often presented people with mental health conditions as unable to contribute. Terms relating to governance (Fig. 3.1.2.5) may have also contributed to this view, since such coverage implied a need to manage the lives of people with mental illness for them. The term “diminished” (124<sup>th</sup>), used in relation to responsibility and ability, may further contribute to this conception of people with mental illness as unable to properly manage their own lives.

Fig. 3.1.2.5:

Governance General Key-keywords 1995-1998				
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151-200	Rank 201+
		diminished	carers	authorities association authority allowed

Stigmas and stereotypes may also have been perpetuated by the identifiers used to discuss people with mental illness in coverage of the period (Fig. 3.1.2.6). The framing of people with mental illness as ‘sufferers’ can contribute to benevolence and severity stigma. Benevolence-related identifiers were much higher in tabloids – “sufferers” (59<sup>th</sup> – broadsheets; 29<sup>th</sup> – tabloids), “victims” (104<sup>th</sup> – broadsheets; 66<sup>th</sup> – tabloids), “victim” (138<sup>th</sup> – broadsheets; 75<sup>th</sup> – tabloids) – however, these were often used by tabloids to discuss victims of violence perpetrated by people with mental illness. Discussion of people with mental illness that refers to them as patients and not as people, equally present in both categories of newspaper, could also lead to benevolence stigma by presenting them in medical contexts, as dependents, rather than as functioning within wider society; the terms “patients” (109<sup>th</sup>), and “patient” (112<sup>th</sup>) were both higher-ranked than “people” (275<sup>th</sup>)



(“person” was not present). Similarly, the term “homeless” (95<sup>th</sup>) could contribute to burden stereotypes, by showcasing instances of mental illness within a group of people who are already stigmatised as a ‘drain’ on society. It is worth reiterating here that this does not mean “patients”, “patient”, or “homeless” were used more frequently than “people” in 1995-1998 coverage – in fact, “people” had a higher frequency than all three terms in this period. Rather, the disparity in key-keyword rankings shows that individuals were presented as “patients”/“patient” or “homeless” more often than would be expected compared to general usage, based on the reference corpus, whereas they were referred to as “people” at a frequency more similar with expected levels. Alternative neutral identifiers were of similarly low rankings as “people”; slightly higher was “teenage” (155<sup>th</sup>), suggesting a greater focus on adolescent mental health between 1995-1998. The highest-ranked identifiers were “schizophrenic” (6<sup>th</sup>), “psychopath” (16<sup>th</sup>), and “killer” (85<sup>th</sup>), which could propagate danger stigma by focusing on violent and unpredictable behaviour; “killer” (102<sup>nd</sup> – broadsheets; 34<sup>th</sup> – tabloids) was much higher in tabloid key-keyword rankings.

Fig. 3.1.2.6:

Identifier General Key-keywords 1995-1998				
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151-200	Rank 201+
schizophrenic psychopath	sufferers killer	patients patient victims	teenage victim	woman people children women child young

Illnesses focused on in 1995-1998 coverage (Fig. 3.1.2.7) were generally associated with violent or unpredictable tendencies, particularly schizophrenia. This may have established schizophrenia as prototypical of mental illness, and could lead the public to conflate mental illness in general with the potentially violent and unpredictable traits of schizophrenia. Broadsheet key-keywords also contained several terms relating to other psychotic disorders (the category of illness to which schizophrenia belongs), which did not appear in tabloids – “psychotic” (19<sup>th</sup> – broadsheets), “psychosis” (23<sup>rd</sup> – broadsheets), “delusions” (27<sup>th</sup> – broadsheets), “personality” (95<sup>th</sup> – broadsheets) [personality disorder]. In tabloids, on the other hand, there were terms relating to eating disorders which were not present in broadsheets – “bulimia” (7<sup>th</sup> – tabloids), “anorexia” (13<sup>th</sup> – tabloids), “eating” (64<sup>th</sup> – tabloids). This suggests a greater diversity in the types of conditions covered in tabloids,

with broadsheets discussing psychotic disorders in more detail. Tabloid focus on eating disorders was also indicative of a wider feature of traditional UK tabloid coverage, that of celebrity lifestyle: such key-keywords were usually used to discuss eating disorders afflicting famous figures – “jodie” (6<sup>th</sup> – tabloids) [model Jodie Kidd], “diana” (38<sup>th</sup> – tabloids) [Princess Diana], “princess” (62<sup>nd</sup> – tabloids). This approach by tabloids seems likely to diminish danger, criminality, and benevolence stigma, since the people affected by mental illness in such stories are not ‘charity cases’ or threats, but respected members of society. However, this might contribute to severity stigma, since these stories occasionally focused on pillars of society being ‘toppled’ by mental illness – this was particularly apparent in stories covering Princess Diana’s problems with bulimia. Generic illness terms featured highly in general key-keyword rankings – “mental” (24<sup>th</sup>), “disorders” (38<sup>th</sup>), “illness” (53<sup>rd</sup>), etc. – demonstrating discussion of non-specific mental health issues to also be frequent in the period.

Fig. 3.1.2.7:

Illness General Key-keywords 1995-1998				
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151-200	Rank 201+
schizophrenic psychopath schizophrenia bulimia agoraphobia phobia mental paranoid psychotic mentally depressive delusions anorexia disorders traumatic depression alzheimer suicidal psychosis	hallucinations illness compulsive suicide illnesses manic obsessive disordered alcoholism	depressed stress dementia personality	anxiety	

There were very few key-keywords relating directly to de-stigmatisation efforts or mental health advocacy in 1995-1998 (Fig. 3.1.2.8). These were mainly limited to terms linked to mental health charities – e.g. “marjorie” (60<sup>th</sup>) and “wallace” (77<sup>th</sup>) [director of

SANE mental health charity] – and such coverage was almost exclusive to broadsheets, with only “sane” (17<sup>th</sup> – broadsheets; 15<sup>th</sup> – tabloids) present in tabloid key-keywords.

Fig. 3.1.2.8:

De-stigmatisation General Key-keywords 1995-1998				
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151-200	Rank 201+
mckerrow sane [ <i>mental health charity, SANE</i> ]	marjorie [ <i>Marjorie Wallace, director of SANE</i> ]	wallace charity	trust	

There were also several terms relating to treatments and therapies (Fig. 3.1.2.9), which could help to reduce severity stigma by portraying mental disorders as manageable conditions. However, when the context of these terms was expanded, they were often found to be used to question the efficacy of treatments or services. This may suggest to the public that treatments for mental illness are generally ineffective, and may reaffirm severity stigma by questioning the treatability of mental disorders. The high rankings of “prozac” (4<sup>th</sup>), “depressants” (9<sup>th</sup>), and “depressant” (15<sup>th</sup>) emphasise this focus on controversial treatments, with the side-effects of antidepressants being highlighted in news of the period.

Fig. 3.1.2.9:

Treatment General Key-keywords 1995-1998				
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151-200	Rank 201+
prozac depressants psychiatric depressant psychotherapy medication serotonin therapists	healthcare helpline counselling therapy clinic	pills drugs drug treatments treatment prescribed care	treating surgery nursing community cure	medicine treated treat cope

### 3.1.3. 'mental illness' Collocates

Following keyword analysis for each period, collocate analysis was also conducted, with terms appearing within a span of four words to the left or right of 'mental illness' being analysed. Collocates were obtained using the process outlined in the methodology and then sorted by MI-score, placing the strongest significant collocates at the top of each set of collocate rankings. This same procedure was repeated for each period of the corpus, as well as for newspaper categories in each period, to assess how specific usage of the term 'mental illness' changed over time. Collocate analysis consequently allowed for additional, low-level insight into coverage of mental illness in the UK press, supplementing the examination of broader themes provided by keyword analysis.

The term 'mental illness' occurred 571 times in coverage from 1995-1998; during this period, the term had 383 collocates, of which 122 were above the statistical thresholds outlined in the methodology. In broadsheets, 'mental illness' occurred 402 times with 285 collocates, of which 95 were over statistical thresholds; in tabloids, 'mental illness' occurred only 169 times with 137 collocates, of which 52 were over statistical thresholds. This disparity between broadsheets and tabloids is likely resultant from the larger number of words from broadsheets in the corpus between 1995-1998, as seen in the corpus composition table. Interestingly, whilst terms relating to danger were prominent in keywords of the period, they were rarely used in the immediate context of the term 'mental illness' (Fig. 3.1.3.1). Only 6 collocates related to danger stigma in 1995-1998 (4.92% of total collocates above statistical thresholds for the period).

Fig. 3.1.3.1:

Danger Collocates 1995-1998		
Rank 1-50	Rank 51-100	Rank 101-150
terrifying psychopathic	violence violent disturbed	risk

There were even fewer terms relating to criminality, with only 3 related collocates (2.46%) over statistical thresholds, and two of these – “feigning” (5<sup>th</sup>) and “allegedly” (52<sup>nd</sup>) – were specific to an individual case, found only in tabloids, in which a robber who was jailed for feigning insanity as a legal defence had his conviction overturned. The term

“defendant” (45<sup>th</sup>) was also present, though infrequent, and exclusive to broadsheets. This shows that, while danger and criminality stigmas were prominent in coverage of the period, newspapers rarely discussed these stigmas in direct relation to the term ‘mental illness’. This may indicate that these stigmas were related to specific disorders by the press, rather than being mentioned in discussions of ‘generic’ mental illness, with certain individual disorders being associated with violent crime; further analysis of the collocates of individual illness terms would determine whether this was the case.

Collocates which related to benevolence stigma were more common, with 9 collocates (7.38%) potentially presenting people with mental illness as objects of pity (Fig. 3.1.3.2). As with key-keywords for the period, most of these terms depicted people with mental illness as ‘sufferers’:

“... show that Mary was **suffering** from **mental illness**, psychopathic disorder, **subnormality** or severe subnormality ...”  
*(The Times, 1998)*

Fig. 3.1.3.2:

Benevolence Collocates 1995-1998		
Rank 1-50	Rank 51-100	Rank 101-150
subnormality battling afflicted suffering suffer	suffered suffers homeless	need

These terms occurred at higher rankings in tabloids – this is likely the result of there being fewer overall collocates for tabloids in the period, since benevolence-related terms occurred with similar absolute frequencies in tabloids and broadsheets (e.g. “suffered” (broadsheets – 64<sup>th</sup>, freq. 7; tabloids – 24<sup>th</sup>, freq. 7)). Benevolence-related terms were also occasionally used more positively to relay the difficulties faced by people with mental illness, and raise awareness:

“Depression affects nearly half of all women and a quarter of all men in the UK before the age of 70. Less than one per cent of the population **suffer** more severe **mental illness**.” *(The Daily Mirror, 1998)*

Consequently, these terms may have had a positive impact on public perceptions of mental illness, although they were more often used to describe people as “suffering” (36<sup>th</sup>) from mental illness. Collocates such as “homeless” (74<sup>th</sup>) and “need” (79<sup>th</sup>) were also used to present people with mental illness as dependent on others to survive, although these terms appeared infrequently:

“‘A model which recognises that people with serious **mental illness need** supportive structures for the rest of their lives,’ says Millar.”  
*(The Guardian, 1998)*

Several collocates related to severity stigma: 16 of 122 collocates (13.11% of total collocates) related to this stigma (Fig. 3.1.3.3). These terms were slightly more numerous and occurred at slightly higher rankings in tabloids than broadsheets. As with key-words, some severity-related terms overlapped with those relating to benevolence stigma, since they focused on the suffering of people with mental illness – “battling” (11<sup>th</sup>), “afflicted” (17<sup>th</sup>), “suffering” (33<sup>rd</sup>), etc.

Fig. 3.1.3.3:

Severity Collocates 1995-1998		
Rank 1-50	Rank 51-100	Rank 101-150
recurrence fog battling severe history afflicted complicated suffering serious suffer	complex widespread suffered suffers higher	high

A focus on longevity and recurrence was also apparent in collocates of ‘mental illness’ – “recurrence” (3<sup>rd</sup>), “history” (14<sup>th</sup>) – which could under-represent the chances of recovery from mental health conditions, and over-represent the persistence of such conditions. Discussion of people with a “history” of mental illness was particularly frequent, with the term occurring as a collocate of ‘mental illness’ 45 times during the period:

“Lady Scotland said a catalogue of mistakes had been made by those involved in caring for Luke, who had a long **history** of **mental illness** and violence, after his discharge into the community.” (*The Guardian*, 1998)

This focus on longevity was more prevalent in tabloids than broadsheets, with related collocates more prominent in tabloids (e.g. “history” (broadsheets: 22<sup>nd</sup>, freq. 17; tabloids: 6<sup>th</sup>, freq. 28). Terms which emphasised the intensity and prevalence of mental health problems were also highly prominent collocates of mental illness:

“A MOTHER who killed her baby in a ‘black **fog**’ of **mental illness** and post-natal depression was shown mercy by a judge yesterday.” (*The Daily Mail*, 1995)

“Dr Nazroo claims that because Caribbean men are traditionally considered to be at **higher** risk of **severe mental illness**, they are automatically channelled into psychiatric hospital care ...” (*The Independent*, 1997)

“severe” (13<sup>th</sup>) was also a highly frequent collocate of ‘mental illness’, occurring 46 times; this demonstrates the consistency with which mental health problems were presented as severe in press coverage of the period. However, this term was almost exclusive to broadsheets, occurring 42 times in these newspapers. This suggests a greater focus on severity in broadsheets, whilst tabloids tended to focus on the longevity of mental illnesses, with recovery being depicted as difficult by both types of coverage. However, as with benevolence stigma, terms relating to severity stigma may also have had a positive impact, since the press often used them to detail the hardships of such conditions, potentially engendering sympathy and greater understanding amongst the public.

A significant proportion of collocates for ‘mental illness’ were general illness terms (36 collocates, 29.51%), documenting the type, prevalence, or symptoms of various mental disorders (Fig. 3.1.3.4). Some of these terms also had stigma-related influences – for example, descriptions of mental health disorders as “complicated” (22<sup>nd</sup>) or “complex” (60<sup>th</sup>) might increase severity stigma by accentuating the difficulties faced by people with such conditions. Illness terms were much more frequent in broadsheets than tabloids: only 7 illness collocates were present in tabloids, compared with 23 in broadsheets. This difference may be partially explained by the reduced data from tabloids for the period, however, such a large disparity indicates a more significant underlying cause; larger numbers of illness collocates may indicate greater attempts to educate the public and improve understanding of

individual disorders in broadsheets. Most illness collocates related to mental health conditions generally, though some referred to specific illnesses, with a focus on features of mental illness and means of recognising different conditions:

“He was an extremely vulnerable patient - he was suffering from a **mental illness** and a **learning disability** - and staff should have been on guard.”

*(The Guardian, 1997)*

Coverage of treatments for mental illness or potential causes was infrequent: “links” (29<sup>th</sup>), “link” (37<sup>th</sup>), and “evidence” (105<sup>th</sup>) were the only collocates relating to causes, whilst only “treatable” (31<sup>st</sup>) and “treatment” (112<sup>th</sup>) related to treatments. Unlike in keyword analysis, there were no terms relating to the governance of mental health conditions found in 1995-1998 collocates.

Fig. 3.1.3.4:

Illness Collocates 1995-1998		
Rank 1-50	Rank 51-100	Rank 101-150
displaying broader creativity disabilities handicap complicated forms fits links features treatable learning diagnosis link rates psychopathic incidence alcoholism signs	sign natal complex widespread form diagnosed rare higher acute symptoms schizophrenia disorder	high depression evidence stress treatable

Positively, there were several terms (12 collocates, 9.84%) relating to the de-stigmatisation of mental illness (Fig. 3.1.3.5), demonstrating attempts by the press to raise awareness of mental health stigmas:



“MIND will make 500 awards to individuals or small groups involved in working to take away the **stigma surrounding mental illness.**”

(*The Times*, 1996)

“There is a great **stigma attached to mental illness** and depression ...”

(*The Daily Mail*, 1995)

Fig. 3.1.3.5:

De-stigmatisation Collocates 1995-1998		
Rank 1-50	Rank 51-100	Rank 101-150
preconceptions stigma mahoney [Chief Executive of Northern Birmingham Mental Health Trust] surrounding taboo label attached attitudes	discrimination challenge understand media	

These terms were more prevalent in broadsheets than tabloids, though “stigma” was 3<sup>rd</sup> in tabloid rankings. The term “stigma” occurred high in general collocate rankings (6<sup>th</sup>) and had a fairly high frequency, appearing 15 times as a collocate for ‘mental illness’. Such data shows that there were clear attempts by the press to discuss the stigmatisation of people with mental illness. This is further evidenced by the presence of “living” (99<sup>th</sup>) and “live” (102<sup>nd</sup>) in collocates of the period, being used to discuss the lives of people with mental illness, and the problems they face. Finally, identifiers used to discuss people with mental illness were fairly positive in their neutrality – by far the most frequent identifier in 1995-1998 collocates was “people” (83<sup>rd</sup>), with a frequency of 73. Of these 73 occurrences, 65 appeared in broadsheets, but “people” was also the only identifier above statistical thresholds in tabloid collocates (48<sup>th</sup>, freq. 8). The identifier “those” (73<sup>rd</sup>) – as in, “those with mental illness” – was also present as a collocate. This shows that ‘people-first’ language was fairly common when discussing ‘mental illness’; however, other identifiers found in keyword analysis were specific to certain disorders, such as “schizophrenic”, and therefore unlikely to occur as collocates in general discussion of ‘mental illness’. The terms “defendant” (45<sup>th</sup>) and

“homeless” (79<sup>th</sup>) were also infrequent collocates, with these identifiers relating to criminality and benevolence stigma, respectively.

## 3.2. 1999-2002

### 3.2.1. Annual Overview

As with 1995-1998, annual keywords between 1999-2002 contained several unique proper nouns, specific to individual years, which related to criminal cases involving people with mental illness: e.g. “elgizouli” (2<sup>nd</sup> – 1999) “jongen” (4<sup>th</sup> – 1999); “mubarek” (4<sup>th</sup> – 2000), “obukhov” (9<sup>th</sup> – 2000); “mukonyi” (1<sup>st</sup> – 2001), “bouwer” (4<sup>th</sup> – 2001); “housesl” (3<sup>rd</sup> – 2002), “rideh” (6<sup>th</sup> – 2002). This demonstrates a continued association between mental illness and criminal or violent behaviour throughout the period. The Zito case also remained present throughout the period, although coverage was less prominent than in 1995-1998. Continuing from 1998 were discussions of “viagra” (1<sup>st</sup> – 1999), although coverage was more critical of the newly-developed pill in 1999 than the previous year. Also developing from 1998 coverage was discussion of the ‘treatability clause’ in the Mental Health Act (discussed in section 3.1). This was a major topic in mental health coverage of the period, as shown by the high presence of “untreatable” (17<sup>th</sup> – 1999; 14<sup>th</sup> – 2000; 24<sup>th</sup> – 2001; 128<sup>th</sup> – 2002) in annual keywords, and in periodic key-keywords. This discussion was particularly motivated by the case of Noel Ruddle, who, having been imprisoned for killing his neighbour, was released from Carstairs secure mental hospital in 1999, despite him saying he might still need help, because it was viewed that his condition could not be treated. Though the case of the ‘Kalashnikov killer’, as Ruddle was dubbed, did not appear in key-keywords for the period, besides “untreatable”, related terms were highly ranked in 1999, 2000, and 2001 – “ruddle” (5<sup>th</sup> – 1999; 14<sup>th</sup> – 2001), “carstairs” (13<sup>th</sup> – 1999; 19<sup>th</sup> – 2000), “kalashnikov” (27<sup>th</sup> – 1999). This story sparked major debate and prompted calls for reforms to the Mental Health Act, in order to prevent criminals with mental health disorders abusing the ‘treatability’ loophole.

In 2002, the murder of Hollie Wells and Jessica Chapman by Ian Huntley, in Soham, was a huge story which received large levels of coverage. Though Ian Huntley was not mentally ill, terms relating to this story were still present as keywords, mainly due to Huntley’s attempts to use insanity as a legal defence, which would render him unfit to stand trial – “soham” (12<sup>th</sup>, freq. 58 – 2002), “huntley” (19<sup>th</sup>, freq. 124 – 2002). Though the prominence of “huntley” in the period was shown by its frequency being far higher than other proper nouns, its effect size ranking was actually lower than other names in 2002 keywords; this was resultant from “huntley” being present in the reference corpus, whilst

more unique names were not. This demonstrates one potential downside of using effect size as a ranking measure, since infrequent terms which do not appear in the reference corpus are promoted higher in keyword rankings than higher frequency terms which are present in the reference corpus. However, analysing key-keywords mitigated against this problem by ensuring that infrequent keywords were consistent across multiple years of coverage, and were therefore central to discourse of the period, before being analysed.

### **3.2.2. Key-keywords**

There were 307 general key-keywords for coverage between 1999-2002; this was slightly fewer key-keywords than 1995-1998 (10 fewer, -3.15%), suggesting coverage was more varied, with fewer terms being consistently used across all four years of the period. The top key-keywords for the period were new to 1999-2002 but continued throughout later periods, and related to the internet – “websites” (1<sup>st</sup>), “www” (4<sup>th</sup>), “org” (8<sup>th</sup>), “internet” (27<sup>th</sup>). This is indicative of the general shift towards a more digital culture, however, the high keyness of these words stems from their absence in the reference corpus; since the *BNC* is predominantly composed of texts from 1985-1993 (Burnard, 2007), terms relating to the internet were very infrequent in the reference corpus.

Between 1999-2002, there were 39 key-keywords which related to danger stigma (12.70% of general key-keywords for the period) (Fig. 3.2.2.1). This represents a slight decrease compared to 1995-1998 (-1.50%). The reduced rank of “zito” (5<sup>th</sup>), and the absence of other terms relating to the Zito story, also evinces this, with coverage of the killing becoming less prevalent as time from the event increased. Consequently, mental illness was less likely to be associated with this high-profile case of violent crime. The term “zito” was also used to refer to the ‘Zito Trust’, a charity set up by Jayne Zito following her husband’s death, reducing the term’s association with danger stigma; this also partially explains the presence of “michael” (273<sup>rd</sup>) in the key-keywords for the period, as the trust was directed by Michael Howlett. Interestingly, there were no key-keywords relating to the Zito case in tabloid coverage. The total absence of such terms in tabloids was surprising, given the case’s significance in 1995-1998; in 1999-2002 broadsheet coverage, there were fewer terms but “zito” (4<sup>th</sup>) was still prominent. This disparity could show that UK tabloids tended not to return to previous stories in mental health coverage, whilst broadsheets updated readers on the progress of previous cases, or compared previous cases with recent stories. “michael” also referred to Michael Stone, who was diagnosed with severe personality disorder and

assessed as being highly dangerous, but could not be detained indefinitely under the Mental Health Act due to his condition being deemed ‘untreatable’. After being released, Stone subsequently killed two children in 1998. In addition, “brady” (97<sup>th</sup>) referred to the murderer Ian Brady’s attempted hunger strike in Ashworth secure mental hospital. Although “brady” and “michael” occurred low in key-keyword rankings, their presence emphasises the recurrent focus on dangerous individuals with mental illness in UK press coverage, although such coverage also publicised important issues.

Fig. 3.2.2.1:

Danger General Key-keywords 1999-2002				
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151-200	Rank 201+
zito psychopaths psychopathic psychotic	traumatic psychosis trauma stabbed manslaughter brady	murdering harassment killer horrific victims	violent tragic tragedy harm murder killing distress dangerous	kill deaths attacks disturbed victim warned attacked risk killed death attack danger violence michael fear died

Generally, danger-related terms occurred slightly lower in 1999-2002 key-keywords than in 1995-1998, however, their persistent and widespread presence maintained this stigmatising association to a significant degree. Likewise, though typically lower in ranking than in 1995-1998, identifiers relating to violence – “psychopaths” (13<sup>th</sup>) and “killer” (125<sup>th</sup>) – were still present, as were adjectives which implied danger to the public – “psychopathic” (29<sup>th</sup>), “psychotic” (37<sup>th</sup>), “psychosis” (59<sup>th</sup>), “violent” (155<sup>th</sup>), “disturbed” (213<sup>th</sup>). The key-keywords “warned” (220<sup>th</sup>), “risk” (227<sup>th</sup>), and “fear” (283<sup>rd</sup>) occurred at similar rankings to 1995-1998 and often positioned people with mental illness as a threat, as did the terms “victims” (139<sup>th</sup>) and “victim” (214<sup>th</sup>), although these terms were lower than in 1995-1998 rankings. In total, 15 of 200 broadsheet key-keywords (7.50%) related to danger, compared with 19 of 188 tabloid key-keywords (10.11%), demonstrating a greater decrease in danger

stigma in 1999-2002 broadsheets (-6.21%) than tabloids (-3.93%). This was further supported by terms relating to sexual attacks being exclusive to tabloid key-keywords, as they were in 1995-1998 coverage – “attacked” (100<sup>th</sup> – tabloids), “sex” (103<sup>rd</sup> – tabloids), “attack” (130<sup>th</sup> – tabloids).

There were 49 key-keywords relating to criminality in 1999-2003 (15.96% of general key-keywords for the period) (Fig. 3.2.2.2); this represents a decline compared with 1995-1998 (-2.97%). These terms were once again more prevalent in broadsheets: 35 of 200 broadsheet key-keywords in 1999-2002 (17.50%) were criminality-related, compared with 23 of 188 tabloids key-keywords (12.23%). As with 1995-1998 coverage, several criminality-related key-keywords were also associated with danger stigma – “zito” (5<sup>th</sup>), “manslaughter” (84<sup>th</sup>), etc. Terms associated with legal or criminal discourse, which did not necessarily connote danger, were also prevalent throughout 1999-2002 coverage – “qc” (68<sup>th</sup>), “detention” (80<sup>th</sup>), etc. Whilst individual terms varied in their rankings compared with 1995-1998 coverage, these terms typically occurred at lower ranks in 1999-2002. Similarly, key-keywords relating to restraint in high security hospitals – “broadmoor” (9<sup>th</sup>), “carstairs” (10<sup>th</sup>), “rampton” (32<sup>nd</sup>), etc. – had reduced ranks compared to 1995-1998, as did terms relating to the release of people with mental illness into the wider community. These terms are all likely to perpetuate criminality stigma, but their lower positions in the 1999-2002 key-keyword rankings represents a reduction in stigmatising coverage. As with 1995-1998, criminality-related terms related to legal proceedings, or detainment under the Mental Health Act, were often exclusive to broadsheets – “sectioned” (25<sup>th</sup> – broadsheets), “loophole” (38<sup>th</sup> – broadsheets), “detention” (50<sup>th</sup> – broadsheets), “jury” (114<sup>th</sup> – broadsheets), “prosecution” (128<sup>th</sup> – broadsheets), “secure” (138<sup>th</sup> – broadsheets), “justice” (139<sup>th</sup> – broadsheets), “hearing” (152<sup>nd</sup> – broadsheets).

New to 1999-2002 key-keywords, was direct discussion of people convicted of crimes – “inmates” (86<sup>th</sup>), “offenders” (107<sup>th</sup>), “prisoners” (206<sup>th</sup>) – which might mitigate against the decreased rank of other criminal terms. These terms seem highly likely to reinforce criminality stigma, since such coverage discussed the mental health of criminals or portrayed people with mental illness as criminals, constructing a clear link between mental illness and criminality. These terms generally found to be exclusive to broadsheets – “inmates” (55<sup>th</sup> – broadsheets), “offenders” (64<sup>th</sup> – broadsheets), “convicted” (88<sup>th</sup> – broadsheets), “commit” (106<sup>th</sup> – broadsheets), “prisoners” (119<sup>th</sup> – broadsheets), “committed” (147<sup>th</sup> – broadsheets), “crime” (161<sup>st</sup> – broadsheets) – and broadsheet coverage of the period was therefore more likely to perpetuate criminality stigma.

Fig. 3.2.2.2:

Criminality General Key-keywords 1999-2002				
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151-200	Rank 201+
zito broadmoor carstairs rampton sectioned detained	qc insanity detention stabbed manslaughter inmates insane jail brady	jailed offenders murdering killer discharged prisons inquest convicted prison custody	diminished jury judge commit murder killing discharge guilty prosecution	kill admitted prisoners hearing released secure justice trial officers court police killed crime michael release

There was an emergence in 1999-2002 key-keywords of coverage relating to people using mental illness as a legal defence for crimes – “insanity” (70<sup>th</sup>) [insanity defence], “insane” (89<sup>th</sup>), “diminished” (161<sup>st</sup>) [diminished responsibility]. Again, this will likely strengthen criminality stigma, since mental health was discussed in criminal cases where mental illness was not actually a contributing factor. This may also perpetuate the stereotype that people with mental illness are a burden on society because mental illnesses may be viewed as ‘get-outs’ for criminal behaviour, rather than as legitimate health problems.

The stereotype of people with mental illness as a societal burden may also be promulgated by coverage relating to benevolence stigma. In total, there were 24 terms relating to benevolence stigma in 1999-2002, constituting 7.82% of the general key-keywords for the period (Fig. 3.2.2.3); this is 2.77% higher than 1995-1998, demonstrating an increase in benevolence-related coverage. Terms relating to benevolence stigma were similar in broadsheets and tabloids, with 10 of 200 broadsheet key-keywords (5.00%) relating to benevolence stigma, compared with 12 of 188 tabloid key-keywords (6.38%). As with 1995-1998 coverage, several terms portrayed people with mental illness as sufferers or victims, who were severely debilitated by their illnesses and unable to live independently – “traumatised” (31<sup>st</sup>), “sufferers” (75<sup>th</sup>), etc. Similarly, terms relating to charities – “zito” (5<sup>th</sup>) [zito trust], “lottery” (98<sup>th</sup>) [charity funding], “campaigners” (105<sup>th</sup>), “charity” (154<sup>th</sup>), “charities” (158<sup>th</sup>) – as well as on abuse as a cause of mental illness – “bullying” (62<sup>nd</sup>), “abuse” (164<sup>th</sup>), “sexually” (174<sup>th</sup>) – may contribute to conceptions of people with mental

illness as objects of pity or ‘charity cases’. These terms could also be positive, however, since they represented the inclusion of mental health advocacy groups in coverage, and relayed the personal experiences of people with mental illness, which could increase public understanding and sympathy. While benevolence-related key-keywords were generally lower in 1999-2002 rankings, the greater number of terms displaying people with mental health issues as disempowered, as well as a focus on “trauma”, which was not present in 1995-1998 key-keywords, may lead to greater levels of benevolence stigma in this period.

Fig. 3.2.2.3:

Benevolence General Key-keywords 1999-2002				
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151-200	Rank 201+
zito traumatised	bullying trauma sufferers lottery	suffering campaigners suffers victims esteem suffer	charity suffered charities abuse carers sexually tragic tragedy vulnerable	care unable lack

There was a similar increase in severity stigma; in total, 20 key-keywords were severity-related, 6.51% of general key-keywords for the period (+2.72% compared with 1995-1998) (Fig. 3.2.2.4). Due to the overlap with benevolence-related terms, key-keywords relating to severity stigma were also similar between types of newspaper in 1999-2002; 13 of 200 broadsheet key-keywords (6.50%) were severity-related, compared with 12 of 188 tabloid key-keywords (6.38%). Terms which depicted people with mental illness as disempowered contributed to severity stigma, as well as benevolence stigma, by presenting extreme difficulty in coping with mental health issues as commonplace. As in 1995-1998, both “severe” (145<sup>th</sup>) and “serious” (264<sup>th</sup>) contributed to this conception, appearing at similar ranks in 1999-2002. Coverage between 1999-2002 also contained several terms which depicted conditions as prolonged or recurrent – “untreatable” (7<sup>th</sup>), “flashbacks” (24<sup>th</sup>), “indefinitely” (76<sup>th</sup>), “breakdown” (148<sup>th</sup>), “chronic” (202<sup>nd</sup>), “lives” (238<sup>th</sup>), “months” (294<sup>th</sup>). Such terms were more numerous than in 1995-1998, increasing the chance that the public would view mental illnesses as conditions from which people do not recover. In particular, the very high position of “untreatable” (7<sup>th</sup>), which did not appear in 1995-1998 key-keywords, portrays mental disorders as lifelong conditions. This term was



generally used to discuss the ‘treatability clause’ and the risks of being unable to detain dangerous individuals under the 1983 Mental Health Act. However, “untreatable” (5<sup>th</sup> – broadsheets) did not appear in tabloid key-keywords, suggesting such coverage was almost exclusive to broadsheets. As well as contributing to severity stigma, the prominence of such stories in 1999-2002 coverage is likely to have contributed to stigmas of danger and criminality, since they often centred on cases in which people with mental illness were released following a violent offence and then committed further violent crimes. This is likely to proliferate fear of people with mental illness amongst the public, and engender the view that people with mental disorders are a threat, even after being released from psychiatric care.

Fig. 3.2.2.4:

Severity General Key-keywords 1999-2002				
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151-200	Rank 201+
untreatable flashbacks traumatised	trauma sufferers indefinitely	suffering suffers suffer severe breakdown	suffered carers	chronic victim lives serious unable months lack

The presence of numerous key-keywords relating to governance in 1999-2002 (Fig. 3.2.2.5) was also linked to such cases, with the government and current law being brought into question by these systemic errors. Governance-related terms were also generally exclusive to broadsheets – “loophole” (38<sup>th</sup> – broadsheets), “blair” (56<sup>th</sup> – broadsheets), “criticised” (126<sup>th</sup> – broadsheets), “executive” (162<sup>nd</sup> – broadsheets), “act” (176<sup>th</sup> – broadsheets), “failed” (179<sup>th</sup> – broadsheets). Economic terms were also prominent in general key-keywords, again resulting from calls for systemic reforms – “gbp” (6<sup>th</sup>), “suing” (83<sup>rd</sup>), “pounds” (162<sup>nd</sup>), “compensation” (208<sup>th</sup>).

Fig. 3.2.2.5:

Governance General Key-keywords 1999-2002				
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151-200	Rank 201+
<p>gbp [<i>Great British Pounds</i>] loophole</p>	<p>blair suing failings</p>	<p>inquest</p>	<p>pounds</p>	<p>compensation executive act</p>

In their perpetuation of severity and criminality stigmas, and the re-examination of mental health governance they initiated, cases of reoffence from 1999-2002 coverage suggest to the public that people with mental illness cannot be trusted not to reoffend – and therefore cannot contribute to society – whilst requiring funding from the taxpayer to enact healthcare reforms. This may strengthen views of people with mental illness as burdens on society, as might the greater levels of benevolence- and/or severity-related coverage in 1999-2002 more generally. There were also several key-keywords referring to addiction-related disorders, which were not present in 1995-1998 – “addiction” (117<sup>th</sup>), “cocaine” (120<sup>th</sup>), “alcohol” (171<sup>st</sup>). These may also further the burden stereotype, since the public may infer that mental health issues result from lifestyle choices, with people with mental illness being viewed as responsible for their illness and thus less deserving of treatment.

As with 1995-1998 coverage, identifiers may also have helped to propagate various stigmas in 1999-2002 (Fig. 3.2.2.6); the highest ranked identifiers of people with mental illness were “psychopaths” (13<sup>th</sup>) and “schizophrenic” (18<sup>th</sup>), both of which carried connotations of unpredictable behaviour and danger. Whilst “psychopaths” (9<sup>th</sup> – broadsheets) was not present in tabloid key-keywords, the epithet “killer” (45<sup>th</sup> – tabloids) was, which is equally, if not more, stigmatising. An association between mental illness and criminality was also propagated by coverage, exclusive to broadsheets, which identified people with mental illness as “inmates” (86<sup>th</sup>), “offenders” (107<sup>th</sup>), and “prisoners” (206<sup>th</sup>); none of these identifiers were present in 1995-1998. The framing of people with mental illness as patients rather than people, which may contribute to benevolence stigma, was present in 1999-2002 coverage – “patients” (146<sup>th</sup>), “patient” (152<sup>nd</sup>), “people” (277<sup>th</sup>) – as it was in 1995-1998, though patient-related terms had lower key-keyword rankings in 1999-2002. Equally, “homeless” (106<sup>th</sup>), was present, at a slightly reduced rank, in 1999-2002 coverage, which could contribute to views of people with mental illness as burdens on society. However, neutral identifiers were more common in 1999-2002 key-keywords, in both categories of newspaper, suggesting a positive move towards less stigmatising identifiers for people with mental illness. An increased focus on adolescent mental health

may also demonstrate attempts to raise awareness of mental health problems amongst young adult populations.

Fig. 3.2.2.6:

Identifier General Key-keywords 1999-2002				
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151-200	Rank 201+
psychopaths schizophrenic	inmates	homeless offenders adolescents patients teenagers teenager	patient	prisoners adults children elderly people young child women

The types of illness covered in 1999-2002 were also more diverse than in 1995-1998 (Fig. 3.2.2.7). The two highest ranked illness key-keywords were “posttraumatic” (2<sup>nd</sup>) and “adhd” (3<sup>rd</sup>), demonstrating a shift away from illnesses with violent tendencies, which were at the top of 1995-1998 coverage. In broadsheets, “adhd” (3<sup>rd</sup> – broadsheets) was the highest-ranking term relating to an individual illness, but was not present in tabloid key-keywords; this might explain the increase in criminality-related terms in broadsheets, as this coverage of ADHD often linked the disorder with an increased chance of criminal behaviour. On the other hand, tabloid coverage focused on post-traumatic stress disorder – “posttraumatic” (not present – broadsheets; 1<sup>st</sup> – tabloids), “traumatic” (36<sup>th</sup> – broadsheets; 26<sup>th</sup> – tabloids), “trauma” (not present – broadsheets; 30<sup>th</sup> – tabloids). Other non-violent disorders were also prevalent throughout 1999-2002 coverage, in both categories of newspaper – “suicides” (22<sup>nd</sup>), “hyperactivity” (38<sup>th</sup>), “alzheimer” (42<sup>nd</sup>), etc. However, these terms did not appear higher than in 1995-1998 key-keyword rankings, and illnesses associated with violent traits were still prominent in 1999-2002 key-keywords – “psychopaths” (13<sup>th</sup>), “delusional” (14<sup>th</sup>), “schizophrenic” (18<sup>th</sup>), etc. Nevertheless, the increased coverage of ADHD and PTSD may lead to more positive attitudes towards people with mental illness, since these illnesses are less frequently associated with violent traits. Generic illness terms were more numerous in 1999-2002 key-keywords than 1995-1998, but they also occurred at lower rankings. The reduced position of these terms in key-keyword rankings may stem from more nuanced coverage of mental health conditions, which would likely reduce generalisations between different disorders being made by the public.

Fig. 3.2.2.7:

Illness General Key-keywords 1999-2002				
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151-200	Rank 201+
posttraumatic adhd psychopaths delusional schizophrenic suicides schizophrenia psychopathic hyperactivity mental delusions alzheimer paranoid disorder disorders depression depressive	postnatal traumatic manic hallucinations psychosis suicidal suicide illness anorexia mentally insanity illnesses compulsive insane paranoia dementia stress	depressed personality anxiety behavioural syndrome ill	disability eating	problems condition mad mood stressed disease

Key-keywords relating directly to de-stigmatising mental illness remained scarce in 1999-2002, but there was an increase in such terms compared to 1995-1998 (Fig. 3.2.2.8). Several terms relating to mental health charities and advocacy groups were present in the rankings – “sane” (64<sup>th</sup>) [SANE mental health charity], “campaigners” (105<sup>th</sup>), “charity” (154<sup>th</sup>), “charities” (158<sup>th</sup>), “trust” (229<sup>th</sup>). The term “stigma” (61<sup>st</sup>) was also present, as was “bullying” (62<sup>nd</sup>), unlike in 1995-1998 coverage; the presence of these terms in 1999-2002 demonstrate initial attempts by the press to raise awareness of mental health stigma amongst the public. Direct discussion of stigma and mental health advocacy was once again negligible in tabloid coverage, with only “trust” (143<sup>rd</sup> – tabloids) being present in tabloid key-words.

Fig. 3.2.2.8:

De-stigmatisation Key-keywords 1999-2002				
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151-200	Rank 201+
	stigma bullying sane	campaigners	charity charities	trust

Additionally, several terms relating to the successful treatment of mental health conditions were also present, which could reduce severity stigma by portraying mental illnesses as treatable – “wellbeing” (39<sup>th</sup>), “cope” (225<sup>th</sup>), “treated” (230<sup>th</sup>), “healthy” (231<sup>st</sup>), “treat” (232<sup>nd</sup>). However, the term “untreatable” (7<sup>th</sup>), and its counterpart “treatable” (20<sup>th</sup>), were used almost exclusively to discuss the aforementioned ‘treatability loophole’ in the Mental Health Act; the predominance of this stigmatising coverage is likely to have counteracted positive changes produced by coverage of successful treatments. Treatments in general were also covered extensively in 1999-2002, which could mitigate against severity stigma – “psychotherapist” (26<sup>th</sup>), “psychiatric” (30<sup>th</sup>) [psychiatric care], “medication” (35<sup>th</sup>), etc. However, expanding the context of these terms revealed that they were predominantly used to question the efficacy of available treatments, and were consequently more likely to reaffirm severity stigma than offset it. Coverage of treatments also focused on antidepressants, the efficacy of which were continually debated – “prozac” (11<sup>th</sup>), “depressants” (17<sup>th</sup>), “depressant” (21<sup>st</sup>), “antidepressant” (19<sup>th</sup>), “antidepressants” (23<sup>rd</sup>). As with 1995-1998, this may hinder, rather than help, efforts to reduce severity stigma by covering treatments for mental illness.

Fig. 3.2.2.9:

Treatment General Key-keywords 1999-2002				
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151-200	Rank 201+
prozac depressants antidepressant depressant antidepressants psychotherapist psychiatric medication psychotherapy serotonin	healthcare therapists therapies counselling therapy	drugs treatments drug pills treatment therapist	prescribed treating surgery	nursing medicine treated healthy treat help community

### 3.2.3. ‘mental illness’ Collocates

The term ‘mental illness’ occurred 637 times in 1999-2002 coverage with 446 collocates, of which 145 were above statistical thresholds. This represents an increase in usage of ‘mental illness’ compared with 1995-1998, resultant from an increase in the term’s usage in tabloids,

whilst broadsheet usage remained similar. In broadsheets, ‘mental illness’ occurred 397 times with 279 collocates, of which 97 were over statistical thresholds; in tabloids, ‘mental illness’ occurred 240 times with 184 collocates, of which 81 were over statistical thresholds. As levels of data from broadsheets and tabloids were more similar in 1999-2002, the continued disparity in usage of ‘mental illness’ is interesting, and suggests a greater focus on individual disorders in tabloids, rather than discussing ‘mental illness’ collectively.

As with 1995-1998, terms relating to danger were scarce in 1999-2002 collocates, in both broadsheets and tabloids, with only 5 collocates (3.45% of total collocates) above statistical thresholds being related to this stigma (Fig. 3.2.3.1). Terms relating to criminality were equally infrequent, with only five related terms (3.45% of total collocates) (Fig. 3.2.3.2). Four of these related specifically to the case of David Copeland – “feigning” (2<sup>nd</sup>), “faked” (5<sup>th</sup>), “fake” (6<sup>th</sup>), “prisoners” (115<sup>th</sup>) – which was mainly covered by tabloids:

“NAZI nailbomber David **Copeland** faked **mental illness** to get into Broadmoor – but then found it worse than prison, a court heard yesterday.”  
*(The Daily Mirror, 2000)*

Fig. 3.2.3.1:

Danger Collocates 1999-2002		
Rank 1-50	Rank 51-100	Rank 101-150
psychopathic homicide pose [pose a threat]	copeland	risk

Fig. 3.2.3.2:

Criminality Collocates 1999-2002		
Rank 1-50	Rank 51-100	Rank 101-150
feigning faked fake	copeland	prisoners

As with 1995-1998, the scarcity of danger- and criminality-related collocates demonstrates that newspapers tended not to discuss these stigmas in direct relation to ‘mental illness’, even though these stigmas were prominent as general themes in 1999-2002 coverage.

7 collocates (4.83%) were benevolence-related (Fig. 3.2.3.3); this was a decrease compared to 1995-1998 (-2.55%). As with the previous period, most of these terms depicted people with mental illness as sufferers:

“Neighbours in Cathcart Hill, Upper Holloway, say he **suffered** a history of **mental illness** and had only moved back in with his mother three months ago.”  
*(The Evening Standard, 2000)*

These terms appeared at lower ranks than in 1995-1998; this is likely due to the overall increase in collocates in 1999-2002, since these terms appeared with similar frequencies in the two periods (e.g. “suffering” (1995-1998 – freq. 36; 1999-2002 – freq. 32), “suffered” (1995-1998 – freq. 14; 1999-2002 – freq. 20)). Benevolence-related collocates held similar rankings in broadsheets and tabloids, and were also similar in number, with 5 of 97 collocates over statistical thresholds (5.15%) being benevolence-related in broadsheets, compared to 4 of 81 collocates (4.94%) in tabloids.

Fig. 3.2.3.3:

Benevolence Collocates 1999-2002		
Rank 1-50	Rank 51-100	Rank 101-150
	suffering suffer struggle suffered homelessness suffers	abuse

There was a large number of severity-related collocates (Fig. 3.2.3.4), with a significant increase compared to 1995-1998 (+8.27%); 31 of 145 collocates (21.38%) related to severity in 1999-2002. This demonstrates that coverage of severe mental illness was more extensive in 1999-2002; this correlates with a similar increase found in key-keyword analysis. Severity-related collocates appeared at similar rankings, and with similar frequencies in both broadsheets and tabloids.

Fig. 3.2.3.4:

Severity Collocates 1999-2002		
Rank 1-50	Rank 51-100	Rank 101-150
battled enduring debilitating history unprecedented severity severe impaired increases profound bouts obsession lifetime	distressing destroyed suffering suffer struggle suffered rising serious major prior suffers chronic extreme prone common	battle term long

Terms which continued their presence as collocates from 1995-1998 coverage were those that also related to benevolence stigma – namely, terms which depicted people with mental illness as sufferers. New to 1999-2002 coverage, however, were several collocates which emphasised the high prevalence of mental illness – “unprecedented” (24<sup>th</sup>), “increases” (31<sup>st</sup>), “rising” (66<sup>th</sup>), “common” (100<sup>th</sup>). These collocates could produce greater awareness of mental health issues amongst the public, being generally used to provide information and share scientific findings:

“In 16- to 19-year-olds the incidence of **serious mental illness increases** twentyfold, compared with 13- to 15- year-olds.” (*The Guardian*, 2001)

“THE breakdown of the traditional family is a major factor in causing **unprecedented** levels of **mental illness** among children ...”  
 (*The Daily Mail*, 1999)

However, these terms could also lead to increased severity stigma by establishing a conception of mental illness as a growing, unmanageable epidemic. There were also a greater number of terms used to depict mental health conditions as long-lasting or recurrent,



compared with 1995-1998 coverage, which might further the idea that mental illnesses are usually highly difficult to treat, with little chance of recovery:

“THREE OUT of four women who suffer post-natal depression are neither diagnosed nor treated, putting them at risk of **long-term mental illness** ...”

*(The Independent, 2002)*

Both “history” (18<sup>th</sup>; freq. 40) and “severe” (29<sup>th</sup>; freq. 48) were once again highly frequent collocates of ‘mental illness’, emphasising that mental health problems were often portrayed as severe, enduring problems. However, as mentioned previously, such coverage could also foster positive attitudes towards people with mental illness, by enlightening to the public the seriousness of mental health problems and relaying the difficulties faced by people with such conditions.

General illness terms comprised a large portion of ‘mental illness’ collocates (45 terms, 31.03%) in 1999-2002 (Fig. 3.2.3.5). These terms generally had slightly lower rankings than in 1995-1998. Due to the increase in severity-related collocates, more of these illness terms related to severity than in 1995-1998 – for example, “enduring” (11<sup>th</sup>), “profound” (39<sup>th</sup>), “chronic” (79<sup>th</sup>). The number of illness terms was more similar between broadsheets (23 collocates) and tabloids (14 collocates) than in 1995-1998; this increased similarity suggests the disparity found in 1995-1998 resulted from the reduced tabloid data in this period of the corpus, rather than representing a difference in broadsheet and tabloid reporting. However, the greater number of illness collocates in broadsheets still suggests that these newspapers made greater attempts to inform their readers about the nature of mental disorders. In terms of individual illnesses, “schizophrenia” (95<sup>th</sup>) and “depression” (130<sup>th</sup>) both appeared as collocates, at similar rankings to 1995-1998, but “psychopathic” was absent from 1999-2002 collocates. This was the same in both broadsheets and tabloids, and links with decreases in danger stigma found in the period. Coverage of identifying features and detection of disorders took precedence in illness collocates once again:

“He was also quick to say that all of us suffer from **mental illness in varying degrees.**” *(The Independent, 2000)*

However, there was also an increase in collocates relating to treatments in both broadsheets and tabloids – “treatable” (41<sup>st</sup>), “recover” (67<sup>th</sup>), “cure” (77<sup>th</sup>), “recovery” (82<sup>nd</sup>), “treatment” (124<sup>th</sup>). This is likely to increase the chance of people viewing mental health

conditions as manageable or treatable. Collocates denoting causes were also more common than in 1995-1998 – “provoke” (22<sup>nd</sup>), “developing” (44<sup>th</sup>), “triggered” (92<sup>nd</sup>), “causes” (94<sup>th</sup>), “developed” (110<sup>th</sup>). This could educate the public about preventative measures but might increase the view that people with mental illness have caused their own illness.

Fig. 3.2.3.5:

Illness Collocates 1999-2002		
Rank 1-50	Rank 51-100	Rank 101-150
enduring debilitating varying detect unprecedented increases profound bouts degrees form treatable developing features	forms signs aspects rising serious major recover showing cure chronic extreme prone common recovery suicides diagnosis triggered causes schizophrenia manic	particular childhood disabilities developed nature psychotic any term treatment physical depression long

The number of collocates relating to the de-stigmatisation of mental illness was once again a positive point in 1999-2002 coverage (12 collocates, 8.28%) (Fig. 3.2.3.6), though these occurred in slightly lower numbers than 1995-1998 (-1.56%). These collocates demonstrate sustained attempts by the UK press to raise awareness of mental health stigma:

“The earlier and more appropriate the treatment for schizophrenia, the greater the chance of recovery – and the stigma that society **attaches** to this **mental illness will lessen.**” (*The Times*, 2001)

Fig. 3.2.3.6:

De-stigmatisation Collocates 1999-2002		
Rank 1-50	Rank 51-100	Rank 101-150
attaches lessen stigma perceptions reluctance attached surrounding ignorance	attitudes associated understanding negative	

The term “stigma” (10<sup>th</sup>) itself had a frequency of 19, occurring as a collocate at similar levels to 1995-1998 coverage; however, 18 of these occurrences were in broadsheets. Other collocates relating to the de-stigmatisation of mental illness were equally infrequent in tabloids, with only “associated” (44<sup>th</sup> – tabloids) being above statistical thresholds. This shows that broadsheets were much more likely to discuss mental health stigmas; discussion of the “experience” (93<sup>rd</sup>, freq. 9) of people with mental illness was also only above statistical thresholds in broadsheets.

Identifiers describing people with mental illness were similar to the period prior – the neutral term “people” (114<sup>th</sup>) was by far the most frequent collocate, appearing 84 times in 1999-2002. Once again, this term was predominantly used in broadsheets, occurring 64 times in such newspapers. However, this term was also the most frequent identifier in tabloids (freq. 20). The collocate “prisoners” (115<sup>th</sup>) was new to 1999-2002 coverage and could promulgate criminality stigma, but it was relatively infrequent (freq. 4) and exclusive to tabloids.

### **3.3. 2003-2006**

#### **3.3.1. Annual Overview**

Annual coverage in 2003-2006 showed a reduced focus on individual criminal cases (though such coverage was still frequent), with a greater focus on the issues of treatment and causation of mental illness. The decision to downgrade cannabis from a Class B to a Class C drug, in 2004, was widely questioned in newspapers of the period, due to links between cannabis use and mental illness – “cannabis” (29<sup>th</sup> – 2003; 22<sup>nd</sup> – 2004; 28<sup>th</sup> – 2005; 21<sup>st</sup> – 2006), “reclassification” (29<sup>th</sup> – 2005; 17<sup>th</sup> – 2006). As with “huntley” in 2002, “cannabis” had a lower effect size than more unusual terms in 2003-2006 coverage but was used very frequently throughout the period, appearing over 150 times in 2003, over 300 times in 2004, and over 500 times in 2005 and 2006. There was also a large increase in terms relating to antidepressants in 2003-2006, due to the release of several studies in 2004 which revealed potential side effects of Selective Serotonin Re-uptake Inhibitors (SSRIs), a widely-prescribed type of antidepressant at the time. Controversy surrounding antidepressants was a feature in every period of corpus coverage, but the release of these studies meant that SSRIs, and regulations surrounding their production and usage, were hotly debated in 2003-2006, and particularly in 2004 (Fig. 3.3.1.1). This coverage may have impacted on public perception of the treatability of mental illnesses – since well-established treatments were scrutinised and criticised – potentially increasing severity stigma.

However, whilst the reclassification of cannabis and the SSRI controversy were dominant stories in 2003-2006 press discourse, there remained several stories on high-profile, individual cases of mental illness. In 2003, the sectioning of former world heavyweight champion Frank Bruno received large levels of coverage, predominantly in tabloids – “bruno” (27<sup>th</sup>, freq. 291 – 2003). This coverage may have helped to demystify mental illness by presenting mental disorders as capable of afflicting anyone. Other stories documented violent crimes perpetrated by people with mental illness, though these did not generally receive the large-scale coverage of cases in prior periods – “soans” (3<sup>rd</sup> – 2004; 4<sup>th</sup> – 2006), [Stephen Soans-Wade, heroin addict, killed stranger by pushing him in front of train], “chattun” (2<sup>nd</sup> – 2005) [Eshan Chattun, nurse, killed by patient with schizophrenia], “studders” (6<sup>th</sup> – 2006) [Christopher Studders, diagnosed with schizophrenia, attempted to push strangers in front of train]. However, the continued presence of such cases demonstrates the sustained link between mental illness and violence in press coverage of the period.

Fig. 3.3.1.1:

Key-Keyword	Anti-depressant-related Keyword Annual Rankings															
	2003			2004			2005			2006						
	Freq.	Keyness (L-L)	Effect Size	Rank	Freq.	Keyness (L-L)	Effect Size	Rank	Freq.	Keyness (L-L)	Effect Size	Rank				
seroxat	51	578.69	29580.17	1	77	874.35	44846.09	1	30	340.73	17495.62	5	24	272.79	14057.15	4
ssris	13	147.51	7540.04	12	49	556.40	28538.42	2	11	124.93	6415.06	25	11	125.03	6442.86	16
glaxosmithkline	11	124.81	6380.04	16	16	181.68	9318.67	11	6	68.15	3499.12	41	6	68.20	3514.29	38
ritalin	5	51.33	1450.01	108	20	219.07	5824.17	20	34	377.09	9914.19	11	5	51.43	1464.29	110
mhra	16	169.00	2320.01	49	38	415.62	5532.96	24	5	48.43	728.98	140	11	113.88	1610.72	108
antidepressants	49	420.47	290.00	158	85	789.56	505.16	151	34	274.16	202.33	210	44	371.80	262.97	165
prozac	39	346.61	364.84	154	49	449.79	460.30	156	14	103.42	131.69	244	43	388.33	406.22	149
antidepressant	11	82.17	138.70	200	34	309.35	430.48	161	14	110.08	177.49	218	18	148.52	229.19	173
depressants	14	100.46	116.00	212	30	251.17	249.61	183	12	83.13	99.98	270	12	83.23	100.41	222

### 3.3.2. Key-keywords

For 2003-2006, there were 293 general key-keywords. This was slightly fewer than in 1999-2002 (14 fewer, -4.56%) and in 1995-1998 (24 fewer, -7.57%). There were 29 key-keywords relating to danger stigma (9.90% of general key-keywords for the period) (Fig. 3.3.2.1); this was a significant decrease compared to 1999-2002 key-keywords (-2.80%), showing an improvement in coverage. As with previous periods, fewer key-keywords were associated with danger in broadsheets than in tabloids: 12 of 216 broadsheet key-keywords (5.56%) were associated with danger stigma, compared with 20 of 211 tabloid key-keywords (9.48%). The highest ranked of these key-keywords was once again “zito” (9<sup>th</sup>), but, as with 1999-2002 coverage, this was also used in relation to the Zito Trust charity; coupled with the decreased key-keyword rank of this term, this demonstrates a reduction in coverage relating mental health problems to the danger of the Zito case. As with 1999-2002, “zito” (7<sup>th</sup> – broadsheets) was absent in tabloids, further demonstrating that tabloids did not return to the Zito case when broadsheets did.

Terms relating to violent or dangerous events remained pervasive throughout 2003-2006 key-keywords – “stabbed” (66<sup>th</sup>), “manslaughter” (96<sup>th</sup>), etc. – but these terms were slightly lower in 2003-2006 rankings, as well as being less numerous. This reduction was also emulated by the decreased rankings of “killer” (129<sup>th</sup>) and “violent” (184<sup>th</sup>), and the absence of “psychopaths” and other terms connoting danger to the public, which were found in previous periods. Other terms relating to risk did appear in 2003-2006 key-keywords – “warned” (210<sup>th</sup>), “risk” (213<sup>th</sup>), “risks” (249<sup>th</sup>), “fears” (253<sup>rd</sup>) – however, these terms usually referenced fears of people contracting mental illnesses in 2003-2006, rather than risks posed to wider society by people with mental health issues, which was the case in earlier coverage. Additionally, terms relating to trauma – “traumatised” (37<sup>th</sup>), “trauma” (88<sup>th</sup>) – were typically used in 2003-2006 to refer to trauma-related disorders, and were therefore less stigmatising than in earlier periods. Similarly, “victims” (147<sup>th</sup>) was used to discuss victims *of* mental illness more often than in previous periods; however, this term remained more frequently used to discuss victims of violence enacted by people with mental health issues.

Fig. 3.3.2.1:

Danger General Key-keywords 2003-2006				
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151-200	Rank 201+
zito traumatised	stabbed trauma manslaughter	murders killer coroner horrific shocking victims	killing violent deaths	murder kill knife warned tragedy risk attacks dangerous attacked risks fears killed violence death attack

As with previous periods, fewer key-keywords were associated with danger in broadsheets than tabloids: 12 of 216 broadsheet key-keywords (5.56%) were associated with danger stigma, compared with 20 of 211 tabloid key-keywords (9.48%). This demonstrates a widening gap between broadsheet and tabloid coverage, with danger-related key-keywords decreasing further from 1999-2002 levels in broadsheets (-1.94%), but remaining more similar in tabloids (-0.63%). As with previous periods, key-keywords relating to sexual attacks were exclusive to tabloids, as were other terms denoting violent events – “stabbing” (40<sup>th</sup> – tabloids), “murders” (55<sup>th</sup> – tabloids), “knife” (98<sup>th</sup> – tabloids), “tragedy” (105<sup>th</sup> – tabloids) “attacked” (120<sup>th</sup> – tabloids), “attack” (145<sup>th</sup> – tabloids), “sex” (146<sup>th</sup> – tabloids).

43 key-keywords (14.68% of general key-keywords for the period) related to criminality stigma in 2003-2006 (Fig. 3.3.2.2); this is a decline compared to 1999-2002 coverage (-1.28%). Continuing the trend established in previous years, criminality-related terms were more prevalent in broadsheets than tabloids: 32 of 216 broadsheet key-keywords (14.81%) related to criminality, compared with 21 of 211 tabloid key-keywords (9.95%). Once again, some criminality-related terms also related to danger stigma – “zito” (9<sup>th</sup>), “manslaughter” (96<sup>th</sup>), “murders” (119<sup>th</sup>), “coroner” (132<sup>nd</sup>), “murder” (202<sup>nd</sup>). However, many criminality-related terms present in 2003-2006 coverage did not automatically imply danger or violence – “guantanamo” (13<sup>th</sup>), “jails” (42<sup>nd</sup>), etc. Though the rankings of individual terms fluctuated, key-keywords relating to criminality generally occurred at similar rankings in 2003-2006 as in 1999-2002. Terms relating to the release of people with

mental health problems into wider society were also present at similar rankings – “discharged” (121<sup>st</sup>), “probation” (146<sup>th</sup>), “released” (220<sup>th</sup>). As with 1999-2002, direct discussion of people convicted of crimes was prominent in 2003-2006 coverage, but such coverage was once again exclusive to broadsheets – “guantanamo” (8<sup>th</sup> – broadsheets), “detainees” (49<sup>th</sup> – broadsheets), “inmates” (56<sup>th</sup> – broadsheets), “offenders” (73<sup>rd</sup> – broadsheets), “prisoners” (108<sup>th</sup> – broadsheets), “convicted” (110<sup>th</sup> – broadsheets), “committed” (146<sup>th</sup> – broadsheets). However, as indicated by the fresh presence of “guantanamo” (13<sup>th</sup>), stories covering offenders in 2003-2006 often related to the mental wellbeing of people who were detained; whilst such discussion still provides a direct association between mental health conditions and criminals, it may also be more positive, since it does not present mental illness as the cause of criminal behaviour. Similarly, the slightly decreased rankings of terms relating to detainment under the Mental Health Act, as well as the absence of high security healthcare facilities such as “rampton” and “carstairs”, in 2003-2006 key-keywords shows a reduction in stigmatising coverage – “broadmoor” (16<sup>th</sup>), “sectioned” (23<sup>rd</sup>), “detained” (64<sup>th</sup>), “secure” (222<sup>nd</sup>). Terms relating to the use of mental illness as a legal defence, which featured in 1999-2002 coverage, were also notably absent, although key-keywords pertaining to legal proceedings were once again present in broadsheets – “tribunal” (96<sup>th</sup> – broadsheets), “jury” (125<sup>th</sup> – broadsheets), “evidence” (183<sup>rd</sup> – broadsheets), “cases” (195<sup>th</sup> – broadsheets). Therefore, whilst criminality remained a prominent theme in mental health coverage of the period, the absence of significant criminal terms found in previous periods, as well as the slightly decreased rankings of certain criminal terms, indicates more positive coverage in 2003-2006.

Fig. 3.3.2.2:

Criminality General Key-keywords 2003-2006				
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151-200	Rank 201+
zito guantanamo broadmoor sectioned jails	detained stabbed detainees inmates detention manslaughter qc	prisons jail inquest offenders murders discharged killer coroner prison inquiry probation bailey	convicted tribunal verdict custody killing prisoners admitted	murder kill released secure arrested judge locked killed police committed crime court



There were 20 benevolence-related key-keywords between 2003-2006 (6.83% of general key-keywords for the period (Fig. 3.3.2.3)). This was 0.99% lower than in 1999-2002, but 1.78% greater than in 1995-1998, showing a lessened but sustained increase in benevolence stigma from the start of the corpus. These terms were highly similar in both newspaper categories: 11 of 216 broadsheet key-keywords (5.09%) were benevolence-related, compared with 11 of 211 tabloid key-keywords (5.21%). Once again, a large portion of benevolence-related terms depicted people with mental illness as sufferers who were incapacitated by their disorders – “traumatised” (37<sup>th</sup>), “incapacity” (49<sup>th</sup>), “sufferers” (117<sup>th</sup>), etc. These typically occurred at lower rankings compared to 1999-2002, further demonstrating slight reductions in benevolence-related coverage. Terms relating to charities, which might lead to people with mental illness being viewed merely as ‘charity cases’, were also less frequent, though still present – “zito” (9<sup>th</sup>), “charities” (123<sup>rd</sup>), “charity” (131<sup>st</sup>). However, these terms could also have a positive impact, since they often represented the inclusion of supportive voices for mental health issues in coverage. Coverage of people with mental illnesses being subjected to abuse, which might lead to such people being pitied, was still present – “bullying” (73<sup>rd</sup>), “abused” (135<sup>th</sup>), “abuse” (145<sup>th</sup>).

Fig. 3.3.2.3:

Benevolence General Key-keywords 2003-2006				
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151-200	Rank 201+
zito traumatised incapacity	binge bullying	claimant sufferers charities suffering charity abused vulnerable abuse victims	suffers suffer suffered	tragedy victim care

In total, 28 key-keywords (9.55% of general key-keywords for the period) in 2003-2006 related to severity stigma (Fig. 3.3.2.4). This represents a 3.04% increase compared with 1999-2002 coverage and a 5.76% increase over 1995-1998 coverage. As with previous periods, several of these terms might also induce benevolence stigma by presenting people with mental disorders as severely disempowered – “sufferers” (117<sup>th</sup>), “suffering” (130<sup>th</sup>), “victims” (147<sup>th</sup>), etc. Terms which presented mental illnesses as recurrent or prolonged were less frequent, and occurred at lower rankings than in 1999-2002 – “flashbacks” (36<sup>th</sup>),

“breakdown” (183<sup>rd</sup>), “lives” (257<sup>th</sup>). However, 2003-2006 coverage showed a new focus on the severity of mental health problems and inadequacies in their treatment in the UK – “shocking” (134<sup>th</sup>), “severe” (188<sup>th</sup>), “worrying” (212<sup>th</sup>), etc. – and such coverage may increase the chance that mental illnesses are viewed as consistently severe problems. However, this coverage may also result in positive, progressive changes: by highlighting problems with services and treatments for mental health conditions, press coverage may pressurise the government to address these issues, and help the public to understand, and empathise with, the difficulties faced by people with mental health conditions. A greater focus on addictive disorders was also present in the period – “addictions” (54<sup>th</sup>), “addict” (72<sup>nd</sup>), “addiction” (80<sup>th</sup>), “addicts” (82<sup>nd</sup>), “addicted” (126<sup>th</sup>). This emphasis on addiction may increase the view that recovery from mental illness is highly challenging. Additionally, the greater representation of people with mental illness as ‘addicts’, may further promote perceptions of people with mental illness as burdens on society, since they are presented as unable to contribute to society due to their addictions. As with benevolence stigma, severity-related terms were very similar between newspaper categories in 2003-2006: 16 of 216 broadsheet key-keywords (7.41%) related to severity stigma, compared with 15 of 211 tabloid key-keywords (7.11%).

Fig. 3.3.2.4:

Severity General Key-keywords 2003-2006				
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151-200	Rank 201+
flashbacks traumatised incapacity	addictions addict addiction addicts trauma	sufferers addicted suffering shocking victims	suffers suffer breakdown severe suffered	worrying risk failing victim concerns risks fears lives serious failed

Concurrent with the focus on addiction in 2003-2006 coverage was the prominent presence of terms relating to drugs generally, particularly cannabis (Fig. 3.3.2.5). This was due to discussion of David Blunkett’s decision to downgrade cannabis from a Class B to a Class C drug, in 2004, and subsequent calls for it to be reclassified as a Class B drug due to its potentially damaging effects on mental health. As with the focus on addiction, these

stories may lead to an increased view of people with mental illness as burdens on society, since the public may perceive people with mental illness as responsible for their illness, due to their choice to use illegal drugs.

Fig. 3.3.2.5:

Drugs General Key-keywords 2003-2006				
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151-200	Rank 201+
cannabis reclassify thc	binge addict addiction addicts drug drugs	cocaine misuse addicted alcohol		

As well as coverage of drugs as a cause of mental illness, coverage from 2003-2006 also focused on controversial drug treatments for mental illness. Although antidepressants featured in 1995-1998 and 1999-2002 coverage, they were significantly more salient in 2003-2006 coverage, due to the release of several studies revealing potential side effects of SSRIs (Selective Serotonin Re-uptake Inhibitors), a type of antidepressant which was widely-used at the time. SSRIs received large-scale coverage in 2003-2006, with the efficacy and risk of these drugs being discussed frequently in the media, and medical communities; terms relating to this controversy dominated the top key-keywords for the period – “seroxat” (1<sup>st</sup>), “ssris” (5<sup>th</sup>), “glaxosmithkline” (6<sup>th</sup>), etc. Though it is important for the press to raise awareness of possible dangers or side-effects of medication, coverage of this controversy in this period may have contributed to severity stigma because the efficacy of some of the most well-known treatments for mental illness, as well as the companies which produced them, was questioned, thereby challenging the treatability of mental health conditions. Though, as with previous periods, other types of treatment were featured in 2003-2006 coverage, they were positioned at lower key-keyword rankings, with coverage focusing on antidepressants (Fig. 3.3.2.6).

Fig. 3.3.2.6:

Treatment General Key-keywords 2003-2006				
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151-200	Rank 201+
seroxat ssris glaxosmithkline ritalin rehab antidepressants prozac antidepressant depressants psychiatric treatable healthcare wellbeing serotonin medication	psychotherapy therapies helpline therapists prescriptions drug health drugs	counselling pills therapy prescription treatments prescribed	treatment researchers treating	surgery treated care nursing treat

Due to coverage of the reclassification of cannabis and investigations into antidepressants, terms relating to governance were more prominent in 2003-2006 (Fig. 3.3.2.7). This is demonstrated by key-keywords relating to various governmental or regulatory bodies, as well as individuals within those bodies – “mhra” (10<sup>th</sup>) [Medicines and Healthcare Regulatory Authority], “blunkett” (28<sup>th</sup>) [David Blunkett], etc. The expanded context of these terms revealed that much of this coverage was critical of services and legislation. Such coverage may increase benevolence stigma, as well as propagating the stereotype of people with mental illness as a societal burden, since they imply that people with mental health conditions are incapable of living independently and require constant management to survive. Interestingly, whilst governance terms were prevalent in 2003-2006 broadsheet key-keywords, only “bosses” (74<sup>th</sup> – tabloids) and “executive” (158<sup>th</sup> – tabloids) were present in tabloid key-keywords. This demonstrates that broadsheets examined the wider context of cannabis reclassification and the antidepressant controversy, whereas tabloids restricted their coverage to the impact of these drugs on individuals.

Fig. 3.3.2.7:

Governance General Key-keywords 2003-2006				
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151-200	Rank 201+
mhra blunkett	blair	spokeswoman	trusts spokesman criticised	failing trust guidelines executive chief bill institute

Identifiers used to denote people with mental illness in 2003-2006 coverage (Fig. 3.3.2.8) were similar to previous periods, though slightly more sympathetic, with “schizophrenic” (33<sup>rd</sup>) being one of the only identifiers which could connote danger. Identifiers which implied criminality were still common in 2003-2006 coverage – “detainees” (85<sup>th</sup>), “inmates” (92<sup>nd</sup>), “offenders” (116<sup>th</sup>), “prisoners” (180<sup>th</sup>) – but, as discussed earlier, these terms were exclusive to broadsheets and generally did not portray mental illness as a cause of crime. The term “addicts” (82<sup>nd</sup>) was new to 2003-2006, reflecting the increase in drug-related coverage; this label could lead to both benevolence and severity stigma by depicting people with mental illness as dependent and disempowered. Once again, “patient” (165<sup>th</sup>) and “patients” (173<sup>rd</sup>) were higher than “people” (283<sup>rd</sup>), but patient-related terms occurred at lower rankings than in prior periods, while “people” occurred at a similar rank, suggesting a reduction in the framing of people with mental health problems as patients. A similar number of neutral terms appeared in 2003-2006 key-words as in 1999-2002; as with 1999-2002 coverage, there was a focus on youth, suggesting sustained attempts to raise awareness of child and adolescent mental health problems.

Fig. 3.3.2.8:

Identifier General Key-keywords 2003-2006				
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151-200	Rank 201+
schizophrenic	addicts detainees inmates teenagers	offenders	teenage patient teenager patients youngsters prisoners	adults childhood children people

A focus on youth was also reflected in the types of illnesses covered in 2003-2006 (Fig. 3.3.2.9), with developmental disorders positioned highly in key-keyword rankings – “adhd” (3<sup>rd</sup>), “autism” (25<sup>th</sup>), “hyperactivity” (30<sup>th</sup>), “autistic” (45<sup>th</sup>). Other non-violent disorders, including the addictive disorders mentioned earlier, were also prevalent, at similar rankings to 1999-2002 – “ptsd” (11<sup>th</sup>), “suicides” (26<sup>th</sup>), etc. Increases in coverage of non-violent disorders is likely to decrease stigmas of danger and criminality. Discussion of PTSD was concurrent with British entry into the wars in Iraq and Afghanistan, with the mental health problems faced by soldiers becoming a feature of UK press coverage; unlike in 1999-2002, PTSD was equally well-covered by broadsheets and tabloids in 2003-2006. Illnesses associated with violence and unpredictable behaviour, especially schizophrenia, did remain present in 2003-2006 coverage – “schizophrenic” (33<sup>rd</sup>), “schizophrenia” (35<sup>th</sup>), etc. – but these appeared at reduced ranks compared with previous periods. Generic illness terms also appeared lower in 2003-2006 rankings than in 1999-2002, equally suggesting more nuanced coverage of mental health conditions in the press – “mental” (31<sup>st</sup>), “disorders” (55<sup>th</sup>), etc.

Fig. 3.3.2.9:

Illness General Key-keywords 2003-2006				
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151-200	Rank 201+
adhd ptsd autism suicides hyperactivity mental schizophrenic schizophrenia psychotic psychosis suicidal autistic	depression paranoid postnatal addictions disorders delusions suicide disorder depressive manic binge traumatic illness mentally illnesses obsessive trauma anorexia	stressful psychological behavioural stress depressed disabilities anxiety	harm dementia ill disability personality emotional syndrome	problems eating disturbed condition behaviour sick

Key-keywords from 2003-2006 also showed an increase in de-stigmatisation discussions (Fig. 3.3.2.10), with terms relating to mental health charities or mental health advocacy groups appearing more frequently – “sane” (51<sup>st</sup>) [SANE mental health charity],

“Marjorie” (118<sup>th</sup>) [Marjorie Wallace, chief executive of SANE], etc. Similarly, “stigma” (68<sup>th</sup>) and “bullying” (73<sup>rd</sup>) occurred at similar levels to 1999-2002, demonstrating continued coverage of mental health stigma in the press; such discussion is likely to reduce mental health stigma by raising awareness of the impact such prejudice can have on peoples’ lives. These terms remained more prevalent in broadsheets than tabloids in 2003-2006, with only “campaigners” (44<sup>th</sup> – tabloids) and “trust” (128<sup>th</sup> – tabloids) being present in tabloid key-words. As with 1999-2002, terms relating to successful treatment of mental health conditions also appeared in 2003-2006 (Fig. 3.3.2.6), which might reduce severity stigma by showcasing the treatability of some mental disorders – “treatable” (41<sup>st</sup>) [also discussing the ‘treatability loophole’ in the Mental Health Act], “wellbeing” (46<sup>th</sup>), etc. However, the 2003-2006 focus on controversial antidepressants is likely to have mitigated against any positive effects arising from the presentation of successful treatments during the period.

Fig. 3.3.2.10:

De-stigmatisation General Key-keywords 2003-2006				
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151-200	Rank 201+
	sane rethink campaigners	marjorie charities charity wallace	trusts trust	

### 3.3.3. ‘mental illness’ Collocates

The term ‘mental illness’ occurred 858 times in 2003-2006 coverage with 565 collocates, of which 181 were above statistical thresholds. This represents a further increase in usage of the term ‘mental illness’ compared with previous periods. In broadsheets, ‘mental illness’ occurred 546 times with 400 collocates, of which 134 were over statistical thresholds; in tabloids, ‘mental illness’ occurred 312 times with 257 collocates, of which 101 were over statistical thresholds. This sustained disparity in the term’s usage between newspaper categories continues to suggest a focus on individual disorders in tabloids, compared with broadsheet discussion of ‘mental illness’ as a collective entity.

Terms relating to danger stigma remained uncommon in 2003-2006 collocates, with only 5 collocates (2.76% of total collocates) above statistical thresholds being danger-related (Fig. 3.3.3.1). Whilst, in absolute terms, this is the same figure as 1999-2002 coverage, it

represents a slight decrease when calculated as a percentage of total collocates (-0.69%). Terms relating to criminality (Fig. 3.3.3.2) were also very infrequent. In total, 6 collocates (3.31%) related to criminality; percentage-wise, this is roughly equivalent to the previous period (-0.14%). Some of these terms also overlapped with those relating to danger – “paedophilia” (2<sup>nd</sup>), “clunis” (34<sup>th</sup>).

Fig. 3.3.3.1:

Danger Collocates 2003-2006		
Rank 1-50	Rank 51-100	Rank 101-150
paedophilia dangerousness clunis	violence	risk

Fig. 3.3.3.2:

Criminality Collocates 2003-2006			
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151+
paedophilia clunis incarceration	offending	commit	evidence

As with earlier periods, the low number of collocates associated with danger or criminality stigma demonstrates that discussion of these stigmas was rare in the immediate context of ‘mental illness’. These terms were slightly more frequent in broadsheets than tabloids, matching the greater number of criminal terms found in broadsheets in 2003-2006 key-words; this may suggest greater coverage of violent cases of mental illness in broadsheets of the period, although there were also more collocates in broadsheets generally.

Collocates relating to benevolence stigma were present at similar levels to 1999-2002 coverage (+0.71%), with 10 collocates (5.52%) being benevolence-related in 2003-2006 (Fig. 3.3.3.3). As with earlier periods, most of these terms related to portrayals of people with mental illness as ‘sufferers’, or as being unable to survive independently. These terms had higher frequencies in 2003-2006 but appeared at similar ranks to 1999-2002, due to the increased number of collocates overall – for example, “suffering” (1999-2002 – 60<sup>th</sup>, freq. 32; 2003-2006 – 52<sup>nd</sup>, freq. 59) and “suffer” (1999-2002 – 63<sup>rd</sup>, freq. 15; 2003-2006 – 65<sup>th</sup>, freq. 24). Broadsheets and tabloids shared similar benevolence-related collocates, with comparable frequencies.



Fig. 3.3.3.3:

Benevolence Collocates 2003-2006			
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151+
	suffering neglected suffer struggled suffers misery	suffered horrific sufferers	charity

As with prior periods, severity-related collocates were the most numerous of the investigated stigmas; 32 collocates (17.68%) related to severity stigma (Fig. 3.3.3.4). This was a similar absolute value to 1999-2002 (31), and these terms occurred at similar rankings in 2003-2006, as well as in similar numbers in broadsheets (15) and tabloids (17). However, as a percentage of total collocates, severity-related terms declined in 2003-2006 (-3.70%) compared to 1999-2002. Interestingly, this did not align with the increase found in severity-related key-keywords over the same timeframe; this may indicate that individual illnesses were portrayed as severe or long-lasting disorders, rather than mental illness generally. Whilst there was a proportional decline in severity-related collocates, terms present in 2003-2006 were similar to those found in 1999-2002, portraying mental illnesses as drastic, long-lasting, and/or widespread. Terms relating to longevity and recurrence were prominent in 2003-2006, frequently presenting mental illnesses as enduring conditions – “relapsed” (14<sup>th</sup>), “dating” (19<sup>th</sup>), “history” (20<sup>th</sup>), “histories” (22<sup>nd</sup>), “enduring” (24<sup>th</sup>), “dogged” (25<sup>th</sup>), etc. This was also reflected in the increase in frequency of “history” (1999-2002 – freq. 40; 2003-2006; freq. 65) as a collocate of ‘mental illness’. Such coverage is likely to have decreased perceptions that people can recover from mental illnesses, since such conditions were often presented as long-term afflictions:

“Mr Aylett told the court that Barrett had a **history** of **mental illness dating** back to the mid-Nineties.” (*The Evening Standard*, 2005)

“... she was suffering from a **mental illness** which has **dogged** her for more than a decade.” (*The Times*, 2003)

Terms which emphasised the scale of mental health problems in the UK – e.g. “susceptible” (37<sup>th</sup>), “epidemic” (59<sup>th</sup>) – remained present, as did terms relating to extremity – e.g. “severe”

(54<sup>th</sup>), “serious” (75<sup>th</sup>). The term “severe” (54<sup>th</sup>) continued to be a highly frequent collocate, though to a lesser degree than in 1999-2002 (1999-2002 – freq. 48; 2003-2006 – freq. 36). As usual, several severity-related terms overlapped with those relating to benevolence stigma.

Fig. 3.3.3.4:

Severity Collocates 2003-2006			
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151+
relapsed strikes dating history histories enduring dogged endure susceptible battled	suffering severe epidemic lifelong relapse suffer struggled serious devastating suffers prone misery lifetime	suffered horrific battle long likely sufferers higher rise	term

A large section of ‘mental illness’ collocates were general illness terms (Fig. 3.3.3.5), as with earlier periods, with 51 illness collocates in the period (28.18%). These terms appeared more commonly in tabloids, with broadsheets containing 28 illness collocates (20.90%), compared with 29 in tabloids (28.71%). The overall increase in these terms suggests that mental illness was increasingly being treated as just another type of illness, using generic illness terms. This is also indicated by the presence of physical disorders in the collocates of ‘mental illness’ – “hiv” (51<sup>st</sup>), “cancer” (148<sup>th</sup>). As with 1999-2002, many illness collocates related to features of mental disorders and methods of diagnosis:

“Medical records showed that Ms Salmon had **displayed symptoms of mental illness** from the age of 13 ...” (*The Guardian*, 2003)

“Fresh evidence of the dangers of cannabis adds weight to a growing body of research linking the drug with various **forms of mental illness** and **schizophrenia**.” (*The Daily Mail*, 2004)

Fig. 3.3.3.5:

Illness Collocates 2003-2006			
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151+
curing abnormalities enduring undiagnosed endure displayed alcoholism treatable linking varieties forms links delusional alleviate link	hiv signs developing epidemic genes addictions causes develop unhealthy successfully linked caused	schizophrenia intensive cause rates form teenage receiving levels psychosis related addiction treated diagnosis psychotic cancer kind	deal cope stress able disorder symptoms treatment depression

The previous quote also evinces a fresh focus on collocates discussing causes of mental illness in 2003-2006 – “linking” (39<sup>th</sup>), “links” (43<sup>rd</sup>), “link” (50<sup>th</sup>), “developing” (57<sup>th</sup>), “causes” (67<sup>th</sup>), etc. This was tied to an increase in drug terms in collocates of the period – “addictions” (61<sup>st</sup>), “substance” (97<sup>th</sup>), “skunk” (108<sup>th</sup>), “cannabis” (129<sup>th</sup>), “drug” (168<sup>th</sup>) – which was related to the reclassification of cannabis:

“There is considerable clinical evidence **linking cannabis** use to **mental illness** ...” (*The Independent*, 2005)

The term “cannabis” was also a high frequency collocate of ‘mental illness’, occurring 36 times in the period; of these 36 collocations, 14 appeared in broadsheets, whilst 22 were from tabloids. Such coverage may have increased perceptions that people with mental illness are responsible for their illness. Drug-related collocates also appeared higher in tabloid rankings than broadsheets, further demonstrating greater coverage of this issue in tabloids. Collocates relating to treatment were also more numerous in general – “curing” (9<sup>th</sup>), “treatable” (38<sup>th</sup>), “alleviate” (49<sup>th</sup>), “successfully” (70<sup>th</sup>), etc. These terms might mitigate against the increase in severity-related collocates, by showing mental health conditions to be treatable. Treatment-related collocates were more frequent in broadsheets than tabloids, with only “treatable” (13<sup>th</sup>), “receiving” (44<sup>th</sup>), “treated” (80<sup>th</sup>) and “treatment” (92<sup>nd</sup>) appearing

in tabloids. The term “people” (148<sup>th</sup>, freq. 85) was still the most prominent identifier in both categories of newspaper – however this term was once again more frequent in broadsheets (freq. 68) than tabloids (freq. 17). Tied with collocates depicting the lives of people with mental illness – “experiencing” (100<sup>th</sup>), “experience” (142<sup>nd</sup>) – being exclusive to broadsheets, and the absence of alternative terms in tabloids, this suggests that tabloids were less likely to document personal experiences of people with mental illness.

The number of collocates relating to the de-stigmatisation of mental illness (Fig. 3.3.3.6) grew in 2003-2006 compared to 1999-2002 (+4.43%), with 23 related collocates (12.71%). Likewise, the collocate “stigma” (18<sup>th</sup>) increased in frequency (1999-2002 – freq. 19; 2003-2006 – freq. 24), demonstrating further positive change.

Fig. 3.3.3.6:

De-stigmatisation Collocates 2003-2006			
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151+
skelton domination broadcasters reinforcing misconception misconceptions stigmatised myths leigh stigma stereotypes surrounding prejudices portrayal discussion	captain attached label combat associated facts attitudes		charity

Once again, however, discussion of mental health stigma was mainly limited to broadsheets – only “misconception” (2<sup>nd</sup>), “documented” (3<sup>rd</sup>), “stigma” (14<sup>th</sup>), “hidden” (16<sup>th</sup>) and “associated” (27<sup>th</sup>) appeared above statistical thresholds in tabloid collocates, and “stigma” was only used 3 times in such newspapers. Several de-stigmatisation collocates related specifically to the director of the charity Combat Stress, Captain Leigh Skelton, who advocated for better mental health services for combat veterans – “skelton” (1<sup>st</sup>), “leigh” (16<sup>th</sup>), “captain” (58<sup>th</sup>). There was also the new presence of terms relating to the media, acknowledging the press’ own role in mental health stigma – “domination” (4<sup>th</sup>), “broadcasters” (5<sup>th</sup>), “reinforcing” (7<sup>th</sup>), “portrayal” (32<sup>nd</sup>), “discussion” (33<sup>rd</sup>). These terms

demonstrated attempts by the press to combat stigmas present in their coverage of mental illness:

“Newspapers are generally not much interested in the policy questions of dealing with the prevalent problems of everyday **mental illness**. Hence the **domination** of coverage by the extremely rare cases of violent and especially homicidal behaviour.” (*The Independent*, 2006)

Such coverage, even if it was almost exclusive to broadsheets, is likely to help in the reduction of mental health stigmas, by raising public awareness of stigmatising representations in the media.

## **3.4. 2007-2010**

### **3.4.1. Annual Overview**

After the reclassification of cannabis from a Class B to a Class C drug in 2004, this decision was subsequently reversed in 2008. Consequently, discussion of drug use as a potential cause of mental illness continued into 2007-2010 keywords, particularly in 2007 and 2008 – “cannabis” (22<sup>nd</sup> – 2007; 29<sup>th</sup> – 2008; 32<sup>nd</sup> – 2009; 48<sup>th</sup> – 2010). Several significant individual stories were also uncovered in the annual keywords of 2007-2010. Among them was the case of Alberto Izaga, who had undiagnosed schizophrenia and killed his two-year-old daughter, which received much coverage in 2007 and 2008 – “izaga” (1<sup>st</sup> – 2007; 4<sup>th</sup> – 2008). This case clearly depicted someone with mental illness as a danger to others, as did the case of Daniel Fitzsimons in 2009. Fitzsimons was a former British soldier who was diagnosed with PTSD and discharged from the army, but then returned to fight in Iraq with the security firm ‘Armorgroup’, where he killed two colleagues in an argument – “armorgroup” (6<sup>th</sup> – 2009), “fitzsimons” (21<sup>st</sup> – 2009). The wars in Iraq and Afghanistan provided a continual backdrop to mental health coverage in 2007-2010 but this 2009 case highlighted the problems faced by former soldiers, with Iraq/Afghanistan and PTSD-related terms being more prominent in this year. The additional presence of “beharry” (5<sup>th</sup> – 2009), also related to such coverage, referring to Johnson Beharry, a highly-decorated soldier who campaigned for better funding and treatment for PTSD.

Also featuring in annual keywords of the period were other high-profile stories that did not include people with mental illness as the perpetrators of crimes but which were nonetheless linked to mental illness by the press. The disappearance of Madelaine McCann in 2007 was a very high-profile story that did not directly relate to mental illness but was still discussed in mental health coverage, with the mental health of McCann’s parents being questioned – “mccann” (53<sup>rd</sup> – 2007), “madeleine” (78<sup>th</sup> – 2007). This is likely to strengthen criminality stigma by suggesting that mental illness may be the cause of criminal behaviour even when there is no evidence of this. Such an association is equally sustained by attempts to use ‘insanity’ as a legal defence, as with Joseph Fritzl in 2008-9 (“fritzl” (7<sup>th</sup> – 2008; 1<sup>st</sup> – 2009)); having imprisoned and abused his daughter for twenty-four years, Joseph Fritzl attempted to claim he was mentally ill to avoid a prison sentence, which was rejected by psychological experts. Presenting claims such as these to the public, before a clinical

diagnosis has been made, results in mental illness being positioned as the potential cause of crimes in which it is not a factor, furthering criminality stigma.

Several high-profile celebrities were also discussed in mental health coverage of the period. The largest of these stories was the public breakdown of Britney Spears in 2008, resulting from bipolar disorder, and her ensuing custody battle with Kevin Federline – “britney” (9<sup>th</sup> – 2007; 1<sup>st</sup> – 2008), “federline” (9<sup>th</sup> – 2008), “spears” (43<sup>rd</sup> – 2008). Kerry Katona’s diagnosis of bipolar disorder was also prominent in 2008 – “katona” (19<sup>th</sup> – 2008), “kerry” (46<sup>th</sup> – 2008) – as was Paul Gascoigne’s sectioning under the Mental Health Act in the same year – “sheryl” (22<sup>nd</sup> – 2008) [Gascoigne’s wife], “gascoigne” (65<sup>th</sup> – 2008), “gazza” (67<sup>th</sup> – 2008). While these stories may raise awareness of mental health disorders, this coverage presented celebrities with mental disorders as out of control and unpredictable, which may propagate danger stigma.

### **3.4.2. Key-keywords**

Between 2007-2010, there were 289 general key-keywords; this was 4 fewer than 2003-2006 (-1.37%), 18 fewer than 1999-2002 (-5.86%), and 28 fewer than 1995-1998 (-8.83%). There were 27 key-keywords relating to danger stigma (9.34% of general key-keywords for the period) (Fig. 3.4.2.1); this was a similar percentage to 2003-2006 (-0.56%). In 2007-2010, 6 of 202 broadsheet key-keywords (2.97%) related to this stigma, compared with 24 of 212 tabloid key-keywords (11.32%). This represents a widening disparity between newspaper categories, with coverage relating to danger stigma decreasing in broadsheets and increasing in tabloids (the proportion of danger-related key-keywords in general coverage remained roughly the same because it was a combination of tabloids and broadsheets). Only “victims” (105<sup>th</sup> – broadsheets), “violent” (117<sup>th</sup> – broadsheets), “risk” (127<sup>th</sup> – broadsheets), “violence” (132<sup>nd</sup> – broadsheets), “kill” (136<sup>th</sup> – broadsheets), and “death” (171<sup>st</sup> – broadsheets) appeared in broadsheet key-keywords, and, whilst these remain stigmatising terms, the greater concentration of danger-related terms in tabloids was much more likely to perpetuate danger stigma. Unlike all previous periods, terms related to the Zito case were absent from 2007-2010, which was likely due to the increased time from the actual events. However, although this high-profile case of violent crime was absent from key-keywords of the period, words pertaining to danger stigma remained prevalent. The continued presence of killers (“killer” (131<sup>st</sup>)) with mental illness and their “victims” (168<sup>th</sup>), also meant perceptions of people with mental illness as threats were likely to persist, despite overall

reductions in danger stigma in coverage. This may have been further demonstrated by “risk” (218<sup>th</sup>) and “warned” (224<sup>th</sup>) in the key-keyword rankings but, as with 2003-2006 coverage, these terms were generally used to discuss risks of people being affected by mental illness, rather than risks posed by people with mental health issues.

Fig. 3.4.2.1:

Danger General Key-keywords 2007-2010				
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151-200	Rank 201+
	knifed rampage manslaughter stabbing	stab murdering killer killings shocking	harm victims killing violent deaths tragedy knife	murder kill injuries risk warned murdered violence killed attacks death sex

Despite declines in danger stigma, there was an increase in criminality stigma in 2007-2010 coverage, with 51 criminality-related key-keywords (17.65% of general key-keywords from the period) (Fig. 3.4.2.2). This was 2.97% higher than 2003-2006, 1.69% higher than 1999-2002, and 1.28% lower than 1995-1998, demonstrating a reversion of declines in criminality stigma seen in coverage from previous periods. Discussion of amendments to the Mental Health Act in 2007 was the most likely explanation for this increase, with changes being made to close the treatability loophole in detaining people with mental illness: ‘Under the 2007 amendment ... treatability is no longer required – any person suffering from a mental disorder may be treated in hospital either for his own good or for the protection of the public.’ (Beck, 2010: 284). Evidencing this, terms relating to the justice system generally – “jails” (38<sup>th</sup>), “incarceration” (48<sup>th</sup>), etc. – as well as terms relating to detention under the Mental Health Act – “broadmoor” (14<sup>th</sup>), “sectioned” (21<sup>st</sup>), “detained” (66<sup>th</sup>), etc. – were present in both broadsheet and tabloid key-keywords in 2007-2010, rather than being exclusive to broadsheets, as in prior periods. This partially explains why the trend of broadsheets containing more criminality-related key-keywords was also inverted in 2007-2010: 16 of 202 broadsheet key-keywords (7.92%) related to criminality, compared with 34 of 212 tabloid key-keywords (16.04%). The decrease in broadsheets, and increase in tabloids, of danger-related key-keywords also influenced this role-reversal, since several



danger-related terms also related to criminality stigma – “manslaughter” (83<sup>rd</sup>), “murdering” (124<sup>th</sup>), etc. Direct discussion of perpetrators of crimes was similar to 2003-2006 – “offenders” (112<sup>th</sup>), “inmates” (115<sup>th</sup>), “prisoners” (188<sup>th</sup>) – and these terms remained exclusive to broadsheets. The reduced ranks of terms relating to the release of people with mental illness into the community was the only area of potentially positive change, in relation to criminality stigma – “discharged” (144<sup>th</sup>), “freed” (178<sup>th</sup>), “released” (227<sup>th</sup>). This reflects a reduction in stories depicting people with mental illness as ‘at large’ in society, which may also be attributable to the 2007 changes to the Mental Health Act.

Fig. 3.4.2.2:

Criminality General Key-keywords 2007-2010				
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151-200	Rank 201+
broadmoor sectioned jails incarceration convicted accused committed	knifed detained manslaughter jail stabbing jailed qc detention prisons	offenders inmates stab murdering prison inquest killer custody diminished discharged pleaded killings	killing freed prisoners bailey commit	murder kill admitted arrested jury justice inquiry guilty judge released crime lawyers murdered police killed criminal hearing officers

In 2007-2010 coverage, there were 21 terms which related to benevolence stigma, equating to 7.27% of general key-keywords for the period (Fig. 3.4.2.3); this compares with 6.83% in 2003-2006 (+0.44%), 7.82% in 1999-2002 (-0.55%), and 5.05% in 1995-1998 (+2.22%). This shows a sustained increase in benevolence-related coverage compared with 1995-1998, but minimal movement between 1999-2002, 2003-2006, and 2007-2010. As with previous periods, benevolence-related terms were similar between newspaper categories: 10 of 202 broadsheet key-keywords (4.95%) related to benevolence stigma, compared with 9 of 212 tabloid key-keywords (4.25%). Terms relating to the ‘suffering’ of people with mental illness were once again prevalent in 2007-2010, depicting such people

as severely debilitated – “traumatised” (20<sup>th</sup>), “incapacity” (44<sup>th</sup>), etc. These terms occurred at similar rankings to 2003-2006, again demonstrating a lack of change in benevolence-related coverage. Similarly, terms relating to charities – “charities” (120<sup>th</sup>), “charity” (125<sup>th</sup>) – remained unchanged in ranking, as did terms relating to abuse or bullying – “bullying” (75<sup>th</sup>), “bullied” (94<sup>th</sup>), “abuse” (153<sup>rd</sup>), “abused” (161<sup>st</sup>). Such coverage might increase sympathy towards people with mental illness, but the use of these terms might also increase benevolence stigma, by reducing people with mental health problems to objects of pity. The presence of the term “homeless” (141<sup>st</sup>) might similarly engender this opinion amongst the public.

Fig. 3.4.2.3:

Benevolence General Key-keywords 2007-2010				
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151-200	Rank 201+
traumatised incapacity	trauma bullying bullied	sufferers charities charity suffering homeless vulnerable	abuse abused carers suffers suffer victims suffered esteem tragedy	care

There were 23 key-keywords (7.96% of general key-keywords) in 2007-2010 relating to severity stigma (Fig. 3.4.2.4). This represents a decrease compared with 2003-2006 (-1.59%), but remains an increase compared to 1999-2002 (+1.45%) and 1995-1998 (+4.17%). Terms relating to severity stigma were more prevalent in 2007-2010 tabloid key-keywords than broadsheets; 13 of 202 broadsheet key-keywords related to severity stigma (6.44%), compared with 18 of 212 tabloid key-keywords (8.49%). As in previous periods, many severity-related key-keywords also related to benevolence stigma, since they presented people with mental illness as highly debilitated by their diseases – “traumatised” (20<sup>th</sup>), “sufferers” (107<sup>th</sup>), etc. These terms were positioned at similar rankings to 2003-2006 key-keywords. Key-keywords which represented mental health conditions as protracted problems were more prevalent and higher-ranked than in previous periods – “flashbacks” (24<sup>th</sup>), “indefinitely” (119<sup>th</sup>), “breakdown” (154<sup>th</sup>), “repeatedly” (207<sup>th</sup>), “lives” (234<sup>th</sup>). This was seemingly a result of increased coverage relating to Post-Traumatic Stress Disorder, frequently occurring in stories discussing veterans of the wars in Iraq and Afghanistan; such

coverage may increase the perception that enduring or recurrent conditions are prototypical of mental illness, since a large proportion of stories from the period covered such cases. This was mainly a feature of tabloid coverage, explaining the greater number of severity-related key-keywords in these newspapers in the period – “flashbacks” (14<sup>th</sup> – tabloids), “indefinitely” (64<sup>th</sup> – tabloids), “trigger” (98<sup>th</sup> – tabloids), “breakdown” (99<sup>th</sup> – tabloids) did not appear in 2007-2010 broadsheet key-keywords. Positively, terms associated with extremeness were slightly lower in 2007-2010 key-keyword rankings, and less numerous than in 2003-2006 – “shocking” (150<sup>th</sup>), “severe” (205<sup>th</sup>), etc. There was also a decreased emphasis on addictive disorders, with only “addictions” (50<sup>th</sup>), “addicts” (73<sup>rd</sup>), and “addiction” (79<sup>th</sup>) appearing in 2007-2010 key-keywords. The reduced prevalence of such terms indicates a decrease in coverage presenting mental illnesses as crippling disorders. This is likely to decrease severity stigma and reduce perceptions of people with mental illness as burdens who are unable to contribute to society.

Fig. 3.4.2.4:

Severity General Key-keywords 2007-2010				
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151-200	Rank 201+
traumatised flashbacks incapacity addictions	addicts trauma addiction	sufferers indefinitely suffering shocking	breakdown suffers suffer victims suffered	severe repeatedly risk failing concerns lives serious

Whilst there was a reduction in terms relating to addiction in 2007-2010, some addiction-related terms remained present, along with several terms relating to drugs generally (Fig. 3.4.2.5). Most of this coverage discussed the negative impact that drug use can have on mental health and questioned the decision to reclassify cannabis, particularly covering the use of powerful strains of cannabis, or ‘skunk’, amongst younger generations. This coverage was more prevalent in tabloids: the key-keywords “skunk” (7<sup>th</sup> – tabloids), “cocaine” (52<sup>nd</sup> – tabloids), “drugs” (59<sup>th</sup> – tabloids), “booze” (68<sup>th</sup> – tabloids), “heroin” (91<sup>st</sup> – tabloids), and “drinking” (128<sup>th</sup> – tabloids) were all exclusive to tabloids, and the few terms which appeared in broadsheets were higher in tabloid rankings – “cannabis” (13<sup>th</sup> – broadsheets; 8<sup>th</sup> – tabloids), “addiction” (56<sup>th</sup> – broadsheets; 57<sup>th</sup> – tabloids), “drug” (68<sup>th</sup> – broadsheets; 58<sup>th</sup> – tabloids), “alcohol” (93<sup>rd</sup> – broadsheets; 79<sup>th</sup> – tabloids). While such coverage may have a positive social impact by warning people of the dangers of such

substances, it may also present mental illness as being a product of people’s life choices, thereby depicting people with mental illness as being partially responsible for their conditions. This may further the stereotype that people with mental health problems are a societal burden, since they may be viewed as having created the problems for which they require treatment.

Fig. 3.4.2.5:

Drugs General Key-keywords 2007-2010				
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151-200	Rank 201+
skunk cannabis addictions	binge addicts addiction drug drugs	misuse cocaine alcoholism alcohol	heroin harmful	drinking

The pervasive presence of terms relating to governance (Fig. 3.4.2.6) may also perpetuate authoritarian attitudes and perceptions of people with mental illness as a societal burden, since such coverage presents people with mental illness as needing to have their lives governed for them – “aynsley” (9<sup>th</sup>) [Children’s Commissioner, Sir Aynsley-Green], “mod” (95<sup>th</sup>) [Ministry of Defence].

Fig. 3.4.2.6:

Governance General Key-keywords 2007-2010				
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151-200	Rank 201+
aynsley	mod	watchdog blair	trusts spokeswoman spokesman	gordon criticised failing pm warned concerns trust executive chief review

The presence of “mod” (95<sup>th</sup>) highlights the previously-mentioned focus on problems affecting soldiers or combat veterans, particularly PTSD – “posttraumatic” (7<sup>th</sup>), “ptsd” (8<sup>th</sup>), “traumatised” (20<sup>th</sup>), “flashbacks” (24<sup>th</sup>), “veterans” (35<sup>th</sup>), “traumatic” (42<sup>nd</sup>),

“Afghanistan” (57<sup>th</sup>), “mod” (95<sup>th</sup>), “servicemen” (102<sup>nd</sup>), “combat” (137<sup>th</sup>), “Iraq” (165<sup>th</sup>), “soldiers” (174<sup>th</sup>), “trigger” (187<sup>th</sup>). By highlighting mental health issues affecting soldiers and veterans, 2007-2010 coverage may help to combat stigmatising conceptions of people with mental illness, by discussing mental illness in a population generally respected by the public. Besides PTSD, a wide variety of non-violent and developmental disorders featured prominently in 2007-2010 (Fig. 3.4.2.7), alongside coverage of addictive disorders – “adhd” (2<sup>nd</sup>), “asperger” (6<sup>th</sup>), “bipolar” (11<sup>th</sup>), etc. Such coverage is likely to decrease stigmas of danger and criminality, by presenting more instances of mental illness occurring without threatening tendencies. Illnesses associated with violent or unpredictable traits were still present in 2007-2010 coverage – “schizophrenia” (23<sup>rd</sup>), “schizophrenic” (29<sup>th</sup>), etc. – however, key-keywords relating to non-violent disorders outweighed terms relating to violent disorders. Non-violent terms were also higher in key-keyword rankings, further demonstrating the reduction of danger and criminality stigma in coverage. Generic illness terms were also present at similar rankings to 2003-2006 – “mental” (28<sup>th</sup>), “disorder” (52<sup>nd</sup>), etc. – further disassociating mental illness from specific violent disorders. Illness terms were very similar across both categories of newspaper, but “alzheimer” (26<sup>th</sup> – tabloids) and “dementia” (39<sup>th</sup> – tabloids) were only present in tabloids. This again shows variation in the illnesses covered by different types of newspaper throughout the corpus, which may influence stigmas present in coverage.

Fig. 3.4.2.7:

Illness General Key-keywords 2007-2010				
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151-200	Rank 201+
adhd asperger bipolar suicides mental schizophrenic psychotic suicidal paranoid psychosis depression harming	disorder disorders delusions suicide alzheimer depressive hallucinations illness manic dementia trauma illnesses paranoia compulsive obesity mentally	alcoholism obsessive stress anxiety behavioural psychological disabilities depressed	harm ill disability emotional madness problems distress	personality sick condition sex

Identifiers showed similar positive change (Fig. 3.4.2.8), with coverage of veterans and other respected figures demonstrating the potential for mental illness to impact ‘strong’ members of society – “veterans” (35<sup>th</sup>), “celebrities” (101<sup>st</sup>), “servicemen” (102<sup>nd</sup>), “soldiers” (174<sup>th</sup>). However, the highest-ranked identifier was still “schizophrenic” (29<sup>th</sup>), showing that mental illness was still associated with potentially dangerous behaviour; the presence of “killer” (131<sup>st</sup>) similarly indicates this. Interestingly, “schizophrenic” (11<sup>th</sup> – tabloids) was absent from broadsheet key-keywords; this could be indicative of a move away from the use of stigmatising identifiers in broadsheets, in favour of ‘person-first language’, which frames people with mental illness as people first, rather than defining them by their condition (Brown & Bradley, 2002). This was supported by the fact that “schizophrenia” (15<sup>th</sup> – broadsheets; 21<sup>st</sup> – tabloids) maintained a significant presence in both categories of newspaper, demonstrating that coverage of schizophrenia did not decrease in broadsheets but the label ‘schizophrenic’ was avoided by this category of newspaper. However, the presence of “offenders” (112<sup>th</sup>), “inmates” (115<sup>th</sup>), and “prisoners” (188<sup>th</sup>), demonstrates a continued labelling of people with mental illness that connotes criminality, and “offenders” (51<sup>st</sup> – broadsheets) and “prisoners” (86<sup>th</sup> – broadsheets) were only present in broadsheet key-keywords. Neutral terms, with a focus on youth, were unchanged in their rankings, though there were slightly fewer than in 2003-2006 – “teenagers” (106<sup>th</sup>), “adults” (221<sup>st</sup>), etc. Meanwhile, framing of people with mental illness as patients rather than people continued to decline, supporting increased usage of ‘person-first language’, with patient-related terms occurring at lower ranks than previous periods, while “people” maintained a similar ranking – “patients” (208<sup>th</sup>), “patient” (240<sup>th</sup>), “people” (287<sup>th</sup>). This may reduce benevolence stigma by decreasing depictions of people with mental illness as passive agents requiring treatment, rather than as independent individuals.

Fig. 3.4.2.8:

Identifier General Key-keywords 2007-2010				
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151-200	Rank 201+
schizophrenic veterans		celebrities servicemen teenagers offenders inmates killer	soldiers prisoners	patients adults patient childhood children kids people

Terms relating to treatment were also prevalent (Fig. 3.4.2.9), which may reduce severity stigma by depicting mental illness as treatable. Though antidepressants were still prominent in 2007-2010 key-keywords – “antidepressants” (13<sup>th</sup>), “prozac” (17<sup>th</sup>), etc. – there were far fewer terms than in 2003-2006, with the antidepressant controversy of the previous period having run its course. This may reduce severity stigma, since coverage focused on treatments with better efficacy. Additionally, terms relating to Cognitive Behaviour Therapy (CBT) were new to 2007-2010 key-keywords – “cbt” (16<sup>th</sup>), “therapy” (105<sup>th</sup>), “cognitive” (183<sup>rd</sup>), “behaviour” (270<sup>th</sup>). Such coverage was generally positive, with CBT being showcased as an effective form of treatment, and as an alternative to antidepressants; this was likely to combat severity stigma, by portraying mental illnesses as treatable. However, discussion of CBT was exclusive to broadsheets – “cbt” (8<sup>th</sup>) – whilst terms relating to antidepressants were more numerous in tabloids – “depressants” (not present – broadsheets; 10<sup>th</sup> – tabloids), “prozac” (not present – broadsheets; 12<sup>th</sup> – tabloids), “antidepressants” (9<sup>th</sup> – broadsheets; 16<sup>th</sup> – tabloids). Other terms relating to the successful treatment of mental illness were present in general key-keywords at similar levels to 2003-2006, which may aid in the reduction of severity stigma – “wellbeing” (22<sup>nd</sup>), “tackle” (204<sup>th</sup>), “treated” (245<sup>th</sup>), “cope” (249<sup>th</sup>), “healthy” (265<sup>th</sup>).

Fig. 3.4.2.9:

Treatment General Key-keywords 2007-2010				
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151-200	Rank 201+
antidepressants cbt prozac depressants psychiatrist healthcare therapies medication	therapists psychotherapy drug drugs	therapy pills treatments prescription counselling	carers treating treatment experts cognitive researchers	care treat behaviour help

Key-keywords relating to mental health charities or advocacy groups maintained a similar presence to 2003-2006, showing a sustained increase in de-stigmatisation discussion (Fig. 3.4.2.10) – “aynsley” (9<sup>th</sup>), “samaritans” (61<sup>st</sup>), etc. The key-keyword “stigma” (40<sup>th</sup>) also had a higher rank than in previous periods, and the terms “bullied” (94<sup>th</sup>) and “combat” (137<sup>th</sup>) [used to discuss combating stigma as well as physical combat], were new to 2007-2010 key-keywords. The presence of these terms, alongside de-stigmatisation-related key-keywords from previous periods, demonstrates a continued increase in coverage attempting

to raise awareness of stigmas surrounding mental health issues, and the problems faced by people with such conditions. De-stigmatisation coverage was again more prominent in broadsheets, but “wellbeing” (12<sup>th</sup> – broadsheets; 35<sup>th</sup> – tabloids) and “stigma” (25<sup>th</sup> – broadsheets; 47<sup>th</sup> – tabloids) did appear in tabloids, unlike in previous periods, demonstrating increased attempts to address mental health stigma in these newspapers.

Fig. 3.4.2.10:

De-stigmatisation General Key-keywords 2007-2010				
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151-200	Rank 201+
aynsley stigma	samaritans bullying campaigners rethink sane bullied	charities charity combat	trusts	tackle

### 3.4.3. ‘mental illness’ Collocates:

The term ‘mental illness’ occurred 785 times in 2007-2010 with 509 collocates, of which 153 were above statistical thresholds. This represents a slight decline in usage of the term ‘mental illness’ compared with 2003-2006. In broadsheets, ‘mental illness’ occurred 501 times with 363 collocates, of which 113 were over statistical thresholds; in tabloids, ‘mental illness’ occurred 284 times with 509 collocates, of which 89 were over statistical thresholds. This continues to suggest a greater focus on individual disorders in tabloids.

Collocates connoting danger were very rare, as with earlier periods, with only 4 collocates above statistical thresholds relating to this stigma (2.61% of total collocates) (Fig. 3.4.3.1). Only one term was criminality-related in 2007-2010 collocates – “homicide” (58<sup>th</sup>). This demonstrates that criminality and violence continued to be very infrequently discussed in the immediate context of ‘mental illness’.

Fig. 3.4.3.1:

Danger Collocates 2007-2010		
Rank 1-50	Rank 51-100	Rank 101-150
homicide risk	violence	dangerous



Benevolence-related collocates were present at similar levels to 2003-2006 coverage (-0.29%), with 8 terms (5.23% of total collocates) relating to benevolence stigma (Fig. 3.4.3.2). These terms were similarly present in broadsheets and tabloids. As with previous periods, most of these terms related to the ‘suffering’ of people with mental illness, portraying people as deeply debilitated by mental health conditions. These collocates also had high frequencies, though less so than in 2003-2006 – for example, “suffering” (2003-2006 – freq. 59; 2007-2010 – 45) and “suffer” (2003-2006 – 24; 2007-2010 – 18).

Fig. 3.4.3.2:

Benevolence Collocates 2007-2010		
Rank 1-50	Rank 51-100	Rank 101-150
suffering	suffer suffers unemployment poverty sufferers	suffered vulnerable

The terms “unemployment” (60<sup>th</sup>) and “poverty” (83<sup>rd</sup>) were new to 2007-2010, and could increase perceptions of people with mental illness as incapable of living independently:

“A unique new veterans’ centre has opened in north-east England to help hundreds of former service personnel who face sleeping rough, **unemployment**, **mental illness** and prison.” (*The Independent*, 2010)

However, as with other benevolence-related coverage, such language could improve perceptions of people with mental illness, by making the public aware of the difficulties they face.

Severity-related collocates were once again the most prevalent of the stigmas investigated in this study; 22 collocates (14.38%) related to severity stigma in 2007-2010 (Fig. 3.4.3.3). This was a decrease compared with 2003-2006 coverage (-3.30%), which correlated with a similar decrease in severity-related key-keywords over the same period. Severity-related collocates were far more common in tabloids than broadsheets, with 21 tabloid collocates relating to severity stigma (23.60%), compared to only 11 broadsheet collocates (9.73%). Several severity-related terms overlapped with benevolence stigma, as with previous years – “suffering” (35<sup>th</sup>), “suffer” (53<sup>rd</sup>), “suffers” (54<sup>th</sup>), “sufferers” (86<sup>th</sup>),

“suffered” (122<sup>nd</sup>). Other severity-related collocates were similar in nature to previous periods, emphasising the longevity, severity, and prevalence of mental health conditions:

“It was the start of an eight-year **descent** into **mental illness** that ended in her death.” (*The Independent*, 2007)

Fig. 3.4.3.3:

Severity Collocates 2007-2010		
Rank 1-50	Rank 51-100	Rank 101-150
descent doubles shattering blighted history catastrophic lifelong severe suffering serious	suffer suffers massive rising sufferers higher battle risk impact	warning suffered vulnerable

As with the previous period, the longevity of mental health conditions was a particular focus in 2007-2010 collocates, appearing mainly in tabloids; “history” (20<sup>th</sup>) remained a high frequency collocate, occurring 40 times, 25 of which were in tabloids. The terms “severe” (29<sup>th</sup>, freq. 31) and “serious” (47<sup>th</sup>, freq. 33) also remained regularly collocated with ‘mental illness’, with similar frequencies to the period prior. This demonstrates that, whilst the number of severity-related collocates decreased between 2003-2006 and 2007-2010, the most frequent severity collocates were still used consistently in the latter period.

General illness terms maintained a significant presence, with 43 illness collocates in the period (28.10%) (Fig. 3.4.3.4). These occurred more frequently in broadsheets (32 terms, 28.32%) than tabloids (21 terms, 23.60%). The increase in collocates relating to causes found in 2003-2006 continued in 2007-2010, with a greater variety of terms denoting causes of mental illness – “contributes” (10<sup>th</sup>), “links” (19<sup>th</sup>), “induced” (22<sup>nd</sup>), “onset” (37<sup>th</sup>), “causes” (52<sup>nd</sup>), “developing” (66<sup>th</sup>), etc. Coverage of causes was particularly bolstered by the presence of terms relating to scientific research, with the press relaying the findings of recent studies into mental health:

“A World Bank international **study** of **mental illness** in 2000 found that it was second to heart disease as the greatest disability among employees.”

(*The Times*, 2009)

Fig. 3.4.3.4:

Illness Collocates 2007-2010		
Rank 1-50	Rank 51-100	Rank 101-150
explanations contributes marrow epilepsy links induced lancet [ <i>Scientific journal</i> ] incidence flu underlying onset forms prevalence signs types recovering	causes cure developing develop obesity anorexia rates link episode caused disability developed linked related result	schizophrenia cause cancer tackle treated form studies diagnosed level shows study depression

Whilst this focus on causes may still have a negative impact on public attitudes, due to implications of culpability, drug-related collocates were less frequent in 2007-2010 – only “cannabis” (118<sup>th</sup>, freq. 23) was present, mostly in tabloids (freq. 15). Therefore, coverage of causes was more likely to have a positive effect in 2007-2010, educating the public on the nature of mental illnesses and preventative measures. Collocates relating to treatments were less common than the previous period, though several were present – “marrow” (13<sup>th</sup>), “recovering” (50<sup>th</sup>), “cure” (63<sup>rd</sup>), “tackle” (110<sup>th</sup>), “treated” (113<sup>th</sup>):

“Scientists in the US claim to have used a bone **marrow** transplant to **cure** **mental illness** in a study ...” (*The Guardian*, 2010)

These terms remained more common in broadsheets than tabloids, with only “tackle” (51<sup>st</sup>) and “treated” (75<sup>th</sup>) appearing in tabloid collocates. This decline in treatment-related collocates could be detrimental to the idea that mental illnesses can be recovered from, although the general decline in severity-related collocates might counteract this.

Positive coverage relating to de-stigmatising mental illness continued to increase, with 28 related collocates in 2007-2010 (18.30%) (Fig. 3.4.3.5). These terms also appeared at very high collocate rankings (e.g. “preconceptions” (2<sup>nd</sup>), “stigmatise” (3<sup>rd</sup>), “misconceptions” (4<sup>th</sup>)), demonstrating continued improvements in press attempts to raise awareness of mental health stigma and combat discrimination:

“The 62-year-old peer ... is normally publicity-shy but hopes he will help lift the **stigma still attached to mental illness.**” (*The Evening Standard*, 2007)

“**Attitudes to mental illness are changing** for the better but with some alarming exceptions, a new report out today claims.” (*The Guardian*, 2009)

The term “stigma” (15<sup>th</sup>) remained a highly frequent collocate (2003-2006 – freq. 24; 2007-2010 – freq. 26), and there was also sustained evidence of the media acknowledging their own role in mental health stigma – “reporting” (57<sup>th</sup>), “coverage” (59<sup>th</sup>), “readers” (62<sup>nd</sup>). Once again, de-stigmatisation terms were more prevalent in broadsheet collocates, though they were still a notable presence in tabloids – 22 of 113 broadsheet collocates (19.47%) related to de-stigmatisation, compared with 9 of 89 tabloids (10.11%).

Fig. 3.4.3.5:

De-stigmatisation Collocates 2007-2010		
Rank 1-50	Rank 51-100	Rank 101-150
preconceptions stigmatise misconceptions myth taboos surrounding stigma stereotypes perceptions taboo employ racism openly attitudes ignorance attached understanding	insight associated reporting coverage readers shame changing burden campaigners discrimination	still

The most frequent identifier in collocates remained “people” (111<sup>th</sup>, freq. 84), and remained more frequent in broadsheets (freq. 68) than tabloids (freq. 16). The collocates “experience” (98<sup>th</sup>) and “living” (127<sup>th</sup>) also remained exclusive to broadsheets, suggesting greater coverage of personal experiences of mental illness in these newspapers. The identifiers “yuppie” (1<sup>st</sup>) and “stars” (44<sup>th</sup>), on the other hand, occurred only in tabloids, demonstrating a focus on celebrity and status.

## **3.5. 2011-2014**

### **3.5.1. Annual Overview**

Whilst stories covering individual cases of violent crime perpetrated by people with mental illness had reduced prevalence in 2003-2006 and 2007-2010, such cases were highly prominent in 2011-2014 coverage. The case of Shrien Dewani, discussed in Section 3.5.2, was dominant in all years of the period, as the Zito case was in earlier periods. However, there were also numerous high-profile cases specific to individual years. In 2011, Anders Breivik killed seventy-seven people in a terror attack in Norway, and this event was extensively covered in the media – “breivik” (10<sup>th</sup> – 2011; 1<sup>st</sup> – 2012). Whilst the attack happened in 2011, “breivik” was more prominent in 2012 mental health coverage due to a psychiatric evaluation being conducted on him prior to his trial. Initially, Breivik was diagnosed with paranoid schizophrenia, but a second evaluation determined that he was not psychotic at the time of the attacks, and was thus criminally responsible. Therefore, although Breivik did not have a mental illness which contributed to his actions, this violent crime was linked with mental illness through examinations of his mental state. Other mass shootings were also linked with mental health problems. In 2011, the killing of six people by Jared Loughner in Arizona was well-covered in UK mental health discourse – “loughner” (4<sup>th</sup> – 2011) – although he was not diagnosed with any disorder. The Sandy Hook massacre, perpetrated by Adam Lanza, was a significant story in 2012 – “lanza” (23<sup>rd</sup> – 2012). In 2013, the stabbing of Christina Edkins by Phillip Simelane, a man diagnosed with paranoid schizophrenia, was another high-profile story which presented a link between mental illness and extreme violence – “simelane” (1<sup>st</sup> – 2013), “edkins” (14<sup>th</sup> – 2013), “christina” (86<sup>th</sup> – 2013). These stories reinforced the connection between mental illness and violence, and perpetuate danger and criminality stigma, since the largest stories relating to mental health in the UK press consistently represented mental illness as a threat to the public.

By far the most prominent individual case of the period, however, was the murder of Reeva Steenkamp in 2014 by Oscar Pistorius, with numerous related keywords appearing at very high rankings – “pistorius” (1<sup>st</sup> – 2014), “steenkamp” (6<sup>th</sup> – 2014), “reeva” (14<sup>th</sup> – 2014), “nel” (34<sup>th</sup> – 2014) [Gerrie Nel, state prosecutor], “athlete” (77<sup>th</sup> – 2014). The extremely high levels of coverage of this story are likely due to Pistorius’ status as a famous Paralympic athlete. Though there was no link to mental illness, an expert witness for Pistorius’ defence claimed that anxiety, resultant from Pistorius’ disability, may have contributed to his killing

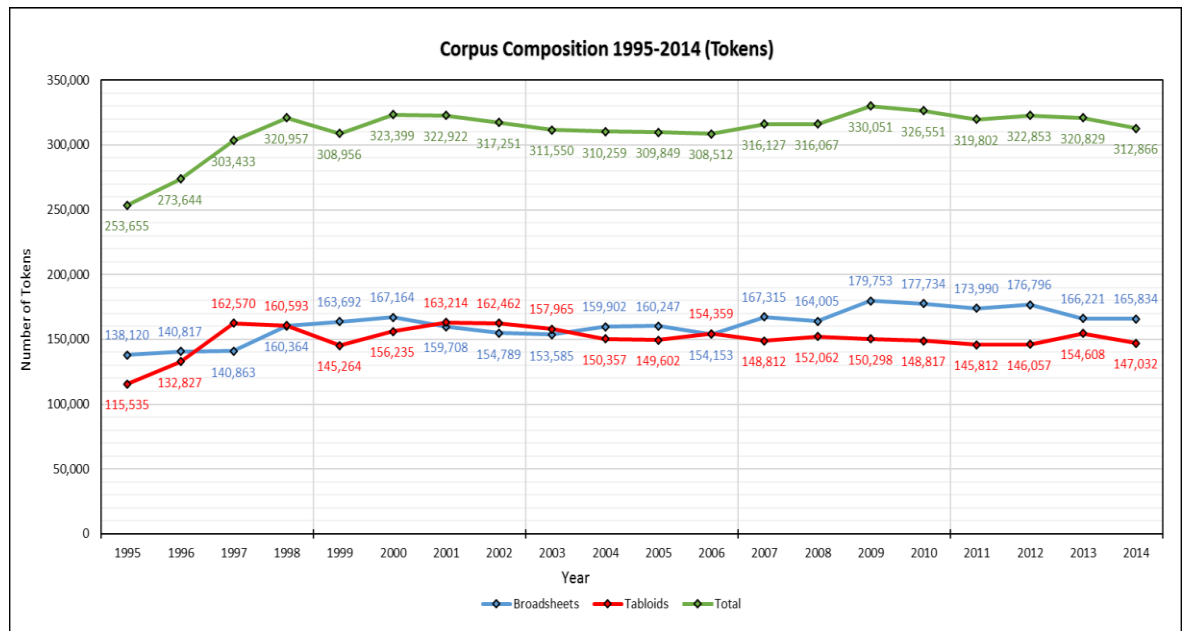
of Reeva. Subsequent psychiatric evaluation determined that mental illness did not affect his actions, however the association between mental illness and violent crime was already established by the minute-by-minute updates on this high-profile story. Other celebrity stories were also present in 2011-2014 keywords, though less significant than the Pistorius case. Michael Yardy's withdrawal from the England Cricket squad due to depression in 2011 was well-documented – “yardy” (2<sup>nd</sup> – 2011) – with coverage generally supportive of his decision, as was Catherine Zeta-Jones' treatment for depression in the same year – “zeta” (49<sup>th</sup> – 2011). Coverage of Miley Cyrus mocking Sinéad O'Conner's mental health problems on twitter also widely-condemned this stigmatising behaviour – “miley” (21<sup>st</sup> – 2013), “cyrus” (36<sup>th</sup> – 2013). However, the positive impact of such stories was severely limited by the much greater presence of stories in the period which presented people with mental illness as societal threats. This conception was emphasised by a ‘mental patient’ Halloween costume, which was stocked by Asda and Tesco in 2013, that consisted of blood-spattered overalls and a fake machete – “asda” (38<sup>th</sup> – 2013), “tesco” (76<sup>th</sup> – 2013), “costume” (90<sup>th</sup> – 2013). Positively, this incident was severely criticised in the press, with coverage detailing the damaging impact of such stereotypes on people with mental illness; however, this story emphasises the persistence of stigmas amongst wider society.

### **3.5.2. Key-keywords**

There were 276 general key-keywords in 2011-2014; this was 13 fewer than 2007-2010 (-4.50%), 17 fewer than 2003-2006 (-5.80%), 31 fewer than 1999-2002 (-10.10%), and 41 fewer than 1995-1998 (-12.93%). The continual decrease in the number of periodic key-keywords was surprising, especially given the fact that the number of words, or ‘tokens’, in each year of coverage remained reasonably consistent (Fig. 3.5.2.1). In fact, the period with the lowest total tokens, 1995-1998, had the highest number of key-keywords; it would be expected that there would be more key-keywords in periods with more words overall, since there would be more opportunities for keywords to appear which were consistent across all four years of a period. The fact that the number of key-keywords per period decreased suggests that UK press discourse on mental health has become less consistent over time, with fewer keywords being constant across consecutive years of coverage. This seems indicative of a trend towards more nuanced coverage of health conditions, with UK coverage becoming less homogenised. This would be a positive change, since the public has

previously been shown to generalise between mental illnesses (Angermeyer & Dietrich, 2006: 174).

Fig. 3.5.2.1:



This trend was also evidenced by the wide variety of key-keywords relating to types of illness in 2011-2014, particularly non-violent disorders (Fig. 3.5.2.2). This demonstrates a sustained increase in the granularity of mental health coverage in the UK press, with a greater variety of disorders present in 2011-2014 key-keywords compared to any previous periods. Meanwhile, generic illness terms were present in similar numbers, and at similar rankings, to 2007-2010, being lower in key-keyword rankings than terms relating to individual illnesses – “mental” (33<sup>rd</sup>), “disorder” (58<sup>th</sup>), etc. Terms relating to disorders associated with violent behaviour were also present at lower rankings and in lesser numbers than previous periods – “schizophrenia” (36<sup>th</sup>), “psychotic” (42<sup>nd</sup>), etc. This showcases a continued increase in the variety of illnesses covered in press discourse on mental health, and decreased coverage of conditions associated with danger to others. Each category of newspaper covered a similar variety of illness, however, as with 2007-2010 coverage, “dementia” (35<sup>th</sup> – tabloids) continued to be covered exclusively by tabloids.



Fig. 3.5.2.2:

Illness General Key-keywords 2011-2014				
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151-200	Rank 201+
ocd asperger ptsd bipolar autism mental schizophrenia traumatised psychotic depression schizophrenic harming	suicidal traumatic autistic paranoid disorder suicides psychosis illness disorders dementia suicide illnesses unwell anorexia harmed depressive compulsive mentally	anxiety trauma obsessive overdose natal stress disability disabilities depressed diabetes psychological	harm ill problems	disabled eating condition personality panic issues sick

25 key-keywords related to danger stigma in 2011-2014 (9.06% of general key-keywords for the period) (Fig. 3.5.2.3). This was similar to 2003-2006 (-0.84%) and 2007-2010 coverage (-0.28%), and noticeably lower than 1999-2002 (-3.64%) and 1995-1998 coverage (-5.14%). This demonstrates a general decline in coverage relating to danger stigma. 11 of 207 broadsheet key-keywords (5.31%) were danger-related, compared with 22 of 211 tabloid key-keywords (10.43%); this shows that, whilst general levels of danger stigma stabilised beyond 2003-2006, this was largely due to a lack of change in tabloid coverage: key-keywords relating to danger maintained levels of around 10% of tabloid coverage, whilst such coverage declined to around 5% in broadsheets. As with 2007-2010, key-keywords relating to the Zito case were absent from 2011-2014 coverage. However, while this may have suggested a move away from coverage of high-profile cases of dangerous individuals with mental health problems, the emergence of a new case in 2011-2014 contradicted this. In 2011, Shrien Dewani allegedly paid to have his wife Anni killed and faced extradition to South Africa to stand trial – “dewani” (1<sup>st</sup>), “shrien” (4<sup>th</sup>), “anni” (12<sup>th</sup>). This case maintained connotations of danger, however, Dewani’s mental illness was not portrayed as the cause of his alleged crime but as a mitigating factor, with his lawyers arguing that the death of his wife had given Shrien depression and PTSD, rendering him unfit to face trial. While this constitutes something of a positive change, since mental health

issues were not presented as threatening to the public, it might lead people to believe that mental illness is often simply an excuse for criminal behaviour, reducing public sympathy for people with mental illness, and possibly increasing views that they are a burden on society. Other criminal cases identified in annual keywords also demonstrate that mental illness was still presented as a cause of violence in 2011-2014.

Fig. 3.5.2.3:

Danger General Key-keywords 2011-2014				
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151-200	Rank 201+
dewani shrien anni	brady rampage coroner	stabbed manslaughter killer	victims killing tragic killings murder	kill tragedy knife violent risk warned killed injuries death victim violence

Terms relating to dangerous or violent events also remained interspersed throughout 2011-2014 key-keywords – “rampage” (69<sup>th</sup>), “coroner” (95<sup>th</sup>), “stabbed” (102<sup>nd</sup>), etc. These remained more numerous in tabloids and maintained similar rankings to 2007-2010. Likewise, “killer” (144<sup>th</sup>), “victims” (152<sup>nd</sup>), and “victim” (254<sup>th</sup>), held similar positions to 2007-2010, with “victims” and “victim” portraying both victims of mental illness and victims of people with mental illness. The terms “risk” (224<sup>th</sup>) and “warned” (233<sup>rd</sup>) also remained present; as with previous periods, these terms were also used to discuss problems with mental health treatments and services, but the connection between mental illness and potential threat may perpetuate danger stigma.

Whilst key-keyword analysis showed a reduction in danger stigma, a similar improvement was not apparent in coverage relating to criminality stigma. 51 key-keywords in 2011-2014 related to criminality (18.48% of general key-keywords for the period) (Fig. 3.5.2.4). The fact that this was almost level with 1995-1998 coverage demonstrates the persistence of criminal cases as prominent stories in UK press discourse on mental health, with the saliency of criminality-related key-keywords being significantly established by the Dewani case in 2011-2014 – “dewani” (1<sup>st</sup>), “shrien” (4<sup>th</sup>), “anni” (12<sup>th</sup>), “extradited” (34<sup>th</sup>),

“extradition” (56<sup>th</sup>), “unfit” (124<sup>th</sup>) [to stand trial]. Due to the significance of the Dewani case, criminality-related terms were highly similar between newspaper categories in 2011-2014; 34 of 207 broadsheet key-keywords (16.43%) related to criminality, compared with 33 of 211 tabloid key-keywords (15.64%). While this case did not implicate mental illness as the cause of crime, the frequent questioning of Dewani’s mental state may have strengthened the perceived connection between mental illness and deviant behaviour. Similarly, coverage of Ian Brady’s attempts to transfer from Ashworth secure hospital may have associated mental health problems with criminals – “brady” (65<sup>th</sup>), “ashworth” (72<sup>nd</sup>).

Fig. 3.5.2.4:

Criminality General Key-keywords 2011-2014				
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151-200	Rank 201+
dewani shrien anni sectioned broadmoor extradited	extradition brady prosecutors ashworth inquest detained qc coroner	jailed stabbed jail manslaughter unfit custody prosecutor detention killer convicted	discharged prison offenders diminished sentenced killing killings pleaded murder hearing judge	kill ruled admitted lawyers trial justice lawyer police arrested killed guilty accused secure court criminal inquiry

Terms which related to legal discourse were rife throughout 2011-2014 key-keywords – “prosecutors” (67<sup>th</sup>), “inquest” (77<sup>th</sup>), “qc” (90<sup>th</sup>), etc. The positions of individual terms fluctuated compared with 2007-2010 but generally remained similar; this was also the case for criminal terms which connoted danger as well – “coroner” (95<sup>th</sup>), “manslaughter” (123<sup>rd</sup>), “murder” (191<sup>st</sup>). The reduced ranks, compared to 2007-2010, of terms relating to detention under the Mental Health Act was a potentially positive change – “sectioned” (23<sup>rd</sup>), “broadmoor” (25<sup>th</sup>), “detained” (80<sup>th</sup>), “secure” (264<sup>th</sup>) – however, this was more likely a result of the influx of terms relating to the Dewani case at the top of 2011-2014 key-keywords. Areas of more clear change were the absence of identifiers which directly discussed perpetrators of crime – only “offenders” (176<sup>th</sup>) being present – and the absence

of terms relating to release into society – only “discharged” (149<sup>th</sup>). These changes are probable to reduce fears of people with mental illness integrating into wider society, as well as possibly reducing direct associations between mental illness and criminals (though the significance of the Dewani case would likely override this).

21 terms related to benevolence stigma in 2011-2014 (7.61% of general key-keywords for the period) (Fig. 3.5.2.5); this was a similar level to 2007-2010 (7.27%). This shows increased benevolence-related coverage compared to 1995-1998 but a relative stagnation in levels between 1999-2002, 2003-2006, and 2007-2010. Terms which depicted people with mental illness as victims were slightly higher-ranked than in 2007-2010 – “traumatised” (40<sup>th</sup>), “sufferers” (105<sup>th</sup>), etc. Key-keywords relating to charities were also higher in 2011-2014 – “charities” (88<sup>th</sup>), “charity” (122<sup>nd</sup>) – which might propagate conceptions of people with mental illness as ‘charity cases’. Terms relating to the mistreatment of people with mental illness, which might present such people as objects of pity, were present at similar rankings to previous periods – “bullying” (74<sup>th</sup>), “bullied” (87<sup>th</sup>), “abusive” (111<sup>th</sup>), “abused” (154<sup>th</sup>), “abuse” (168<sup>th</sup>). As a result, coverage relating to benevolence stigma remained relatively stable over the period covered by the corpus, besides an initial increase over 1995-1998 levels. Benevolence stigma was also present at similar levels in broadsheets and tabloids in 2011-2014; 14 of 207 broadsheet key-keywords (6.76%) were benevolence-related, compared with 13 of 211 tabloid key-keywords (6.16%). The only notable difference was the presence of “benefits” (149<sup>th</sup> – broadsheets) and “welfare” (158<sup>th</sup> – broadsheets) in broadsheet rankings; these terms were not present in tabloid coverage of the period and are more likely to frame people with mental illness as a societal burden.

Fig. 3.5.2.5:

Benevolence General Key-keywords 2011-2014				
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151-200	Rank 201+
traumatised	bullying bullied charities	sufferers trauma abusive vulnerable suffers charity suffering carer victims	abused suffer abuse suffered esteem tragic	care victim

There were 18 severity-related key-keywords in 2011-2014 (6.52% of general key-keywords for the period) (Fig. 3.5.2.6). This represents a return to a level similar to 1999-2002 (+0.01%) but remains an increase over 1995-1998 coverage (+2.73%). As with prior periods, terms relating to severity stigma overlapped with those relating to benevolence stigma, with coverage which presented people with mental illness as sufferers also implying increased difficulty in recovery – “traumatised” (40<sup>th</sup>), “sufferers” (105<sup>th</sup>), etc. Therefore, concurrent with similarities in benevolence-related coverage, terms which might propagate severity stigma were also similar between newspaper categories; 14 of 207 broadsheet key-keywords (6.76%) were severity-related in 2011-2014, compared with 12 of 211 tabloid key-keywords (5.69%). Key-keywords which emphasised the longevity of mental health conditions were less frequent than in 2007-2010 – “breakdown” (166<sup>th</sup>), “repeatedly” (185<sup>th</sup>), “chronic” (235<sup>th</sup>), “lives” (247<sup>th</sup>). The notable absence of “flashbacks” (24<sup>th</sup> in 2007-2010), demonstrates a reduction in coverage of PTSD in soldiers; only three other terms relating to this coverage continued from 2007-2010 key-keywords, at lower rankings – “veterans” (71<sup>st</sup>), “Afghanistan” (114<sup>th</sup>), “combat” (190<sup>th</sup>). Discussion of addictive disorders was also greatly reduced – with only “addiction” (97<sup>th</sup>) present in 2011-2014 – which would contribute to a reduction in coverage indicating enduring conditions. Terms connoting seriousness were also less frequent, though they occurred at slightly higher rankings – “shocking” (109<sup>th</sup>), “struggling” (175<sup>th</sup>), “severe” (194<sup>th</sup>), “risk” (224<sup>th</sup>). Reductions in the number of terms relating to extreme or long-lasting conditions is likely to reduce conceptions of mental health conditions as untreatable or unmanageable, reducing severity stigma. However, new to 2011-2014 was discussion of benefits (financial support) for people with mental health conditions – “claimants” (86<sup>th</sup>) [benefits], “unfit” (124<sup>th</sup>) [to work]. Depictions of people with mental conditions as dependent on benefits may increase severity stigma, and may strengthen the stereotype that people with mental illness are burdens on society, since they may be viewed by the public as a drain on resources.

Fig. 3.5.2.6:

Severity General Key-keywords 2011-2014				
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151-200	Rank 201+
traumatised	claimants addiction	sufferers trauma shocking suffers unfit suffering	suffer breakdown suffered struggling repeatedly severe	risk chronic lives

This focus on benefits was also demonstrated by several terms relating to governance (Fig. 3.5.2.7). The top-ranked of these terms related to the Work Capability Assessment scheme, which was introduced to determine whether people claiming incapacity benefits were fit to work – “atos” (11<sup>th</sup>), “wca” (18<sup>th</sup>). Such coverage may further severity and benevolence stigma, and perceptions of people with mental illness as a burden on society, since they are unable to contribute to society through work but ‘take’ from the system, in the form of benefits. Discussion of benefits claimants was more prevalent in broadsheets, with “atos” (8<sup>th</sup> – broadsheets) and “wca” (12<sup>th</sup> – broadsheets) not appearing in tabloid key-keywords. Tied with several other governance terms only appearing in broadsheets – “cqc” (7<sup>th</sup> – broadsheets), “cuts” (102<sup>nd</sup> – broadsheets), “pm” (136<sup>th</sup> – broadsheets), “executive” (156<sup>th</sup> – broadsheets), “chief” (161<sup>st</sup> – broadsheets) – this demonstrated a continued focus on wider legislative issues in broadsheet coverage of mental health, which was less common in tabloid coverage throughout the corpus.

Fig. 3.5.2.7:

Governance General Key-keywords 2011-2014				
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151-200	Rank 201+
atos [ <i>Company conducting WCAs</i> ] cqc [ <i>Care Quality Commission</i> ] ofsted wca [ <i>Work Capability Assessment</i> ] miliband	clegg inquest watchdog	cameron	cuts dame criticised	failing concerns mp pm warned spokesman executive

Identifiers equally reflected a focus on benefits in both categories of paper (Fig. 3.5.2.8); the highest-ranking identifier was “jobseeker” (22<sup>nd</sup>), whilst “claimants” (86<sup>th</sup>) also featured highly. Tied with the reduction in coverage of “veterans” (71<sup>st</sup>), 2011-2014 coverage seemed likely to cause people to switch from associating mental illness with members of a valued social group, soldiers, to one which is frequently demonised, benefits claimants. Consequently, this may lead to further stigmatisation of people with mental illness. Other changes in identifiers were more positive, with “schizophrenic” (48<sup>th</sup>) and “killer” (144<sup>th</sup>) occurring at lower key-keyword ranks than in 2007-2010, and coverage of

“offenders” (176<sup>th</sup>) being significantly reduced (although “schizophrenic” also returned to broadsheet key-keywords, indicating that a move towards ‘people-first’ language, found in 2007-2010 broadsheet coverage, was temporary). The presence of “celebrity” (117<sup>th</sup>) might also help to show that mental illness can impact even the ‘strongest’ members of society. Neutral terms, with an emphasis on youth, remained unchanged in their presence – “teenagers” (119<sup>th</sup>), “teenager” (143<sup>rd</sup>), “adults” (215<sup>th</sup>), “children” (268<sup>th</sup>). However, framing as patients rather than people persisted, with “patients” (199<sup>th</sup>) and “patient” (238<sup>th</sup>) occurring at higher rankings than 2007-2010, whilst “people” did not feature at all in 2011-2014 key-keywords. Mental health discussion around people who are “homeless” (140<sup>th</sup>), might also contribute to the stereotype of people with mental illness as societal burdens.

Fig. 3.5.2.8:

Identifier General Key-keywords 2011-2014				
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151-200	Rank 201+
jobseeker schizophrenic	veterans claimants	celebrity teenagers homeless teenager killer	offenders patients	adults patient children

The reduction in coverage of addictive disorders was further reflected in the decreased number of key-keywords relating to drug use – “cannabis” (51<sup>st</sup>), “addiction” (97<sup>th</sup>), “overdose” (113<sup>th</sup>), “drugs” (142<sup>nd</sup>), “drug” (159<sup>th</sup>), “alcohol” (173<sup>rd</sup>). People with mental illness were therefore less likely to be viewed as responsible for their illnesses, since lifestyle choices were less frequently portrayed as the cause of mental health problems. Discussion of potential treatments remained at a similar level to 2007-2010; treatment-related key-keywords generally occurred at slightly lower rankings in 2011-2014 coverage, but were also more numerous (Fig. 3.5.2.9). As with previous periods, such coverage may reduce severity stigma by demonstrating means of managing or curing mental health conditions. The continued decline in the key-keyword positions of terms relating to antidepressants (2011-2014 was the only period not to feature “prozac” as a key-keyword), was also likely to aid severity stigma reduction, since it reflects a reduction in coverage of controversial treatments. Treatments were covered similarly by broadsheets and tabloids, with related terms occurring at comparable rankings – “antidepressants” (16<sup>th</sup> – broadsheets; 18<sup>th</sup> – tabloids), “medication” (30<sup>th</sup> – broadsheets; 33<sup>rd</sup> – tabloids). However, as with 2007-2010 coverage, Cognitive Behavioural Therapy was only covered by broadsheets – “cbt”

(18<sup>th</sup> – broadsheets) “behavioural” (82<sup>nd</sup> – broadsheets). CBT is considered an effective treatment and coverage of this therapy in broadsheets was likely to combat severity stigma. Conversely, the lack of coverage of this treatment in tabloids, whilst coverage of controversial antidepressants remained present, may have supported severity stigma, by failing to present effective treatments to the public.

Fig. 3.5.2.9:

Treatment General Key-keywords 2011-2014				
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151-200	Rank 201+
antidepressants depressants antidepressant cbt psychotherapist therapies medication psychiatrist healthcare	prescriptions pills	therapy prescription carer treatments drugs	therapist counselling drug treatment prescribed counsellor treating researchers experts	care medicine help

As with 2007-2010, terms relating to successful treatment were also present, which might reduce severity stigma (Fig. 3.5.2.10) – “wellbeing” (38<sup>th</sup>), “treated” (234<sup>th</sup>), “cope” (242<sup>nd</sup>). Similarly, key-keywords relating to mental health charities or advocacy groups were present at a similar level to 2007-2010 – “cqc” (13<sup>th</sup>) [Care Quality Commission], “rethink” (70<sup>th</sup>). Although these terms might increase benevolence stigma, they helped to raise awareness of the problems faced by people with mental illness and presented supportive perspectives to the public. There was also a demonstration of new attempts to present the perspectives of people with mental illness – “experiencing” (183<sup>rd</sup>), “revealed” (205<sup>th</sup>), “experiences” (275<sup>th</sup>) – which could consequently improve public understanding of people with mental illness. The continued presence of terms relating to discrimination and stigma demonstrated sustained efforts to raise awareness of mental health stigma – “stigma” (37<sup>th</sup>), “bullying” (74<sup>th</sup>), “bullied” (87<sup>th</sup>), “combat” (190<sup>th</sup>) [combating stigma], “discrimination” (218<sup>th</sup>). Positively, de-stigmatisation discussion was more equitable between newspaper categories compared to previous periods, with increased discussion of mental health advocacy groups and stigma in tabloids, although related terms remained more numerous in broadsheet key-keywords.



Fig. 3.5.2.10:

De-stigmatisation General Key-keywords 2011-2014				
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151-200	Rank 201+
cqc stigma	rethink bullying bullied charities watchdog sane	campaigners charity	experiencing combat	revealed discrimination spokesman trust experiences

### 3.5.3. 'mental illness' Collocates

The term 'mental illness' occurred 1033 times in coverage from 2011-2014 with 693 collocates, of which 237 were above statistical thresholds. This was the highest usage of the term in all periods of the corpus. In broadsheets, 'mental illness' occurred 699 times with 493 collocates, of which 192 were over statistical thresholds; in tabloids, 'mental illness' occurred 334 times with 265 collocates, of which 118 were over statistical thresholds. This sustained disparity throughout the corpus in the use of 'mental illness' between types of newspaper, suggests a greater focus on individual disorders in tabloids.

Terms relating to danger were even less common than previous periods, with only 3 collocates (1.27% of total collocates) relating to this stigma – “violence” (195<sup>th</sup>), “killed” (197<sup>th</sup>), “risk” (198<sup>th</sup>). These also occurred at low collocate rankings. Collocates relating to criminality were equally infrequent, with 3 collocates (1.27%) also relating to this stigma – “unlawfully” (25<sup>th</sup>), “inmates” (128<sup>th</sup>), “killed” (197<sup>th</sup>). The consistent lack of collocates relating to danger or criminality throughout corpus coverage demonstrates a significant difference between usage of the term 'mental illness' and general themes of coverage, where terms relating to danger and criminality maintained a significant presence. This suggests that discussion of danger or criminality in press coverage of mental health may be tied to specific disorders, rather than 'mental illness' generally – analysis of the collocates of specific disorders could potentially identify mental illnesses which tended to be more associated with stigmas of danger or criminality. This would allow for more nuanced insight into the prevalence of stigmas in press coverage, and facilitate the development of targeted campaigns for individual disorders, to tackle the different stigmas associated with different disorders.

Collocates associated with benevolence stigma appeared in similar numbers to previous periods, with 13 terms (5.49%) being benevolence-related (Fig. 3.5.3.1). Their presence made up a slightly larger section of tabloid collocates, with 9 broadsheet collocates (4.69%) being benevolence-related, compared with 8 tabloid collocates (6.78%). Benevolence-related collocates again presented people with mental illness as incapable or debilitated by their disease, potentially diminishing the agency of such people in the eyes of the public:

“A year after being **floored** by **mental illness**, Frank Bruno is back to battle for the rights of sufferers” (*The Daily Mirror*, 2014)

Fig. 3.5.3.1:

Benevolence Collocates 2011-2014			
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151+
floored battles struggles	suffering capable battling struggled suffer	suffers	sufferers suffered poor struggling

Collocates emphasising the “suffering” of people with mental illness were also present at similar frequencies to the previous period – “suffering” (2007-2010 – freq. 45; 2011-2014 – freq. 39), “suffer” (2007-2010 – freq. 18; 2011-2014 – freq. 19).

Severity-related collocates, as with all previous periods, were the most common of the four main stigmas being investigated: 32 collocates (13.50%) were associated with this stigma in 2011-2014 coverage (Fig. 3.5.3.2). These terms were more numerous in tabloids than broadsheets, with 20 broadsheet collocates (10.42%) being severity-related, compared with 22 tabloid collocates (18.64%). Several of these also related to benevolence stigma, as with prior periods – “floored” (6<sup>th</sup>), “suffering” (69<sup>th</sup>), etc. The level of severity collocates in 2011-2014 marked a further decline compared with 2007-2010 (-0.88%), and correlated with a decline in similar terms in keyword analysis. This suggests coverage was less consistent in presenting mental illness as highly severe or long-lasting disorders, although these terms were still common, and several still occurred with high frequencies – most notably “severe” (2007-2010 – 29<sup>th</sup>, freq. 31; 2011-2014 – 57<sup>th</sup>, freq. 31) and “serious” (2007-2010 – 47<sup>th</sup>, freq. 33; 2011-2014 – 103<sup>rd</sup>, freq. 21).

Fig. 3.5.3.2:

Severity Collocates 2011-2014			
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151+
floored descent battles history lifetime hell struggles generations	severe grave suffering prone battling overwhelming terrible struggled suffer	serious suffers widespread increases dramatic hit double battle	sufferers suffered major rising struggling common long

The term “history” also maintained its status as a high frequency collocate (27<sup>th</sup>, freq. 47), being accompanied by other terms which framed mental illnesses as highly enduring conditions:

“A COMPOSER hopes to highlight prejudice against madness and dementia with a new work drawing on three **generations** of **mental illness** in her family.”  
(*The Evening Standard*, 2012)

The persistent, high frequency presence of “history”, “severe”, and “serious” throughout periods shows that, although the number of unique terms associating ‘mental illness’ with severity declined over the period of corpus coverage, several salient collocates consistently connected mental illness with severity stigma.

Illness terms again constituted a major portion of collocates, with 57 collocates (24.05%) relating to illness (Fig. 3.5.3.3). These were more common in broadsheets (37 collocates, 19.27%) than tabloids (21 collocates, 17.80%). Collocates relating to identification and symptoms of mental health disorders were more numerous in 2011-2014 than the period prior – “defect” (2<sup>nd</sup>), “diagnosable” (20<sup>th</sup>), “clue” (28<sup>th</sup>), “undiagnosed” (51<sup>st</sup>), etc. This seems to be partially resultant from the large-scale coverage of the cases of Oscar Pistorius, Anders Breivik, and Shrien Dewani, with psychiatric evaluations forming central parts of these stories:

““Mr Pistorius did not suffer from a **mental illness** or **defect** that would have rendered him criminally not responsible,” said the state prosecutor Gerrie Nel ...” (*The Times*, 2014)

Fig. 3.5.3.3

Illness Collocates 2011-2014			
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151+
defect warrants diagnosable treatable clue prevalence untreated estimates	undiagnosed onset accounts reduces expectancy immune specifically requires recover alcoholism treating causes delusions require outcomes treat	science finds acute form preventing diagnosed underlying signs prevented highlights increases diagnosis rates personality falling double particularly learning	symptoms addiction developing shows schizophrenia seeking rising reduce experts treated treatment cases disorder depression help

Coverage of scientific studies continued their positive presence from the previous period – “warrants” (12<sup>th</sup>), “accounts” (56<sup>th</sup>), “science” (101<sup>st</sup>), “finds” (102<sup>nd</sup>), “highlights” (122<sup>nd</sup>), “shows” (165<sup>th</sup>), “experts” (188<sup>th</sup>) – with their appearance as collocates evidencing sustained attempts to increase public knowledge of mental illness:

“This link between abnormal eye movement and severe **mental illness warrants** more research.” (*The Daily Mail*, 2013)

“**Mental illness accounts** for nearly half of all ill health suffered by people in Britain today ...” (*The Independent*, 2012)

Terms relating to treatment or management of mental illness were also more numerous, in both broadsheets and tabloids – “treatable” (21<sup>st</sup>), “requires” (73<sup>rd</sup>), “recover” (75<sup>th</sup>), “treating” (78<sup>th</sup>), “require” (92<sup>nd</sup>), “outcomes” (93<sup>rd</sup>), etc. These collocates were generally used to promote the idea that mental disorders can be managed, and provided support for people with mental illness seeking treatment:

“On the same token, you don’t want to stigmatise people who are **seeking treatment for mental illness.**” (*The Daily Mirror*, 2014)

Additionally, collocates relating to reductions in levels of mental illness were present – “reduces” (59<sup>th</sup>), “immune” (63<sup>rd</sup>), “acute” (104<sup>th</sup>), “preventing” (108<sup>th</sup>), etc. – furthering the idea that mental illnesses are manageable conditions, although counterpoints were also evident – “increases” (127<sup>th</sup>), “double” (143<sup>rd</sup>), “rising” (173<sup>rd</sup>). Collocates relating to causes were less prevalent than the previous period – “onset” (53<sup>rd</sup>), “causes” (79<sup>th</sup>), “underlying” (111<sup>th</sup>), “developing” (164<sup>th</sup>) – and drug-related terms were almost entirely absent – “skunk” (26<sup>th</sup>, freq. 2), “smoking” (160<sup>th</sup>, freq. 3) – which could also have a positive impact on public attitudes, by reducing implications of blame.

Unlike previous periods, collocates relating to governance were a notable presence in 2011-2014 (Fig. 3.5.3.4). This demonstrated greater coverage of legislative and political issues surrounding mental illness in press discourse, rather than just the illnesses themselves. These terms were more common in broadsheets, suggesting that such discussion was more pronounced in these newspapers. Interestingly, governance words were absent in 1999-2002 collocates of ‘mental illness’, despite reforms to the Mental Health Act being discussed in this period, and the subsequent presence of governance terms in key-keywords of that period. This may simply be a result of the redundancy of using ‘mental illness’ in the immediate context of ‘Mental Health Act’, but it is nevertheless a surprising finding.

Fig. 3.5.3.4:

Governance Collocates 2011-2014			
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151+
gdp	millions	costs bn [billion] debt	mps executive chief

Terms relating to experience were also more numerous than in 2007-2010, suggesting further increases in coverage of personal experiences of mental illness – “experiences” (121<sup>st</sup>), “experiencing” (129<sup>th</sup>), “living” (155<sup>th</sup>), “experienced” (163<sup>rd</sup>), “experience” (176<sup>th</sup>), “facing” (178<sup>th</sup>), “personal” (181<sup>st</sup>). Such coverage humanises people with mental illness and is likely to de-stigmatise mental health conditions, by increasing public understanding of the impact of such conditions on peoples’ lives:

“... Mr Campbell urges MPs, those at the very heart of government, to join him in speaking out about their own **experiences** of **mental illness**.”

(*The Times*, 2012)

The term “people” (179, freq. 103) also increased in frequency, and remained the highest frequency identifier in collocates – this again suggested an increased presence of people with mental illness in mental health coverage. These collocates remained more frequent in broadsheets (freq. 68) than tabloids (freq. 35), but their more similar frequencies showed a reduced disparity between types of newspaper. Several celebrities also appeared in collocates. Ruby Wax and Frank Bruno – “ruby” (87<sup>th</sup>), “bruno” (91<sup>st</sup>), “wax” (115<sup>th</sup>), “frank” (116<sup>th</sup>) – appeared in support of mental health campaigns, whilst, rather bizarrely, Bill Oddie criticised celebrities for allegedly making mental illness ‘fashionable’ – “oddie” (9<sup>th</sup>), “fashionable” (13<sup>th</sup>). These terms had low collocate frequencies but still demonstrated increased attempts to reduce mental health stigma, by showing its ability to impact everyone.

De-stigmatisation discussion maintained a significant presence in 2011-2014 coverage with 35 collocates (14.77%) relating to this topic (Fig. 3.5.3.5), although this was actually a decline as a percentage of total collocates compared to 2007-2010 (-3.53%). However, usage of the term “stigma” (24<sup>th</sup>) significantly increased (2007-2010 – freq. 26; 2011-2014 – freq. 48), suggesting that, whilst the number of *different* stigma-related terms decreased as a percentage of total collocates, “stigma” was actually discussed more often in 2011-2014 coverage. These terms remained more common in broadsheets than tabloids, with 26 broadsheet collocates (13.54%) relating to de-stigmatisation, compared with 14 tabloid collocates (11.86%); “stigma” was also used 34 times in broadsheets, compared with 14 times in tabloids. This shows that, whilst broadsheets maintained greater coverage of de-stigmatisation of mental illness, tabloids also made positive increases in their coverage. Collocates relating to the charity Rethink Mental Illness were new to 2011-2014 and extremely prominent, in both categories of newspaper – “winstanley” (1<sup>st</sup>), “rethink” (3<sup>rd</sup>), “jenkins” (8<sup>th</sup>), “ceo” (11<sup>th</sup>), “paul” (170<sup>th</sup>). The term “rethink” also had a very high frequency, occurring 60 times in 2011-2014, demonstrating the high levels of coverage which mental health advocacy received in the period. Other terms relating to mental health charities also increased in coverage – “charity” (137<sup>th</sup>, freq. 21), “charities” (150<sup>th</sup>, freq. 7), “mind” (152<sup>nd</sup>, freq. 15). Whilst this could increase benevolence stigma, presenting supportive views seems more likely to help de-stigmatise mental illness. Collocates discussing the media’s own role in mental health stigma also remained present in both categories of newspaper – “depiction” (10<sup>th</sup>), “discussing” (34<sup>th</sup>), “represented” (48<sup>th</sup>),

“discussed” (50<sup>th</sup>), etc. – demonstrating sustained attempts to dispel stigmatising representations of mental illness.

Fig. 3.5.3.5:

De-stigmatisation Collocates 2011-2014			
Rank 1-50	Rank 51-100	Rank 101-150	Rank 151+
winstanley [CEO of <i>RETHINK</i> ] rethink jenkins [Paul Jenkins, ex- CEO of <i>RETHINK</i> ], depiction ceo mocking discriminatory stigma surrounding attached discussing stereotypes associate attitudes misunderstood represented discussed	praised associated prejudice discrimination backing	debt character charity understanding charities mind [ <i>MIND mental            health charity</i> ]	awareness understood paul campaign fact society report

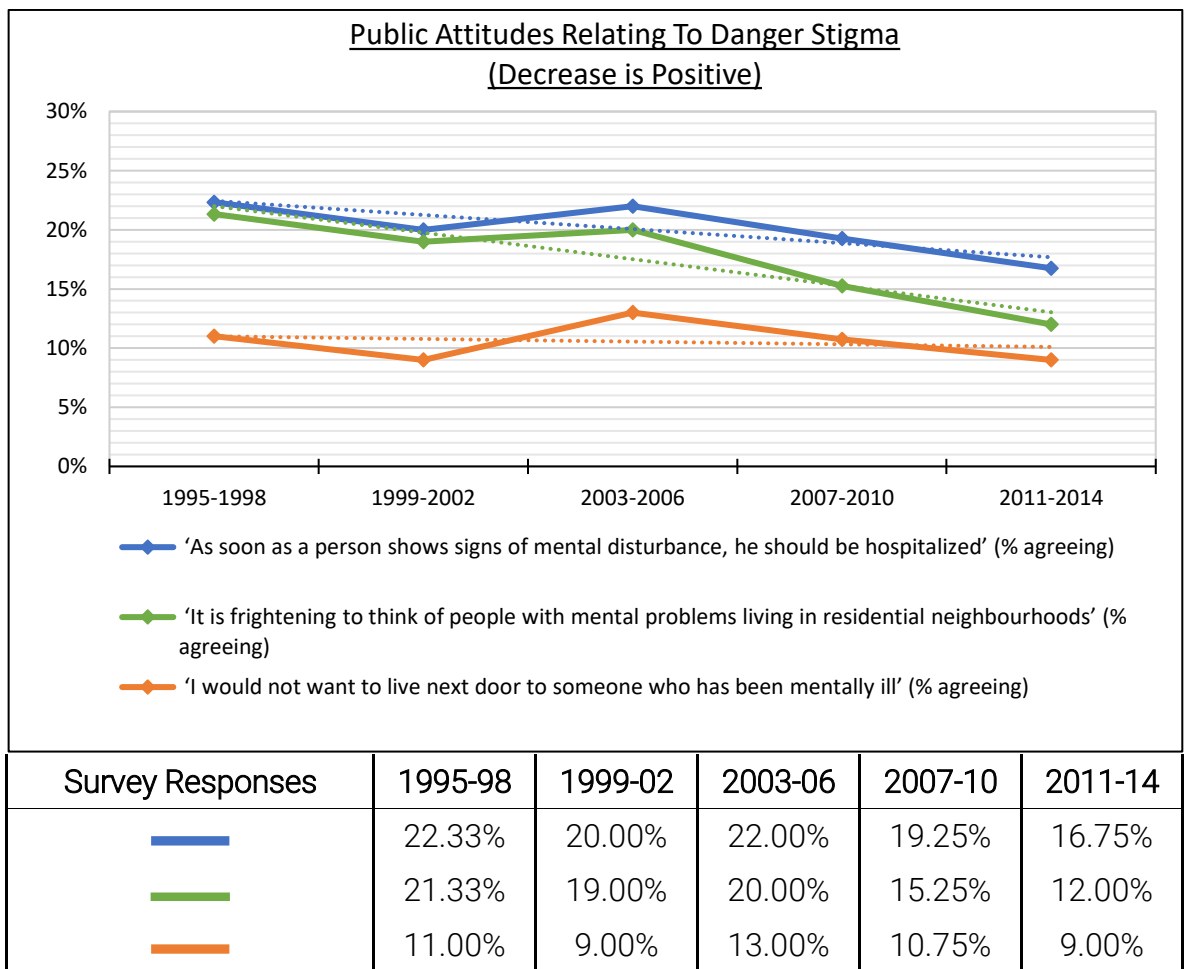
**4. Attitudes to Mental Illness Survey (AMIS)**  
**Comparison**



## 4.1. Attitudes Relating to Danger Stigma

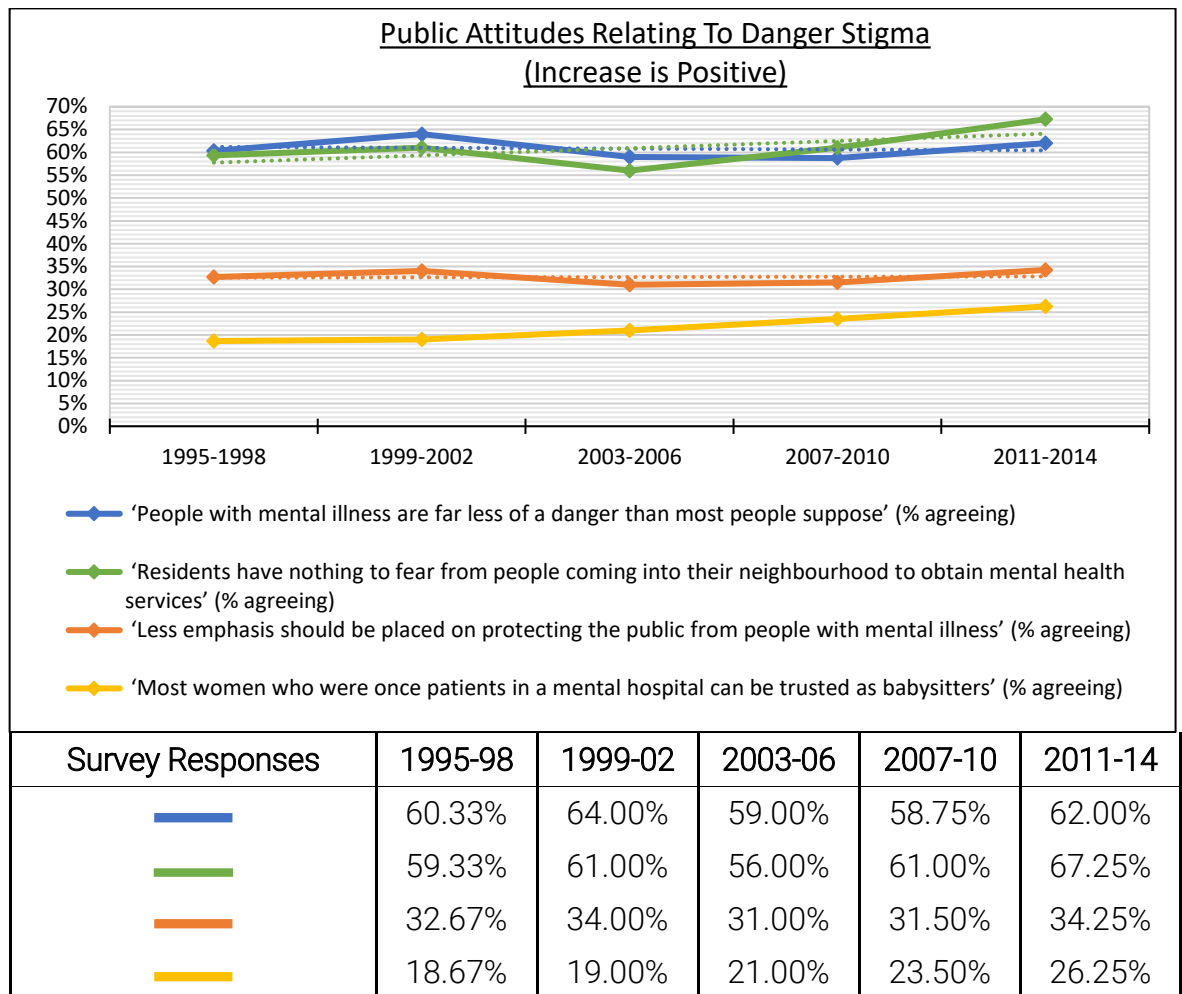
Eight questions were identified in *AMIS* which might relate to danger stigma. Three questions were identified in which a decrease in agreement represented a decline in danger stigma in public attitudes (Fig. 4.1.1). As this figure shows, negative public attitudes decreased over the period of corpus coverage, with a declining percentage of people agreeing with statements that presented people with mental illness as a threat.

Fig. 4.1.1:



Four questions were also identified in which an increase constituted positive change (Fig. 4.1.2), with the public increasingly agreeing with statements that downplayed the idea that people with mental illness are a threat.

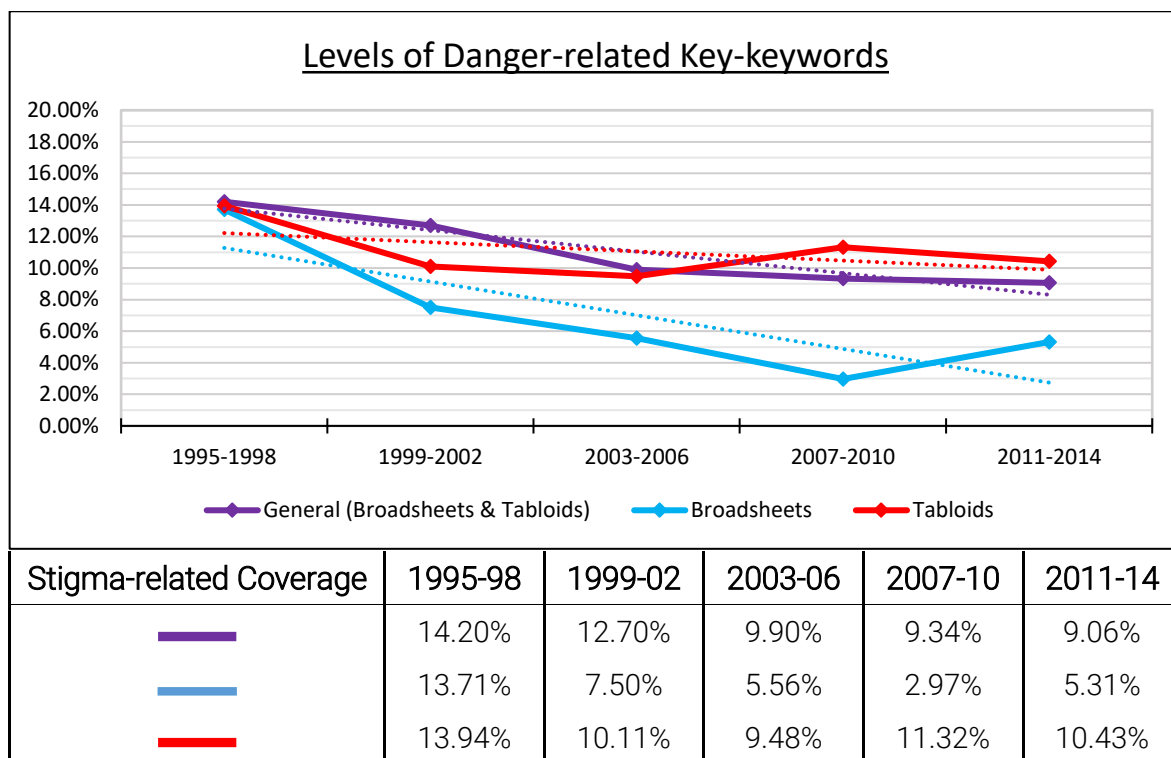
Fig. 4.1.2:



These responses correlated with decreases in coverage relating to danger stigma found in keyword and collocate analyses (Fig. 4.1.3 & Fig. 4.1.4). This demonstrates that, in general, public attitudes have improved in line with improvements in press coverage. However, there was a noticeable disparity in 2003-2006 between danger stigma in public attitudes and danger stigma in press coverage. During this period, there was increased agreement with statements that implied people with mental illness were dangerous, as well as decreased agreement with statements that positioned people with mental illness as non-threatening; this did not correlate with an increase in danger-related coverage found in key-word analysis. This may be due to the fact that survey data was only available for one year of this period, 2003, meaning individual events from this year had a large-scale impact on public attitudes for the period. The most likely explanation for this negative change in attitudes is the murders of Holly Wells and Jessica Chapman in August 2002 by Ian Huntley. As discussed in Section 3.2.1, this case received large-scale media coverage in 2002 but this would not have materialised into changes in public attitudes until 2003, since, until 2011, *AMIS* was carried out early in the year (January-March) (TNS BMRB, 2015). This change

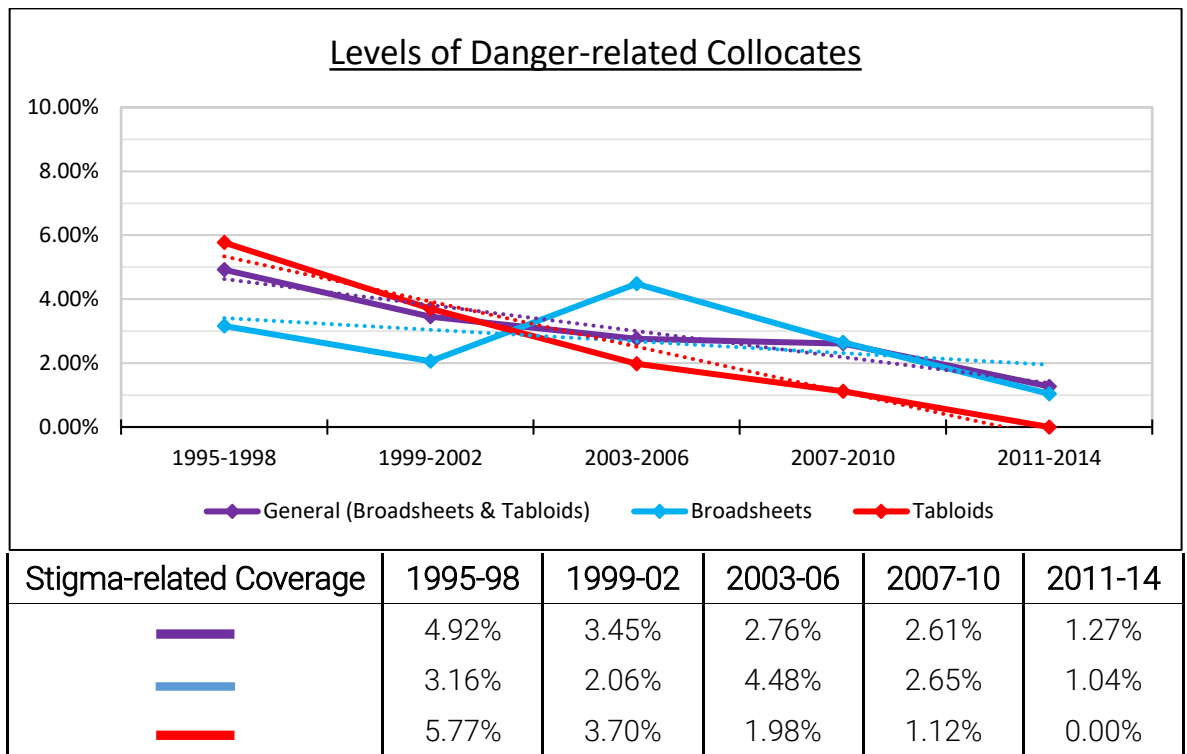
in danger-related coverage would also not be apparent in key-keyword analysis since coverage of the Huntley case was restricted to 2002-2003, and was thus filtered out of the four-year periods used for key-keyword analysis.

Fig. 4.1.3:



Danger-related collocates, on the other hand, did show a corresponding increase in 2003-2006, though only in broadsheets. Since collocate analysis was conducted on each period’s dataset as a whole – rather than collocates being filtered out if they did not appear in every year of a period – this would explain why danger-related collocates changed in line with public attitudes, when key-keywords did not (although this does not explain why this change only occurred in broadsheets). This increase may also be attributed to discussions of changes to the Mental Health Act to detain people with ‘dangerous and severe personality disorder’ (DSPD), with a draft bill being published and widely-criticised in June 2002 (Feeney, 2003; Beck, 2010). This discussion was common in 1999-2002, but this may not have materialised into public attitude changes until 2003, after the publication of the draft bill in 2002.

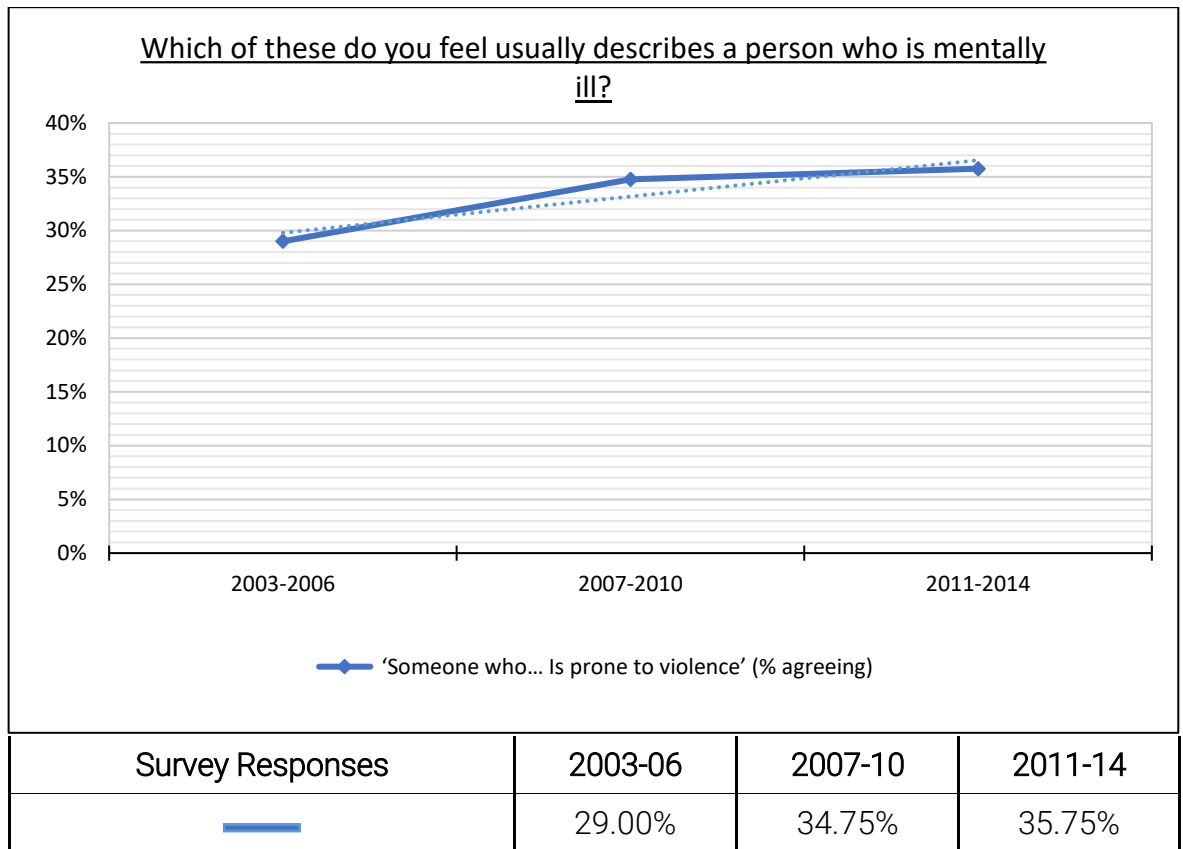
Fig. 4.1.4:



One final survey question was found that related to danger stigma (Fig. 4.1.5). This question was only run from 2003-2014 and was in a different format to other questions, asking respondents to indicate which statements they felt usually described a person who is mentally ill. Surprisingly, the percentage of people agreeing that ‘Someone who ... Is prone to violence’ was a term which usually described a person who is mentally ill increased over time, from 29%, in 2003-2006, to 35.75%, in 2011-2014. This was contrary to changes found in other danger-related survey responses, as well as running counter to decreases in associated press coverage. This may suggest that press coverage relating to danger stigma was less closely correlated with public opinion than other responses would suggest; increased agreement with this statement could indicate that perceptions of people with mental illness as ‘prone to violence’ were instead related to coverage of violent crime, since coverage relating to criminality increased over the same period that agreement with this statement did. However, this increase could also have resulted from the wording of the question, which seems more likely given the changes found in other responses. Since the question does not identify who is describing the person who is mentally ill, a respondent could interpret the question as ‘Which of these do you feel *is usually used* (by others) to describe a person who is mentally ill?’, rather than interpreting it as ‘Which statement do *you* feel best describes a person who is mentally ill?’ If interpreted as such, increased awareness of stigmas could actually lead to an increase in people agreeing with the statement

‘Someone who ... Is prone to violence’, since they would be more aware that people with mental illness are often described as being violent.

Fig. 4.1.5:



## 4.2. Attitudes Relating to Criminality Stigma

There were very few questions in *AMIS* relating to criminality stigma, and none which directly asked about links between mental illness and crime. However, three questions were found which indirectly related to criminality stigma, with responses likely to be affected by whether the public expected people with mental illness to engage in criminal behaviour or disrupt social harmony. Each of these also related to danger stigma, since statements affected by fears of people with mental illness as a threat to social order would also be affected by perceptions that they are a danger to the public. Some other survey statements relating to danger stigma might also have been affected by perceptions of people with mental illness as criminals, however, these related more strongly to danger stigma, and it was harder to ascertain whether or not they would be affected by criminality stigma independently. These statements were therefore omitted from the criminality grouping.

Two statements were identified in which a decrease in agreement would represent a positive change, with the public less likely to associate mental illness with crime or antisocial behaviour (Fig. 4.2.1). One statement was also found in which increased agreement represented positive change (Fig. 4.2.2).

Fig. 4.2.1:

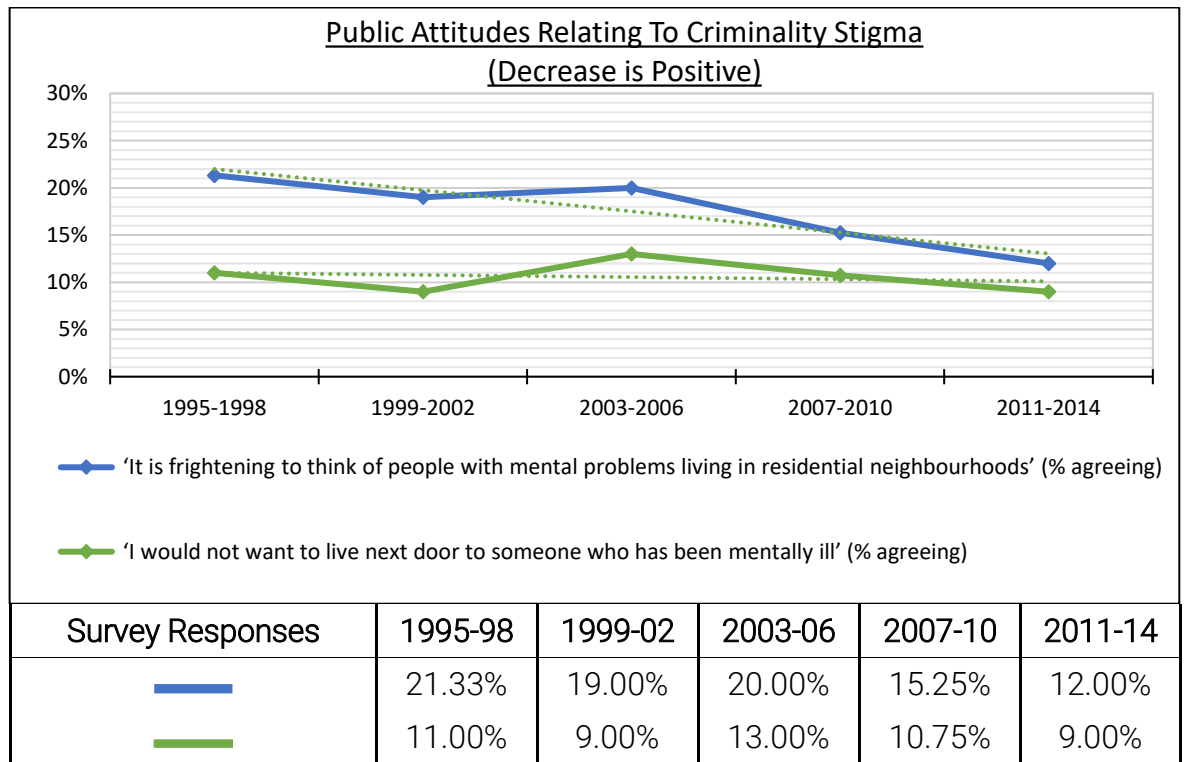
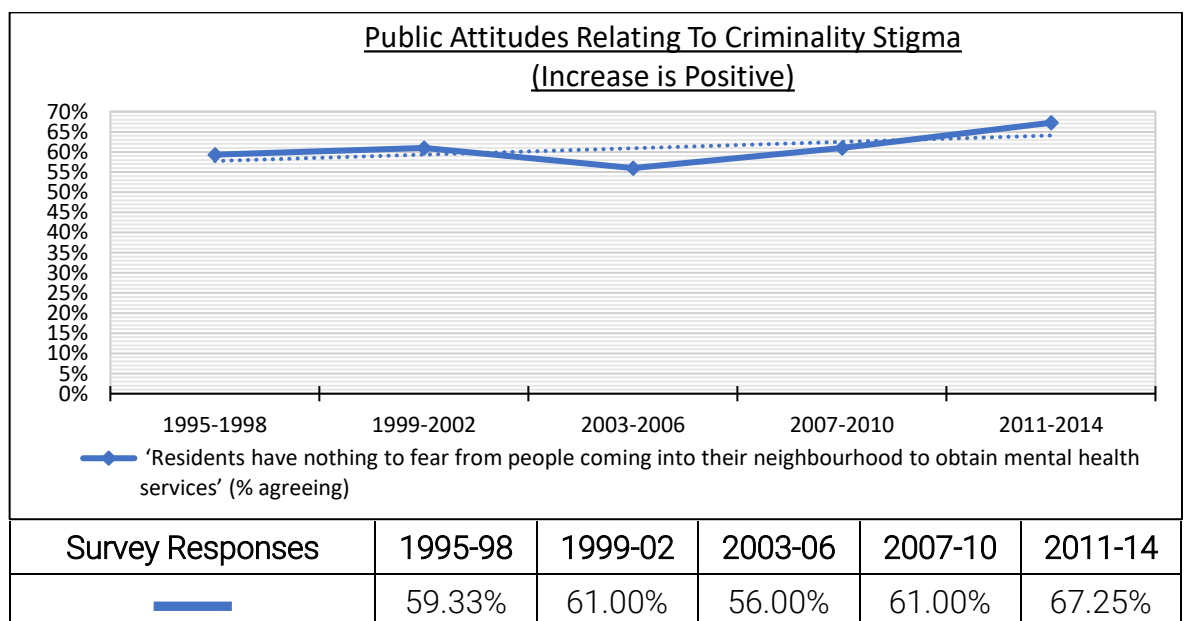


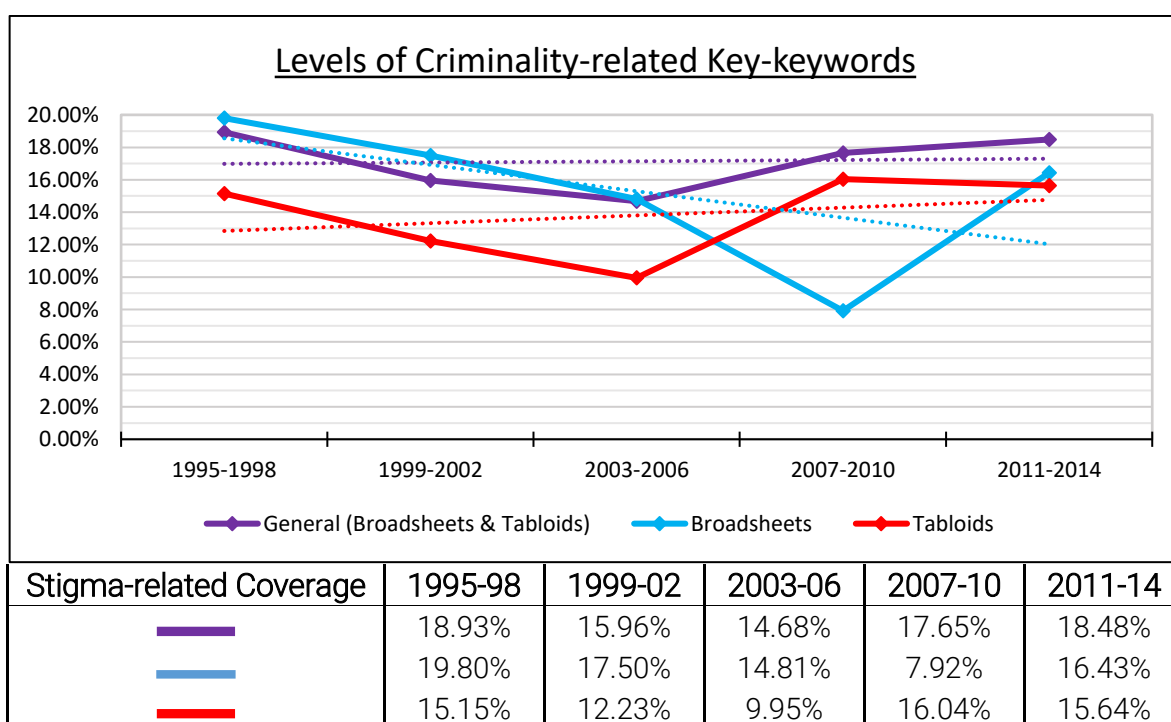
Fig. 4.2.2:



Responses to all of these questions showed positive changes, with the public increasingly disagreeing with statements that indicated fear of misanthropic behaviour from people with mental illness, and increasingly agreeing with statements to the contrary.

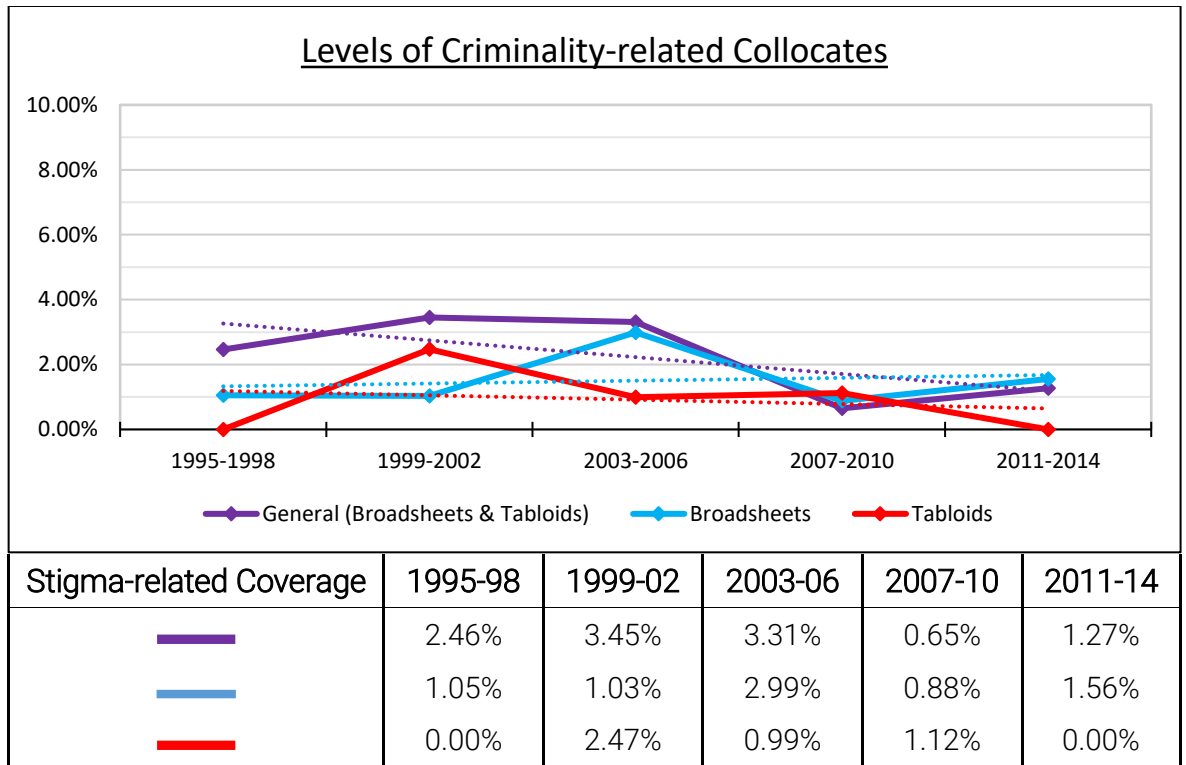
However, unlike with danger stigma, criminality-related key-keywords (Fig. 4.2.3) did not correlate with associated public attitudes, with criminality key-keywords decreasing from 1995-2006 but then increasing back to original levels by 2014. Initially, the disparity between public attitudes and press coverage relating to criminality stigma therefore seemed to indicate that public opinion has changed in spite of, rather than because of, changes in press coverage. However, criminality-related coverage in 2007-2010 tended to question the 2007 legislative reforms around the detainment of people with mental illness, rather than presenting people with mental illness as responsible for criminal behaviour (Section 3.4.2). Equally, much of 2011-2014 criminality-coverage discussed the case of Shrien Dewani (Section 3.5.2), with the death of his wife being posited as a cause of mental illness for Dewani, rather than attributing mental illness as the reason for the crime. This might explain why increases in criminality-related coverage did not affect decreases in criminality-related public attitudes, since people with mental illness were not generally presented as perpetrating criminal activity in these stories. Additionally, survey questions identified as criminality-related were also identified as danger-related; this might mean that public response to these statements was simply impacted more by danger stigma in press coverage than criminality stigma.

Fig. 4.2.3:



Criminality-related collocates (Fig. 4.2.4) followed the pattern found in public attitudes more closely, though the scarcity of such terms meant that the impact of changes in criminality collocates on public attitudes was likely minimal.

Fig. 4.2.4:



### 4.3. Attitudes Relating to Benevolence Stigma

Six survey questions that related to benevolence stigma were identified. In three of these, a decrease in agreement represented a positive change (Fig. 4.3.1), with declining public agreement with statements which presented people with mental illness as disempowered, or dependent. As can be seen from the figure below, responses to all three of these questions showed positive change, demonstrating a decrease in public perceptions of people with mental illness as ‘charity cases’. These decreases roughly aligned with slight decreases in benevolence-related collocates (Fig. 4.3.2); however, there was actually an increase in benevolence-related collocates in tabloids between 2003-2014. This may have been the result of increased attempts by tabloids to de-stigmatise mental health issues by portraying the ‘suffering’ of people with mental illness; consequently, increases in benevolence-related



coverage may have actually improved some public attitudes, by improving public knowledge of certain conditions.

Fig. 4.3.1:

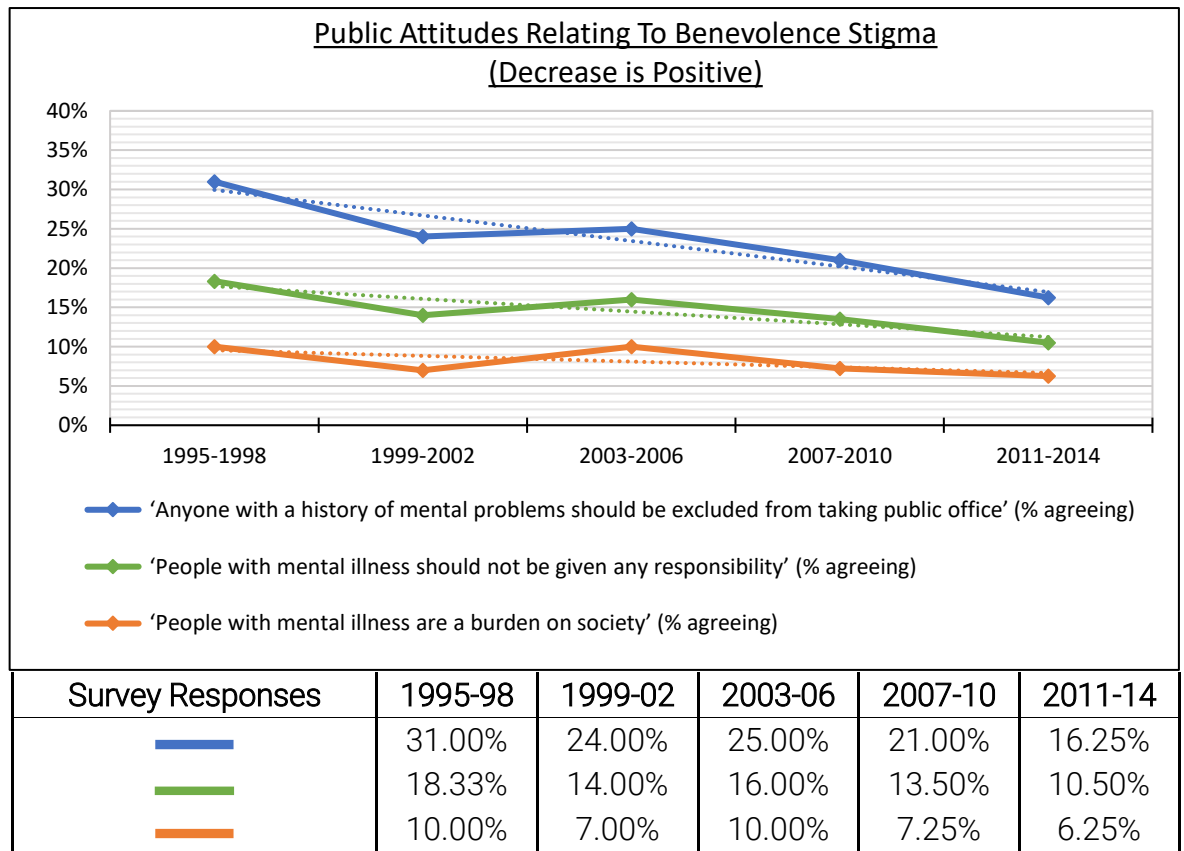
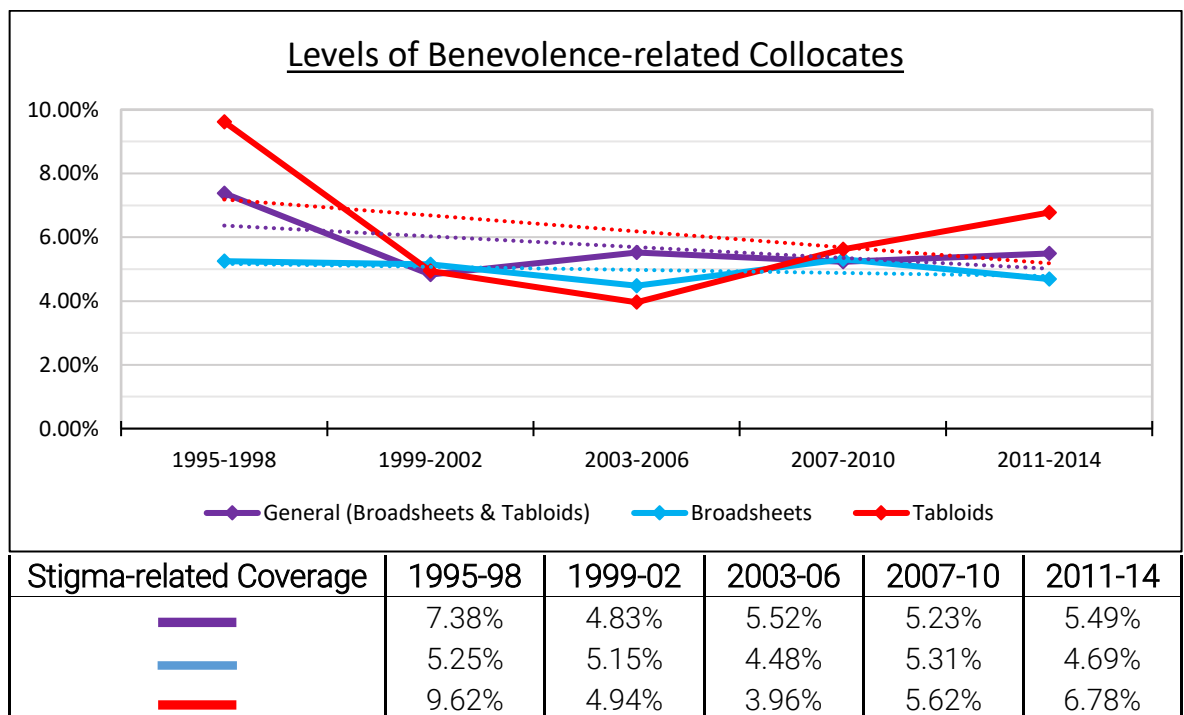
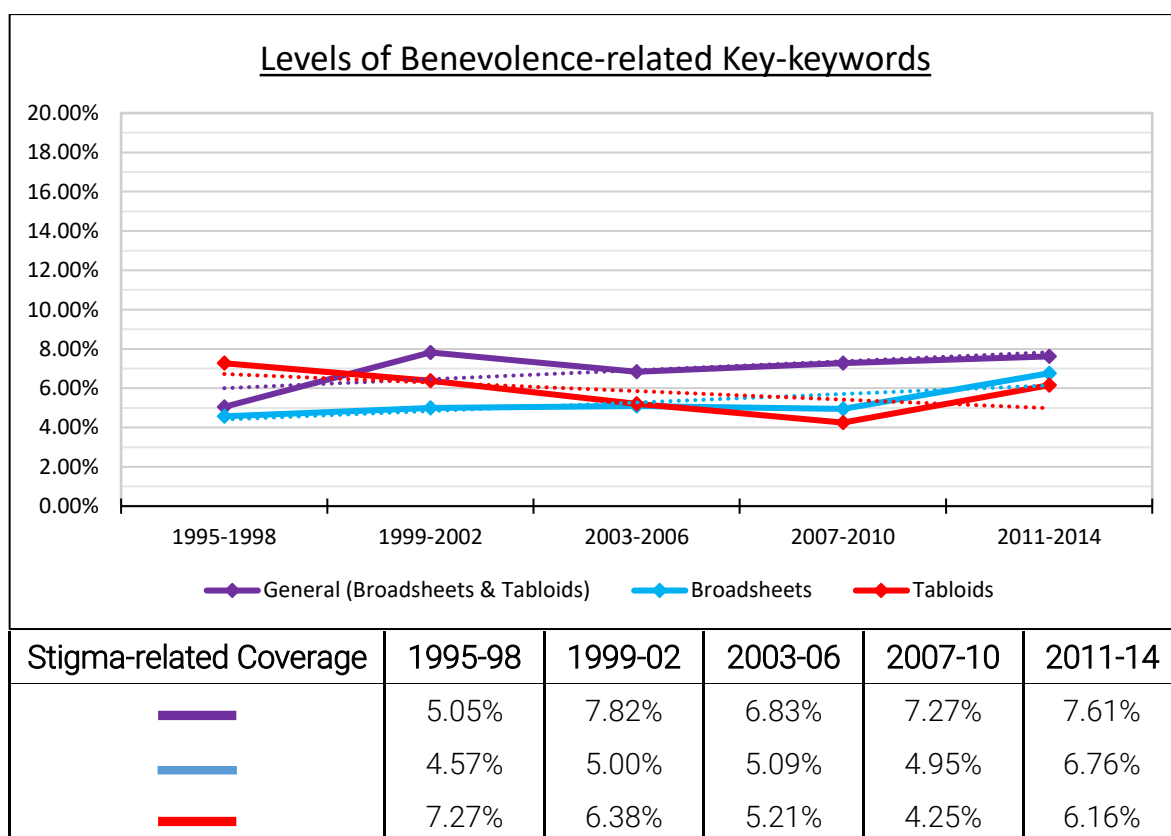


Fig. 4.3.2:



This hypothesis was also supported by a slight increase in benevolence-related key-keywords over the period of the corpus (Fig. 4.3.3). This suggests that press coverage which highlighted the difficulties faced by people with mental illness succeeded in humanising people with mental illness, and increasing public awareness of their problems, thereby increasing sympathetic attitudes. Therefore, discussion of the ‘suffering’ of people with mental illness in press coverage actually seems to have aided reductions in stigmatising attitudes, without reducing people with mental illness to objects of pity.

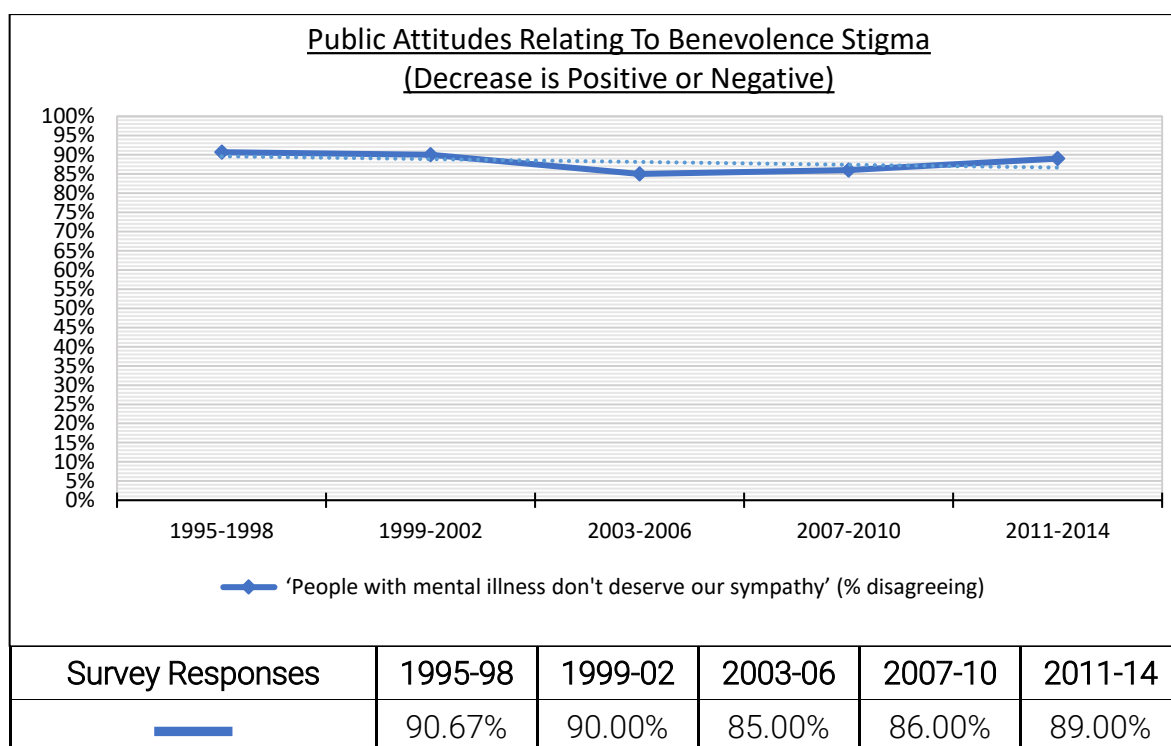
Fig. 4.3.3:



Another question was identified in *AMIS* in which it was unclear whether disagreement was positive or negative (Fig. 4.3.4). Whilst the statement ‘People with mental illness don’t deserve our sympathy’ is ostensibly a negative statement, meaning increased public disagreement would be positive, a decline in the number of people disagreeing with this statement could indicate that the public increasingly felt that people with mental illness are empowered members of society, who do not require sympathy. Disagreement with this statement remained roughly stable throughout the period of corpus coverage, though there was an increase in people agreeing with this statement in 2003-2006; a similar increase in 2003-2006 was found in benevolence-related responses to the questions in Fig. 4.3.1. This correlated with an increase in drug-related key-keywords found in the same period of corpus

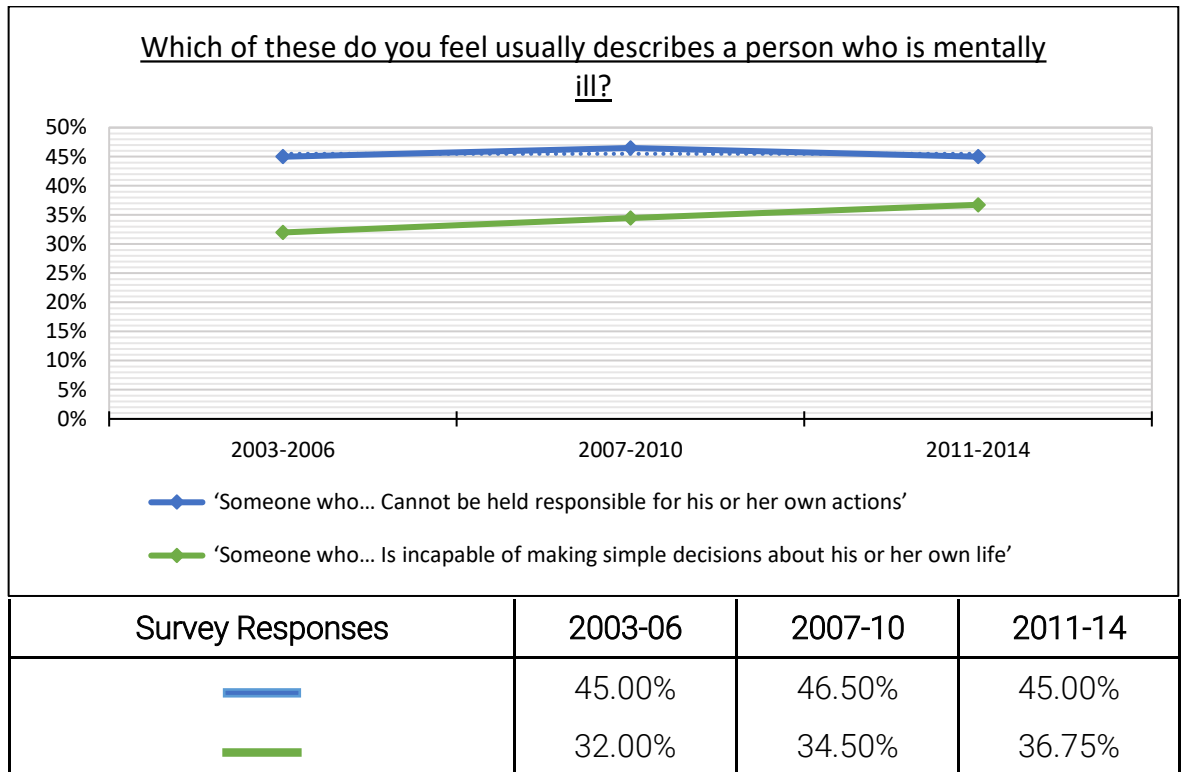
analysis, due to debate around the reclassification of cannabis in 2004 and this drug’s potential to cause mental illness. As discussed in Section 3.3.2, discussion of drugs as a cause of mental illness could increase benevolence stigma by increasing perceptions of people with mental illness as being responsible for their illness. The negative attitude changes found in 2003-2006 support this hypothesis, with supportive attitudes decreasing amongst the public and agreement with statements undermining the agency of people with mental illness increasing.

Fig. 4.3.4:



Two further questions in *AMIS* were identified as being related to benevolence stigma (Fig. 4.3.5), though these only ran from 2003-2014. The percentage of people indicating that ‘Someone who ... Cannot be held responsible for his or her own actions’ usually described someone with mental illness remained roughly the same between 2003-2014, but there was an increase in people agreeing that ‘Someone who ... Is incapable of making simple decisions about his or her own life’ was a usual description, which contradicted decreases in responses to other benevolence-related questions in *AMIS*. However, as discussed in Section 4.1, this may have resulted from the wording of the survey question, with people increasingly agreeing that people with mental illness are usually described in this way, due to their awareness of benevolence stigma, rather than because they would personally use such a description.

Fig. 4.3.5:



#### **4.4. Attitudes Relating to Severity Stigma**

Five survey questions in *AMIS* were identified as relating to severity stigma, with two survey questions that related to severity also relating to benevolence stigma. Four survey questions were identified in which a decrease in agreement would represent a positive change (Fig. 4.4.1). As can be seen from this figure, public attitudes relating to severity stigma continually improved throughout the period of corpus coverage, with the percentage of the public agreeing with statements that presented mental illness as severe, enduring, or recurrent decreasing from 1995-2014. As with benevolence stigma, this decline in severity-related attitudes correlated with a decline in severity-related collocates (Fig. 4.4.2). This was particularly apparent in tabloids, where severity-related collocates declined by over 8% between 1995 and 2014. There was a noticeable increase in severity-related terms in 1999-2002 in broadsheets and general collocates, which likely resulted from discussion of Mental Health Act reforms relating to DSPD, as discussed in Section 3.2.2. Interestingly, this did not correspond with an increase in severity-related attitudes in 1999-2002, suggesting that such coverage did not have a large impact on public perception of the severity of mental illnesses.

Fig. 4.4.1:

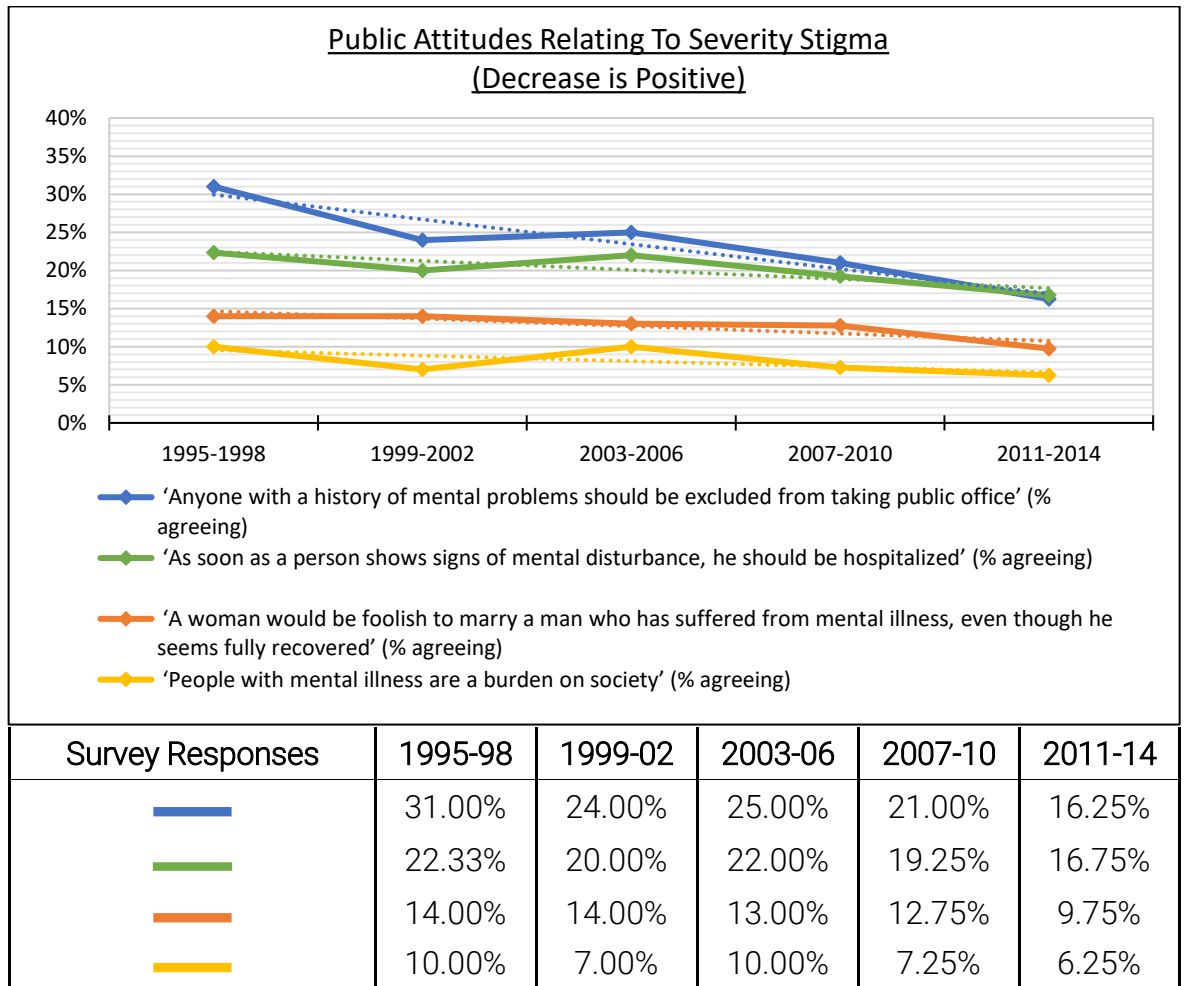
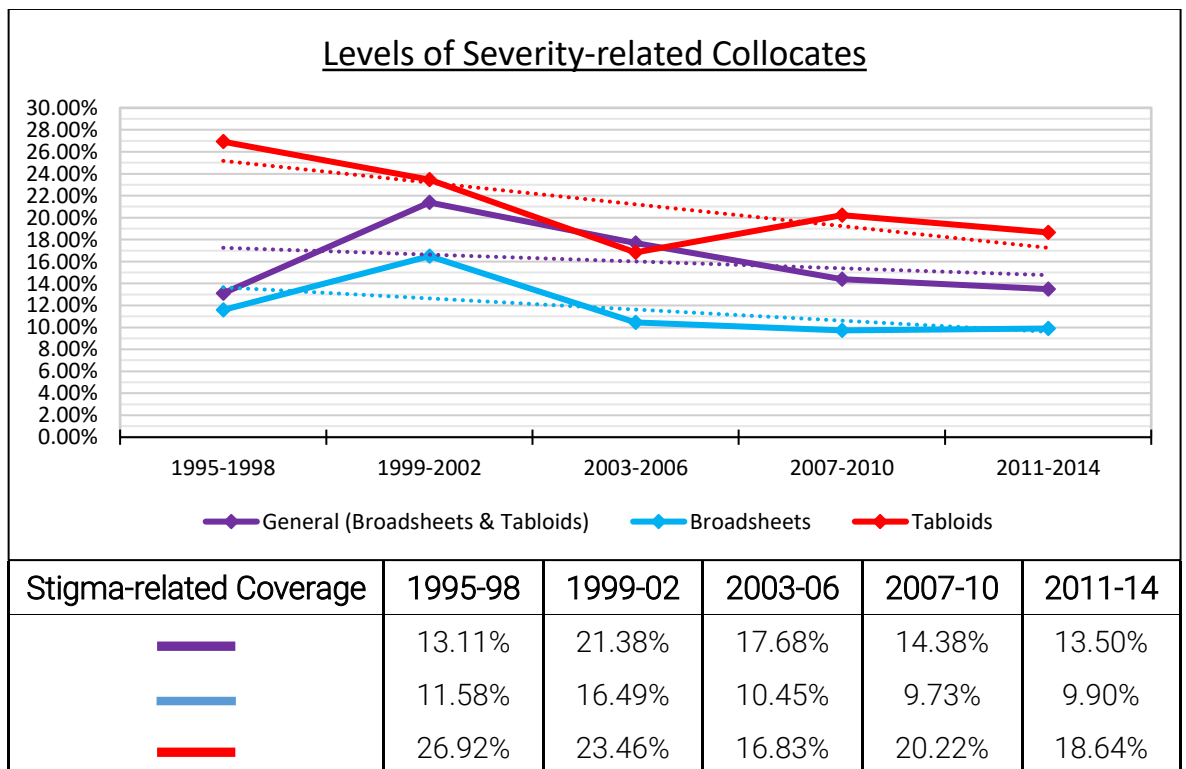
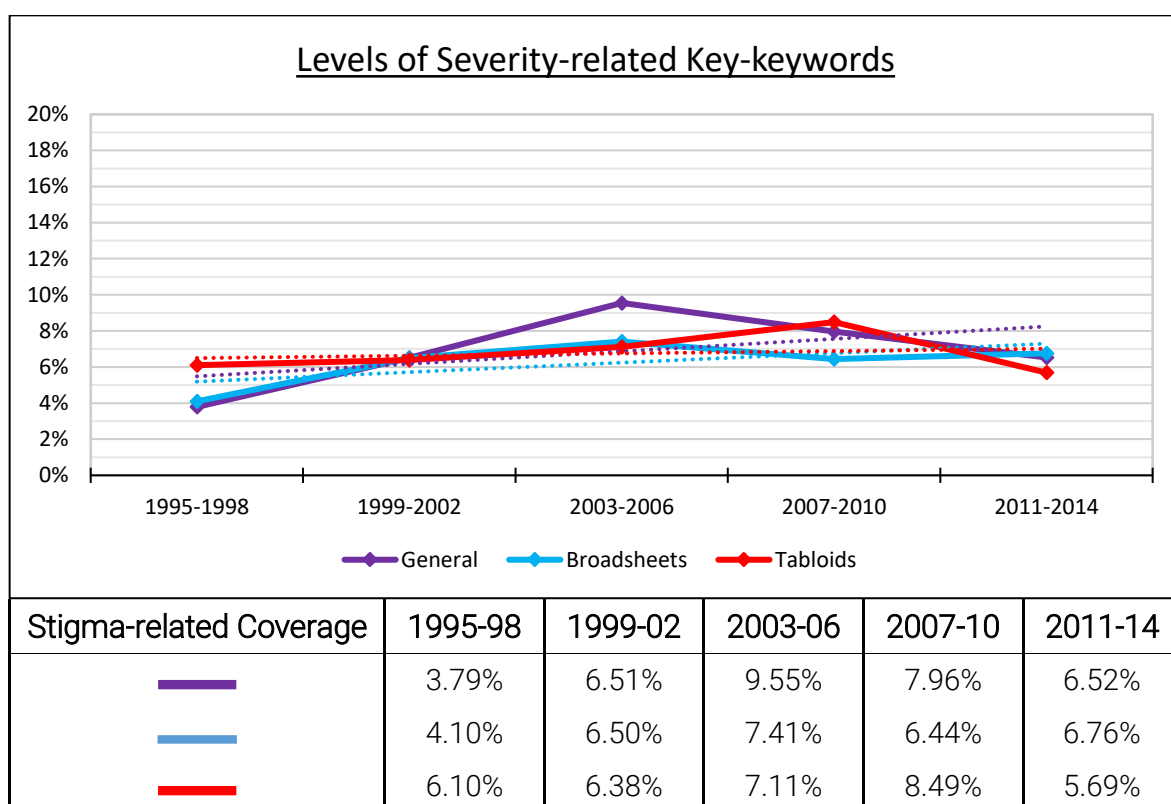


Fig. 4.4.2:



Again, as with benevolence stigma, changes in public attitudes seemed to run counter to changes in severity-related key-keywords, which increased between 1995-2014 (Fig. 4.4.3). As with benevolence stigma, this suggests that press coverage highlighting the seriousness of mental health problems, and the challenges faced by individuals living with them, successfully improved awareness of mental illness, and possibly legitimised these disorders to the public, thereby increasing sympathetic attitudes. Discussion of the severity of mental illness in press coverage therefore seems to have aided reductions in stigmatising attitudes, without presenting these disorders as incurable or unmanageable.

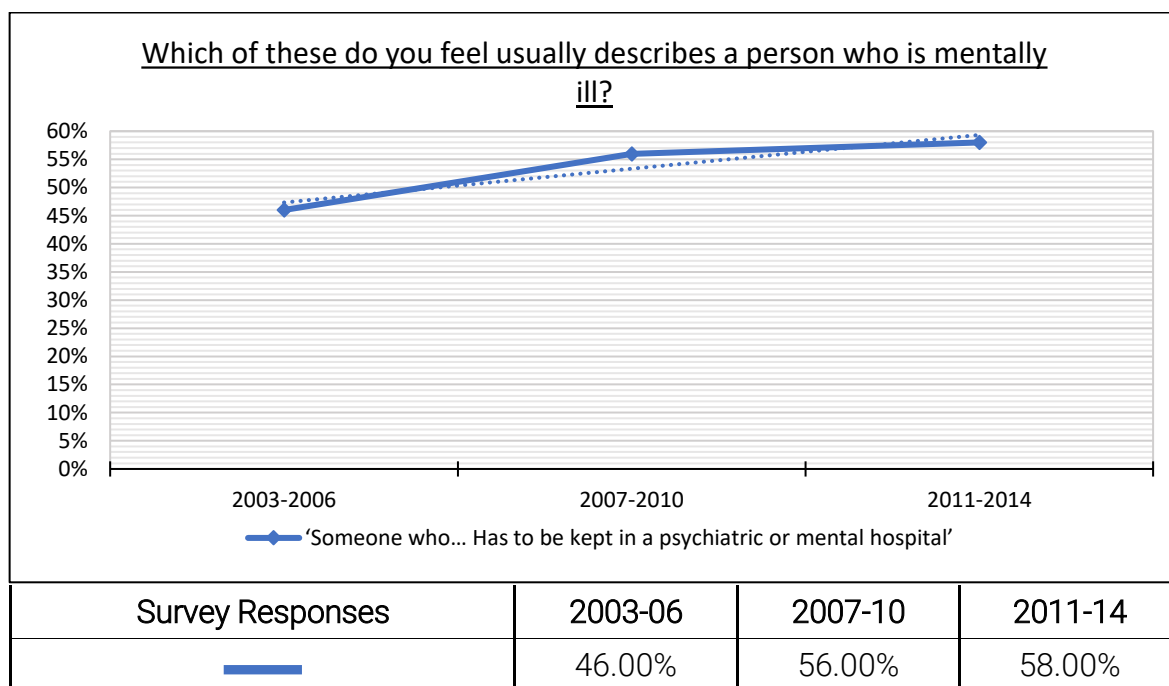
Fig. 4.4.3:



Finally, one severity-related question asked respondents to indicate which statements usually described a person who is mentally ill. As with other questions in this format, responses were only available from 2003-2014, but they showed increases in the number of people agreeing that ‘Someone who ... Has to be kept in a psychiatric or mental hospital’ usually described a person who is mentally ill (Fig. 4.4.4). Problems with the wording of this question have already been discussed, in sections 4.1 and 4.3, with increased support for this statement possibly being a consequence of increased public awareness of stigmatising representations of mental illness, rather than increased agreement with the description. Increased agreement with the statement shown in Fig. 4.4.4 also runs counter to the shift in UK governmental policy towards de-institutionalised, community-based models of mental

health care, which has progressed throughout the last 25 years (Gilburt & Peck, 2014). This lends further credence to the idea that increased agreement in Fig. 4.4.4 was actually due to increased *awareness* of severity stigma amongst the public, rather than increases in the stigma itself.

Fig. 4.4.4:

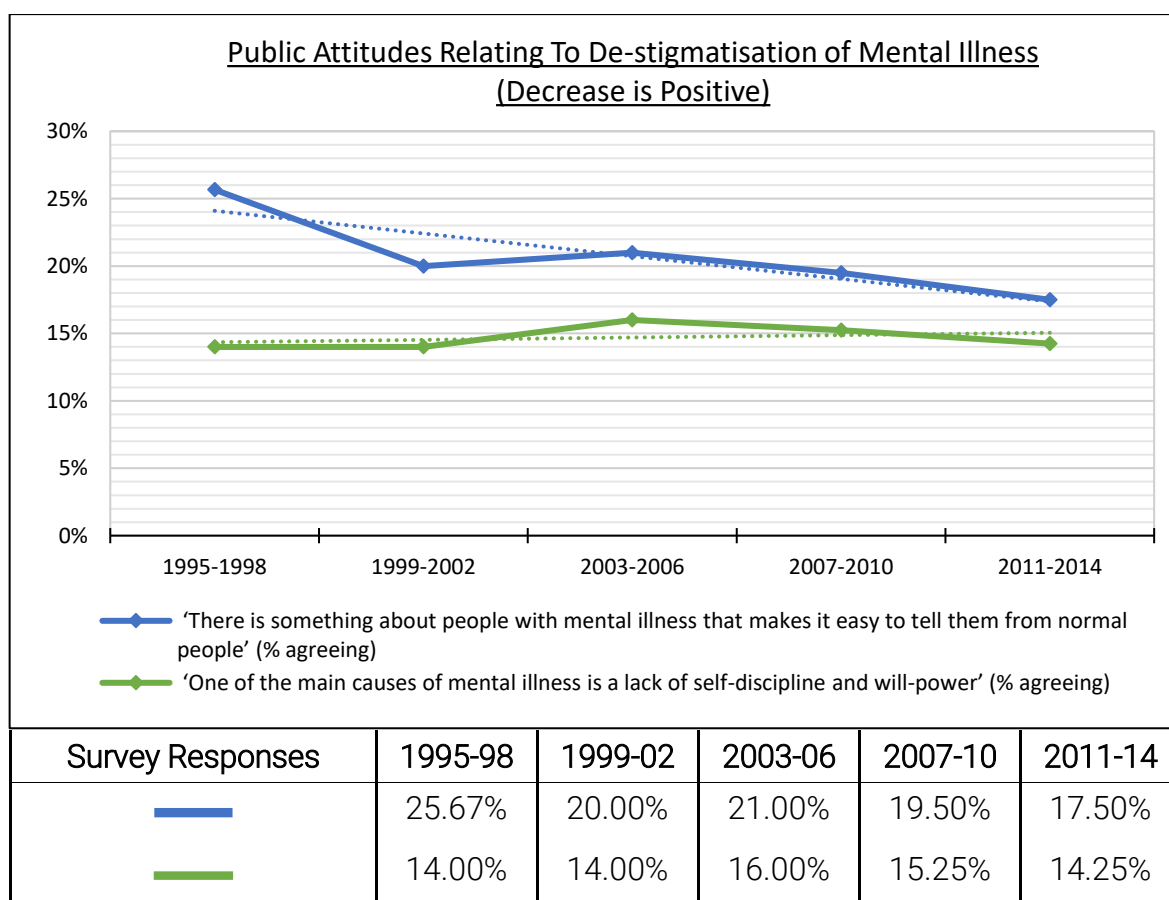


#### 4.5. Attitudes Relating to De-stigmatisation of Mental Illness

Seven questions were identified in *AMIS* which related to the de-stigmatisation of mental illness. Additional questions relating to stigma awareness were also added to *AMIS* in 2009; however, as these questions only provided responses for two of the five periods of corpus coverage, they were deemed unsuitable for the current comparison. Of the seven comparable questions, two were identified in which a decrease would represent a positive change, with the public perceiving people with mental illness in a less stigmatised fashion (Fig. 4.5.1). Agreement with the statement ‘There is something about people with mental illness that makes it easy to tell them from normal people’ decreased throughout the period of corpus coverage, demonstrating that people with mental illness were less commonly viewed as a stigmatised ‘other’ by the public. This corresponded with increased variety in the illnesses covered by the press, decreasing the idea of there being a set of specific features which distinguish people with mental illness from ‘normal’ people. Agreement with ‘One of the

main causes of mental illness is a lack of self-discipline and will-power' remained relatively stable throughout corpus coverage, other than an increase in 2003-2006 and, to a lesser extent, 2007-2010; this correlated with increased coverage of drugs, relating to the reclassification of cannabis discussed in Sections 3.3.2 and 3.4.2. This correlation suggests public attitudes were negatively affected by press coverage discussing the potential for recreational drug use to cause mental illness, with such coverage establishing the idea that people with mental illness are responsible for causing their own problems.

Fig. 4.5.1:

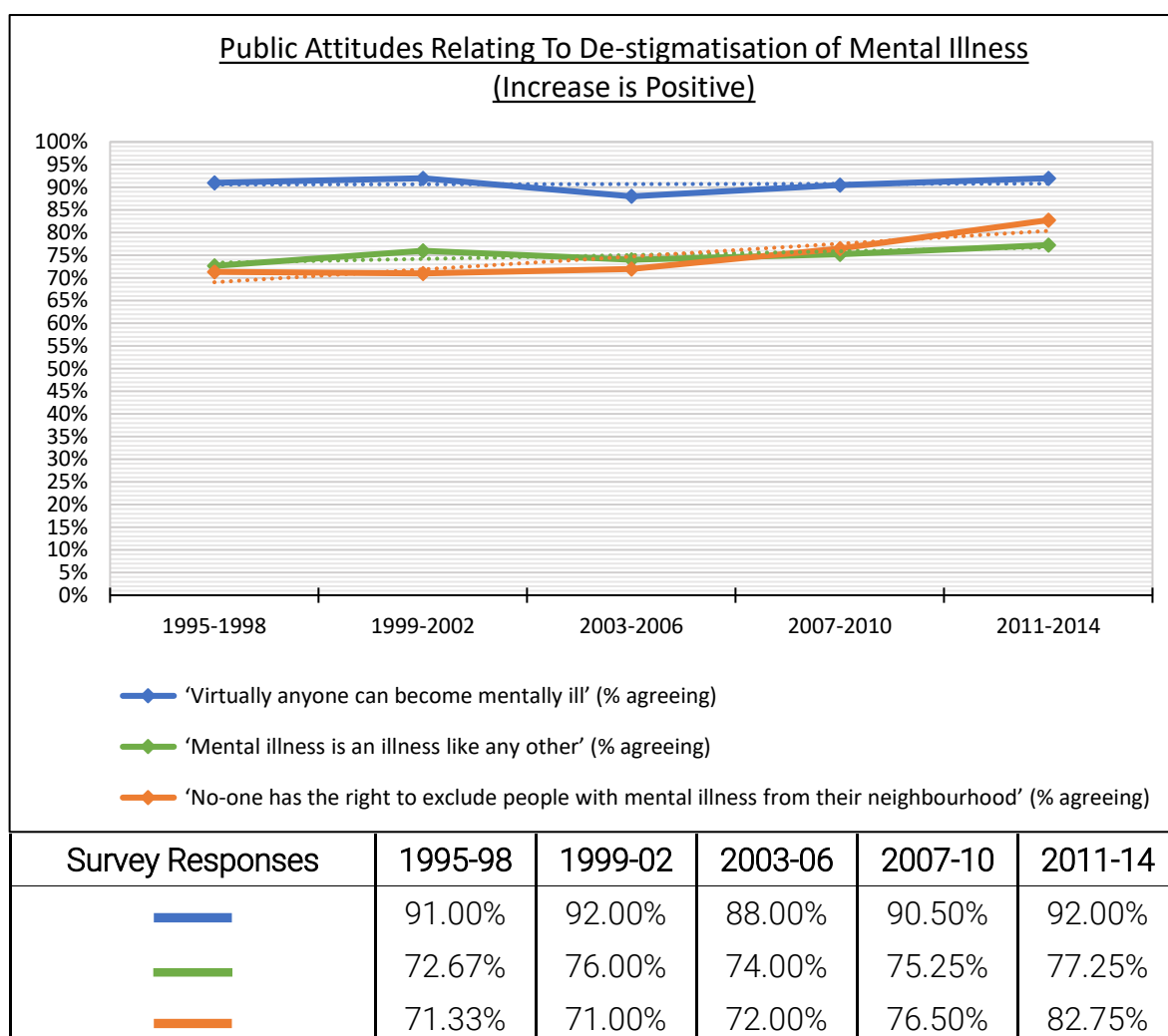


Three questions were identified in which an increase in agreement constituted a positive change in public opinion (Fig. 4.5.2). Agreement with all of these statements increased over the period of corpus coverage, with the public progressively viewing mental illness as similar to other types of illness, and increasingly disapproving of discriminatory treatment against mental illness. In 2003-2006, there was a noticeable dip in agreement with the statement 'Virtually anyone can become mentally ill', which continued to a lesser degree in 2007-2010; there was also a slight decrease in agreement with the term 'Mental illness is an illness like any other' in the same period. This provides further evidence that public



perception of mental illness was affected by coverage of drugs as a cause of mental illness, which featured strongly in 2003-2006 press coverage.

Fig. 4.5.2:



Correlating with improvements in de-stigmatising attitudes, there was a continuous increase between 1995-2014 in key-keywords and collocates relating to mental health de-stigmatisation (Fig. 4.5.3 & Fig. 4.5.4). These results suggest that increased press coverage promoting the de-stigmatisation of mental illness, and educating the public on stigma-related issues, successfully increased awareness of mental health stigma, leading to more sympathetic and equitable attitudes towards mental health conditions. Coverage of mental health stigmas and de-stigmatisation efforts were always more common in broadsheets than tabloids, but tabloid coverage of these issues progressively increased, leading to greater parity in de-stigmatisation-related coverage between newspaper types by 2014.

Fig. 4.5.3:

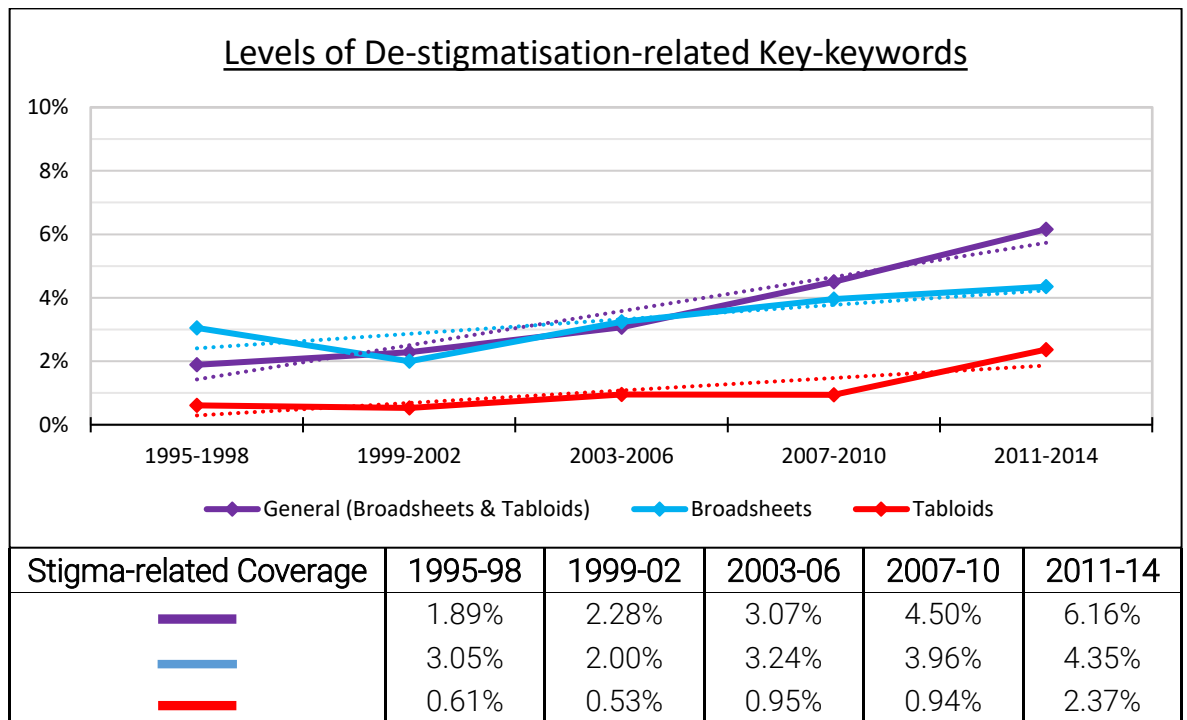
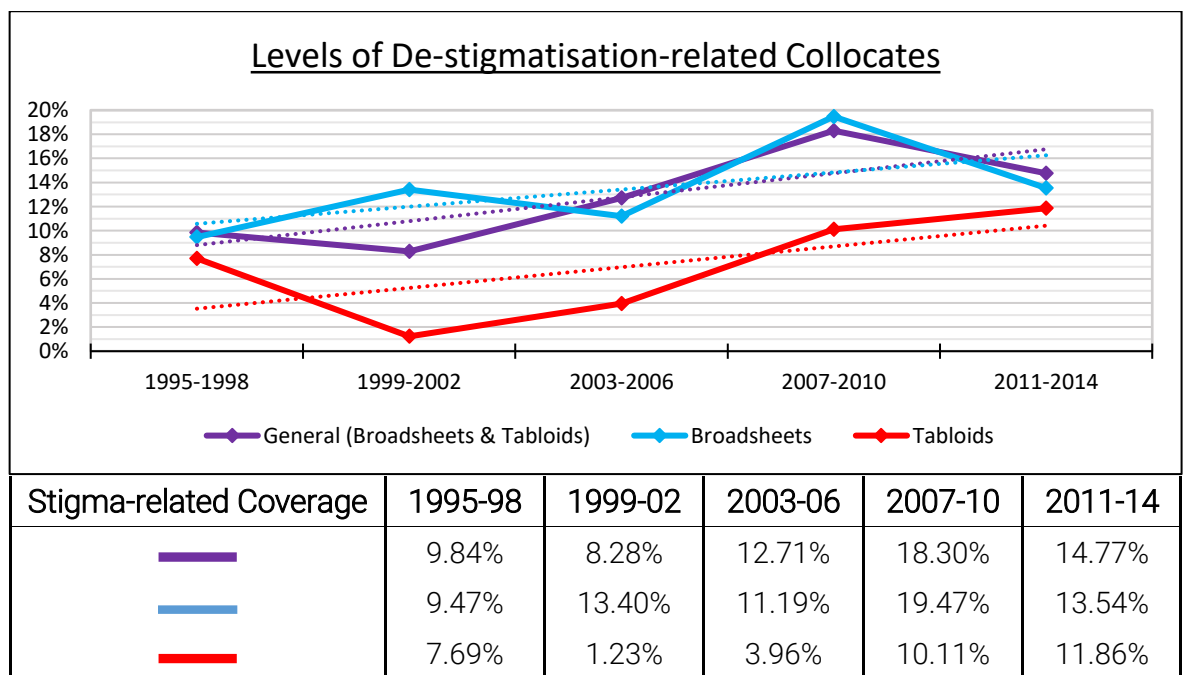


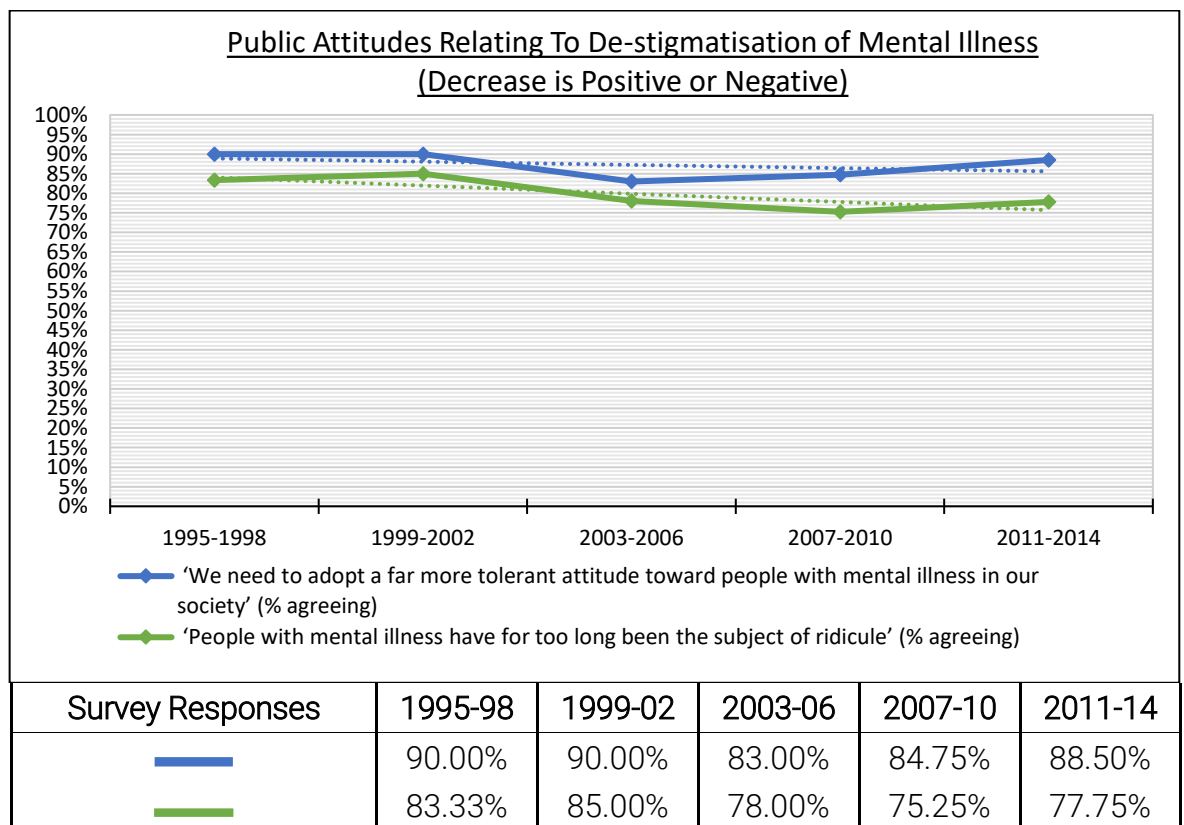
Fig. 4.5.4:



There were two further de-stigmatisation-related questions in *AMIS* in which it was unclear whether decreased agreement represented a positive or negative change (Fig. 4.5.5). Agreement with both of these questions declined, which, at surface level, seemed to represent decreases in sympathetic attitudes amongst the public. However, whilst ‘We need to adopt a far more tolerant attitude toward people with mental illness in our society’ and ‘People with mental illness have for too long been the subject of ridicule’ seemed to be

positive sentiments initially, responses to both of these statements were dependent on respondent interpretation of the views of wider society. The percentage of people agreeing that we need to adopt a *more* tolerant attitude towards people of mental illness was dependent on respondents' conception of what society's tolerance was. Thus, agreement with this statement may have decreased over time because respondents considered society to have already adopted a more tolerant attitude, rather than because fewer people agreed that society should be tolerant towards people with mental illness. Equally, comedic, or insulting representations of people with mental illness are less acceptable in modern society, and therefore declining agreement with the statement 'People with mental illness have been for too long the subject of ridicule' may simply reflect the fact that such representations have become less frequent, with the public decreasingly recognising people with mental illness as being a 'subject of ridicule' in the first place. Consequently, it could not be determined whether changes in responses to these two questions were indicative of positive change, correlating with press coverage and other survey responses, or whether they contradicted these other findings. This highlights the complexity of interpreting survey responses as measures of stigmatising attitudes, with the underlying reasons for responses often being ambiguous or multifaceted, and the wording of survey questions often leaving significant room for interpretation.

Fig. 4.5.5:



## **5. Discussion**

## 5.1. Key Findings

This corpus linguistic study revealed several changes in UK press coverage of mental health between 1995-2014, which were generally consistent with previous studies into UK press discourse on mental health (e.g. Thornicroft, et al, 2013; Rhydderch, et al., 2016). The four main stigmas identified in the literature review – namely, danger, criminality, benevolence, and severity – were all found to be present at varying levels throughout the corpus (Figs. 5.1.1 & 5.1.2), but improvements in press coverage were also found to have been made. There was a clear decline in coverage in the corpus relating to danger stigma, which correlated with similar decreases in negative public attitudes relating to perceptions of people with mental illness as dangerous. Coverage relating to de-stigmatising mental illness was also found to have increased significantly over the period covered by the corpus, showing greater attempts by the press to combat mental health stigma, and raise public awareness of this issue. This correlated with increases in sympathetic attitudes amongst the public and decreases in discriminatory perspectives, suggesting that attempts to educate the public on mental health stigma have been fairly successful.

Whilst criminality-related coverage was found to have reduced in the middle periods of corpus coverage, these changes were reversed by 2014, with criminality coverage returning to initial levels. This demonstrates that criminal cases have continually formed a significant presence in UK press coverage of mental illness; this was further evidenced by the abundance of criminal cases found in annual keyword analysis, which was a persistent feature throughout corpus coverage. Whilst this may have resulted from these stories being deemed more ‘newsworthy’, such coverage does nothing to aid attempts to dispel the association between people with mental illness and criminality. Severity and benevolence stigma were found to have increased between 1995-2014 in keyword analysis, demonstrating that people with mental illness were increasingly portrayed in ways which could be disempowering, and could reinforce the idea that mental illnesses are consistently severe conditions. Severity-related terms were also shown by collocate analysis to be consistently associated with the term ‘mental illness’; this frequent co-occurrence is likely to provide an implicit connection between mental illness and severity or longevity. However, increases in severity and benevolence-related coverage were discovered to often be a by-product of increased attempts by the press to depict the difficulties faced by people with mental illness, and were therefore not automatically negative changes. Public attitudes relating to benevolence and severity stigma improved over the period of the corpus, indicating that increases in related terms in press coverage successfully increased public awareness of the

difficulties faced by people with such conditions, without further stigmatising people with mental illness.

Fig. 5.1.1:

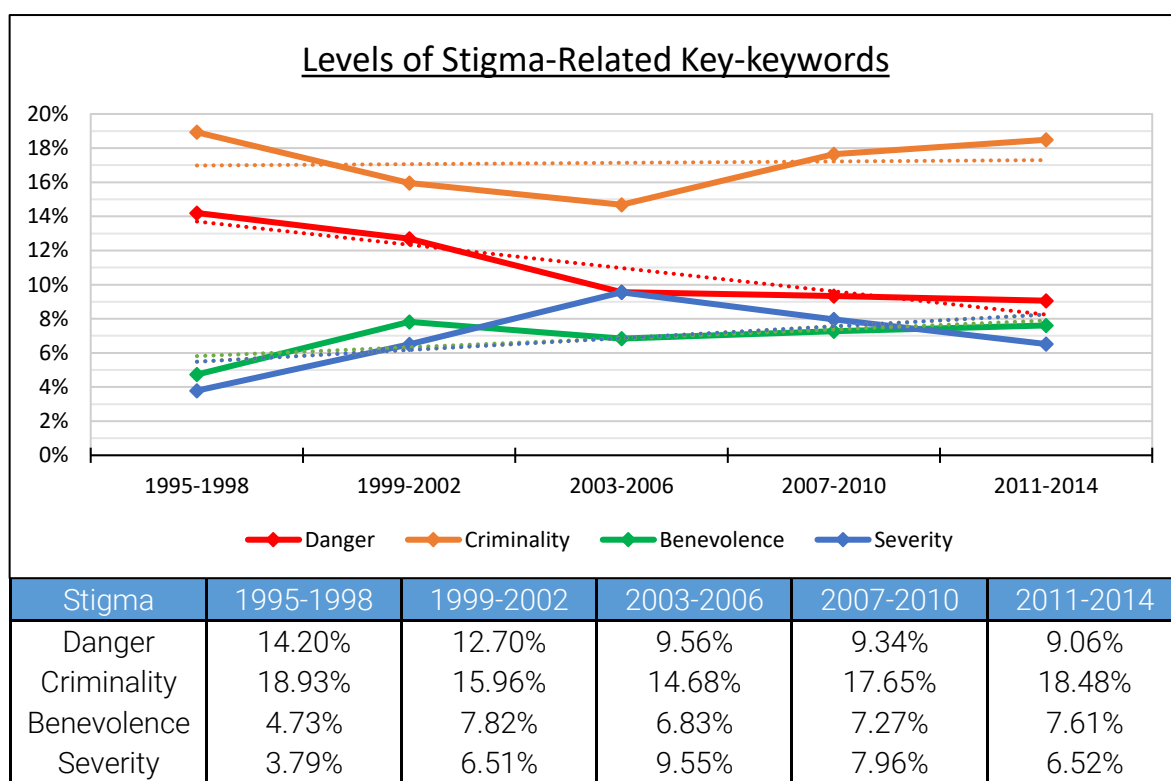
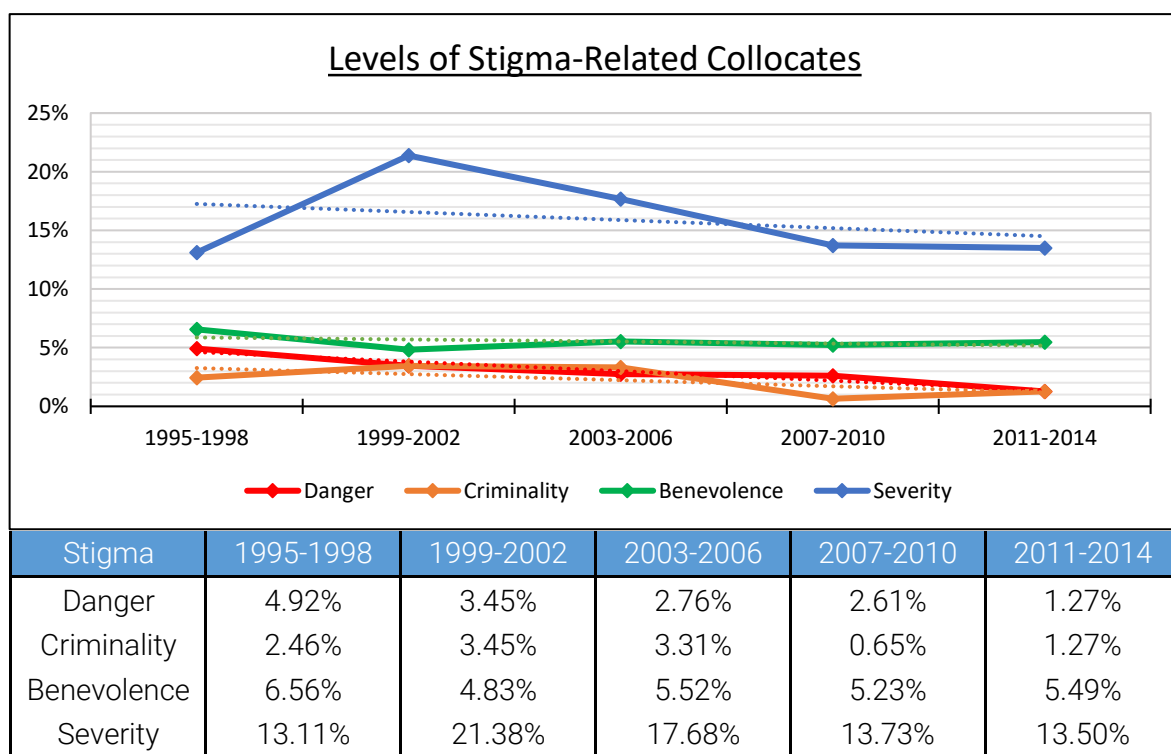


Fig. 5.1.2:



## 5.2. Strengths and Limitations

This study demonstrates the usefulness of corpus linguistics as a tool for large-scale, diachronic analysis of press coverage. By using corpus linguistic analysis, I was able to analyse press discourse on a bigger scale, and over a longer period, than previous investigations into press coverage have been able to achieve; this enabled the validity of changes uncovered in other studies to be tested on a larger, more comprehensive dataset. By combining keyword and collocate analysis, I was also able to evaluate changes in press coverage at multiple levels: large-scale changes in the language of the UK press on mental illness were uncovered by keyword analysis, whilst collocate analysis revealed how use of the specific term ‘mental illness’ changed in press discourse over time. Using both annual and periodic groupings for keyword analysis meant that I could identify significant individual events and short-term changes in the history of UK press discourse on mental health as well, without sustained changes in more traditional elements of the discourse being obscured. This also meant that I could compare press coverage with long-term changes in public attitudes, which was previously identified as an under-researched area (Klin & Lemish, 2008; Goulden, et al., 2011). By comparing long-term, diachronic analysis of press coverage with public attitudes over the same period, this study helps to fill this gap in the existing literature, and contributes to developing approaches for further studies of this nature.

However, the current study also had several limitations. Though the corpus was constructed to be as balanced as possible, difficulties in sourcing articles for the full period (1995-2014) meant that the newspapers included in the corpus were not ideal, especially in the tabloid sub-corpus. In particular, *The Sun* has the largest readership of any British newspaper and including this newspaper in the corpus would have therefore made the dataset more representative of mainstream UK press. However, articles from *The Sun* were only consistently available from 31<sup>st</sup> December 1999 in the Nexis archive, meaning it was not appropriate to include this newspaper in this study. Nonetheless, including articles from an even wider range of newspapers would have ensured that the corpus was more fully reflective of the diversity of newspapers available in the UK. Additionally, using effect size to rank keyword results was also slightly problematic, since it tended to promote unorthodox and infrequent words, such as proper nouns, to the top keyword rankings, because of their absence in the reference corpus. Whilst these terms were still statistically significant keywords, as they were above the Log-Likelihood threshold, these terms often had very low frequencies, meaning their influence may have been more limited than effect size scores would suggest. Setting a minimum frequency for keywords, or increasing the L-L threshold

used, are possible solutions to this problem, but these could also result in high effect size terms being excluded from analysis. Fine-tuning the balance between strength and reliability in keyword analysis is certainly an area for further experimentation in future research. Using an alternative reference corpus might also have improved the reliability of keyword findings: the *BNC* is representative of a slightly earlier period of English (mainly containing texts from 1985-1993 (Burnard, 2007)) than the texts in this study, which meant terms relating to modern phenomena, such as the internet, were over-valued in keyword analysis. This was not a major issue, since these terms were fairly infrequent, but the artificial inflation of modern terms' rankings resulted in some other terms appearing slightly lower in keyword rankings than they would have with a more modern reference corpus.

Further, whilst *AMIS* was deemed to be the best available source of public attitudes for this study's comparison, problems with the nature of *AMIS* questions also meant comparisons between public attitudes and press coverage were not as comprehensive as I would have liked. Since they were not worded to investigate stigma directly, it was often difficult to determine whether questions in the survey related to stigmas or not, and this relied on significant interpretation of my own. In addition, *AMIS* was also carried out using face-to-face interviewing – this is more likely to increase the influence of social desirability bias on survey responses, whereby respondents provide answers which they feel are more socially desirable, rather than their own true feelings, than if responses to a survey are 'self-administered', without an interviewer present (Krumpal, 2013). However, conducting a self-administered survey with tailor-made questions for the stigmas being investigated was not an option, since responses from earlier periods would be impossible to attain. It was also impossible to determine the reasons for peoples' responses to each question, with changes in respondents' attitudes also being influenced by factors other than press coverage. Equally, the level to which individual articles affected public opinion was beyond the scope of this study – a reader could be profoundly impacted by one article portraying people with mental illness as dangerous, with ten articles to the contrary failing to affect their opinion. Nevertheless, the influence of press coverage on public attitudes has been well-established by other studies, and the likelihood that changes in attitudes occurred independently of changes in press coverage was very low, meaning that comparisons could still be drawn between corpus data and *AMIS* responses.

Identifying criminality-related survey questions and distinguishing them from danger-related questions was also challenging. This was because questions relating to risk or fear could be influenced by either fear of crime or fear of danger from people with mental illness. Crimes covered in mental health coverage were also generally violent crimes, leading



to further difficulty in disentangling these two stigmas. This provides some evidence that these two stigmas should not be categorised distinctly in future research, and grouping them together might prove useful in future studies of mental health coverage. However, the differences in levels of danger and criminality key-keywords over time indicates that these two stigma categories do have distinguishing features, even if these did not manifest themselves in public attitudes.

### **5.3. Future Research**

This research has revealed several possible avenues for future research. Whilst the media has been shown to influence public perceptions, the converse is also true, with audience perceptions shaping how the press covers certain topics (Gabrielatos & Baker, 2008: 9; McCluskey, et al., 2016). Numerous studies in mental health discourse have investigated press influence on public opinion, and the strength of this relationship is evident, but the bi-directionality of this relationship is less well-explored; a corpus linguistic methodology could allow for changes in press coverage following changes in public attitudes to be assessed across a range of media. Attitude changes and changes in press coverage were also shown in this study to correlate more closely in some stigmas of mental illness than others; this could indicate that the press has a greater influence on public opinion in certain areas of mental health coverage than others. This may be the result of unique discourse features used by the press in coverage relating to specific stigmas, which could be explored by comparing corpora composed of articles relating to different stigmas – e.g. comparing a corpus of danger-related mental health articles with a corpus of severity-related mental health articles. Comparing changes in mental health coverage in the press with changes in mental health coverage in other forms of discourse, such as journal articles or social media, is another obvious possibility for further research. This would allow for press discourse to be assessed in relation to other discourses, providing a barometer of how significant the changes in UK press coverage of mental health are relative to other media. A cross-cultural comparison might also yield interesting results, with corpus analysis results and public attitudes from one country being compared with those of another country, to assess regional differences in press influence.

The disparity between keyword and collocate results in this study also warrants further examination. The lack of collocates relating to danger or criminality stigma for the term ‘mental illness’, when related terms were abundant in key-keywords, suggests that

coverage relating to these stigmas may be tied to specific disorders, rather than general ‘mental illness’. Further corpus-based analyses of individual illness discourses could therefore prove illuminating, allowing for stigmas associated with specific conditions to be identified. Furthermore, the prevalence of high-profile criminal cases in mental health coverage is an obviously concerning aspect of newspaper coverage for de-stigmatisation efforts; these stories remain prominent, and improvements in public attitudes in this area seem to have occurred in spite of, rather than because of, press coverage. However, whether press coverage disproportionately presents criminal cases in their coverage of mental health, compared with their coverage of other topics, is another matter. A study comparing different types of illnesses, including physical disorders, could determine the level to which criminal stories feature in press coverage of all types of illness, allowing the prevalence of crime-related coverage in mental health articles to be assessed against discourses of a similar nature.

#### **5.4. Conclusion**

This study identified several positive longitudinal trends in UK press coverage of mental health. Coverage relating to danger stigma was found to have decreased throughout the period, correlating with a similar decline in public attitudes relating to danger stigma. Discussion of the stigmatisation of mental illness, and de-stigmatisation efforts, also increased, correlating with an increase in public awareness of mental health stigma. Increases in coverage relating to benevolence and severity stigma were also found, generally reflecting increased attempts by the press to portray the difficulties of living with mental illness; positively, these correlated with increasingly sympathetic public attitudes, suggesting coverage successfully relayed the negative experiences of mental disorders without further stigmatising these conditions.

However, problematic representations of mental illness were still apparent in UK press coverage. The sustained association between mental illness and criminality, particularly the persistent prevalence of individual cases of violent crime in mental health discourse, continues to stigmatise people with mental illness. Similarly, whilst danger stigma decreased, it remained a significant feature of press coverage in latter periods. Increases in benevolence and severity stigma might also still translate into pitying and authoritarian attitudes towards people with mental illness, even if these did not manifest themselves in *AMIS*. This stresses the need for additional longitudinal studies investigating the precise

impact of press discourse on mental health on public attitudes. Differences between the language found in general coverage and the language used in the immediate context of 'mental illness' also emphasise the need for more nuanced investigations into specific terms, and specific illnesses, in mental health discourse, to improve our understanding of individual mental health stigmas and facilitate their reduction. This study has demonstrated that, whilst UK press discourse on mental health has generally improved, with public attitudes improving alongside it, established stigmas of mental illness remain present in British press coverage, highlighting the necessity of further de-stigmatisation efforts.

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## Appendix A:

### Regular Expressions for Metadata Removal

<b>FIND (Regular Expression):</b>	<b>REPLACE WITH:</b>
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\s\sFirst Edition\r\n	<First Edition>\r\n
\s\sSecond Edition\r\n	<Second Edition>\r\n
\s\sThird Edition\r\n	<Third Edition>\r\n
\s\sFourth Edition\r\n	<Fourth Edition>\r\n
\s\sEdition 1;\r\n	<Edition 1;>\r\n
\s\sEdition 2;\r\n	<Edition 2;>\r\n
\s\sEdition 3;\r\n	<Edition 3;>\r\n
\s\sA Edition\r\n	<A Edition>\r\n
\s\sB Edition\r\n	<B Edition>\r\n
\s\sC Edition\r\n	<C Edition>\r\n
\s\s1 Star Edition\r\n	<1 Star Edition>\r\n
\s\s2 Star Edition\r\n	<2 Star Edition>\r\n
\s\s3 Star Edition\r\n	<3 Star Edition>\r\n
\s\sDAILY MAIL \ (London)\r\n	<DAILY MAIL \ (London)\>\r\n
\s\s <i>The Daily Mail</i> \ (London)\r\n	< <i>The Daily Mail</i> \ (London)\>\r\n
\s\s <i>The Daily Mail</i> \r\n	< <i>The Daily Mail</i> >\r\n
\s\sMAIL ON SUNDAY \ (LONDON)\r\n	<MAIL ON SUNDAY \ (LONDON)\>\r\n
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\s\sMAIL ON SUNDAY\r\n	<MAIL ON SUNDAY>\r\n
\s\sEvening Standard \ (London)\r\n	<Evening Standard \ (London)\>\r\n
\s\s <i>The Evening Standard</i> \ (London)\r\n	< <i>The Evening Standard</i> \ (London)\>\r\n
\s\s <i>The Guardian</i> \r\n	< <i>The Guardian</i> >\r\n
\s\s <i>The Guardian</i> \ (London)\r\n	< <i>The Guardian</i> \ (London)\>\r\n
\s\s <i>The Guardian</i> - Final Edition\r\n	< <i>The Guardian</i> - Final Edition>\r\n
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\s\sGuardian.com\r\n	<Guardian.com>\r\n
\s\s <i>The Independent</i> \ (London)\r\n	< <i>The Independent</i> \ (London)\>\r\n
\s\sIndependent on Sunday \ (London)\r\n	<Independent on Sunday \ (London)\>\r\n
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