

Stigma and Health

... And Is There No New Thing Under the Sun? Retrospective Study on the Presence of Stigmatizing Articles in Two Italian Newspapers During the Period 2006-2021

Giulia Ferrazzi, Francesco Borgazzi, Roberto Ferretti, Mattia Marchi, Gian Maria Galeazzi, and Luca Pingani
Online First Publication, July 29, 2024. <https://dx.doi.org/10.1037/sah0000554>

CITATION

Ferrazzi, G., Borgazzi, F., Ferretti, R., Marchi, M., Galeazzi, G. M., & Pingani, L. (2024). ... And is there no new thing under the sun? Retrospective study on the presence of stigmatizing articles in two Italian newspapers during the period 2006-2021.. *Stigma and Health*. Advance online publication. <https://dx.doi.org/10.1037/sah0000554>

... And Is There No New Thing Under the Sun? Retrospective Study on the Presence of Stigmatizing Articles in Two Italian Newspapers During the Period 2006–2021

Giulia Ferrazzi¹, Francesco Borgazzi¹, Roberto Ferretti¹, Mattia Marchi^{1, 2},
Gian Maria Galeazzi^{1, 2}, and Luca Pingani^{1, 2}

¹ Department of Biomedical, Metabolic and Neural Sciences, University of Modena and Reggio Emilia

² Dipartimento ad Attività Integrata Salute Mentale, Dipendenze Patologiche, Azienda Unità Sanitaria Locale, Istituto di Ricovero e Cura a Carattere Scientifico, Reggio Emilia, Italy

This study explores the representation of mental health in two prominent Italian newspapers, *Corriere della Sera* and *La Repubblica*, spanning from 2006 to 2021. The aim was to quantify articles containing mental health-related terms, assess their focus on mental health issues, detect stigmatizing content, analyze temporal trends, and find possible predictors of stigmatizing articles. The search utilized electronic archives, with evaluators categorizing articles as mental health-related (rMH) or not (nrMH), further classifying rMH as stigmatizing, nonstigmatizing, neutral, or mixed. Out of the 1,988 articles meeting the inclusion criteria (nrMH: 1,511; rMH: 451), the percentage of rMH articles varies from 17.79% in 2006 to 27.16% in 2021, and there is a statistically significant difference in the distribution of articles (rMH/nrMH) over the 6 years considered ($\chi^2 = 16.52$; $df = 5$; $p = .005$). The study highlights variations in stigmatization across the years. In 2009, stigmatizing articles peaked at 19.78%, while none were identified in 2018. Statistical analysis indicates a significant shift in the characterization of rMH articles (stigmatizing/nonstigmatizing/neutral/mixed) over time ($\chi^2 = 65.50$; $df = 15$; $p < .001$), revealing an increasing trend in nonstigmatizing articles. Additionally, logistic regression identifies two potential predictors of stigmatizing articles: the number of words in the title and the type of addressed mental health disorder. Although our study demonstrates an optimistic, but far from consistent, trend in the number of stigmatizing articles over time, it is necessary to continue promoting the correct use of the press in addressing issues related to mental health.

Clinical Impact Statement

Analyzing mental health representation in major Italian newspapers from 2006 to 2021, this study observes a positive shift toward nonstigmatizing articles over time. Peaking at 19.78% in 2009, stigmatizing content diminishes to none in 2018 and reaches 8.43% in 2021. Logistic regression identifies two possible predictors of stigmatizing articles: a reduced title word count and the presence of severe mental illness. While progress is evident, the study emphasizes the ongoing need for vigilant promotion of responsible journalism to combat stigma and ensure accurate mental health portrayals in the media.

Keywords: stigma, newspaper, severe mental illness, discrimination, social stigma

Supplemental materials: <https://doi.org/10.1037/sah0000554.supp>

Luca Pingani  <https://orcid.org/0000-0003-3428-8308>

The authors have no relevant conflicts of interest or financial ties with organizations or entities discussed in this work to declare. This includes (but is not limited to) consultancy, honoraria, stock ownership, or other benefits that could adversely affect the objectivity of the research. Should a conflict of interest arise during the review process or following the publication of this work, the authors commit to providing prompt disclosure and, if necessary, to correct or retract the article. The authors emphasize that the research was conducted ethically and without influence from any conflicts of interest in the design, conduct, or presentation of the results.

Our positionality statement follows: Mindful that the authors' identities can influence their approach to science (Roberts et al., 2020), the authors wish to provide the reader with information about their backgrounds. With respect to gender, when the article was drafted, one author self-identified as a woman and five authors as men. With respect to race, six authors self-identified as white.

Giulia Ferrazzi played an equal role in investigation, methodology, writing—original draft, and writing—review and editing. Francesco Borgazzi played an equal role in investigation, methodology, validation, writing—original draft, and writing—review and editing. Roberto Ferretti played an equal role in data curation, investigation, methodology, validation, writing—original draft, and writing—review and editing. Mattia Marchi played an equal role in data curation, methodology, validation, writing—original draft, and writing—review and editing. Gian Maria Galeazzi played an equal role in conceptualization, methodology, supervision, writing—original draft, and writing—review and editing. Luca Pingani played an equal role in conceptualization, data curation, formal analysis, writing—original draft, and writing—review and editing.

Correspondence concerning this article should be addressed to Luca Pingani, Department of Biomedical, Metabolic and Neural Sciences, University of Modena and Reggio Emilia, Via Amendola 2, Reggio Emilia 42027, Italy. Email: luca.pingani@unimore.it

Erving Goffman has served as a guiding force in shaping the modern conceptualization of stigma. According to the author, the process of stigmatization is characterized by the presence of a socially unwelcome characteristic that discredits the identity of individuals who exhibit it (Goffman, 1963). Stigma implies social disapproval and can unjustly result in discrimination and the exclusion of individuals due to negative social attitudes associated with characteristics that may be perceived as mental, physical, or social deficiency (Corrigan & Watson, 2002; Link & Phelan, 2001; Pescosolido & Martin, 2015).

Mental health-related stigma and discrimination have been widely documented in various contexts, including health care settings, workplaces, and communities. Studies have consistently shown that people using mental health services and their families experience stigma and discrimination across different life domains, including individual, family, work, employment, and education. This stigma can lead to negative stereotypes, prejudice, and discriminatory behaviors, resulting in emotional distress for people using mental health services and their families, difficulty in accessing treatment, and an overall negative impact on daily living (Pingani et al., 2012; Thornicroft, 2008).

Presently, there are eight main types of stigma described in scientific literature (Evans-Lacko et al., 2016; Fox et al., 2018), and all of these can be promoted or supported by the media: Public stigma is the response that the general population has to people with mental health challenges (Corrigan & Watson, 2002); structural stigma refers to rules, laws, or institutions that systematically discriminate or disadvantage people with mental disorders (Corrigan et al., 2005); self-stigma occurs when individuals internalize public attitudes as prejudice and discrimination, resulting in numerous negative consequences (Corrigan & Rao, 2012); felt or perceived stigma occurs when individuals believe that people around them would judge them negatively for having a certain characteristic (Evans-Lacko et al., 2016); label avoidance happens when people avoid seeking out or participating in mental health care to prevent the impact of a stigmatizing label (Clement et al., 2015); experienced stigma is the actual experience of discrimination and/or participation on the part of the person affected (Van Brakel, 2006); courtesy stigma, also known as stigma by association, refers to the stigmatization experienced by individuals who are associated with a stigmatized person or group (Wahl & Harman, 1989); and spiritual stigma, characterized by beliefs about mental illness associating it with sinful behavior or encouraging people to focus on religious practices and rituals as treatment for mental health challenges (Peteet, 2019; Pingani et al., 2021, 2022).

The influence of mass media on public beliefs and prejudices in Western contexts has been a subject of extensive research. Studies have demonstrated the significant impact of mass media on shaping public perceptions and attitudes across various domains. In the context of mental health, Klin and Lemish (2008) and Pescosolido et al. (2019) highlighted how the media perpetuate misconceptions and stigma related to mental disorders, underscoring the influential role of media representations in shaping public attitudes. Furthermore, other studies (Alyousef et al., 2020; Marino et al., 2020) have explored the potential of media interventions for reducing mental health stigma and the perceptions of media's contribution toward stigmatization of mental health, respectively.

Among all forms of media, newspapers play a distinctive role because they can be considered an index of wider public opinion (Aoki et al., 2016; Pingani et al., 2018) and a privileged source of

information on mental health (Whitley & Wang, 2017). The stereotypes most frequently reported in media include the belief that people with mental disorders are violent, dangerous, and criminal (Whitley & Wang, 2017); that people using mental health services are victims of their disorders (Pingani et al., 2018); that they cannot have a life like other people (Coverdale et al., 2002; Rhydderch et al., 2016); or that they are incompetent, strange, bizarre, and unpredictable (Goulden et al., 2011; Klin & Lemish, 2008). A retrospective analysis (Aoki et al., 2016) showed that 14%–49% of newspaper articles on mental disorders highlight the association between mental disorders and dangerousness. Furthermore, a Canadian study covering the period 2005–2015 found a significant increase, with rates of articles focusing on the relationship between crimes, violent behavior, and mental disorders rising to over 50% (Whitley & Wang, 2017).

Research indicates that mental health professionals and journalists recognize the importance of being sensitive in reporting mental health issues (Eichenberg et al., 2023). However, mental health professionals must also improve their attitudes toward people with mental illness to effectively contribute to reducing stigma (Lauber et al., 2006). The portrayal of mental illness by the media can perpetuate stigma and discrimination, underscoring the potential for fruitful collaboration between mental health professionals and journalists, who can work together to provide education and ensure responsible representations (Arneaud et al., 2023; Kenez et al., 2015).

The role of journalists in reducing the stigma of mental illness is crucial in shaping public perceptions and attitudes toward individuals with mental health conditions. There are opportunities for journalists to contribute positively to reducing stigma. For instance, citizen journalism by individuals with mental illness has the potential to educate the public and reduce stigma (Carmichael et al., 2019). Additionally, involving people with mental illness as sources in news stories is a way to reduce stigma and portray individuals with mental illness more positively (O'Brien, 2021). Moreover, journalism can effectively advocate for stigma reduction by amplifying the voices of those with lived experience, who can share their journey of recovery and demonstrate how individuals can lead fulfilling lives with hope, despite mental health challenges (Burns et al., 2022).

In the present study, our objectives are as follows: (a) describe the number of articles, from 2006 to 2021, that contain one or more words related to the mental health sphere; (b) determine how many of the identified articles address issues related to mental health; (c) for articles concerning mental health, identify those with a stigmatizing meaning and analyze their proportion over time; and (d) identify potential predictors of stigmatizing articles.

Method

The search strategy was implemented using the electronic archives of the two most widely read non-thematic Italian newspapers, *Corriere della Sera* and *La Repubblica*, at the beginning of this study (January 1, 2022; Accertamenti Diffusione Stampa, 2022). During the specified period, we considered the following years: 2006, 2009, 2012, 2015, 2018, and 2021. This selection, previously utilized in literature (Li et al., 2021), allowed us to observe how stigmatizing attitudes may vary over time, balancing efficiency and resource utilization. For each month within these years, 2 days were randomly selected using random.org (Supplemental Table 1).

On the designated days, we search all articles containing one or more of the following words (* = wildcard; Li et al., 2021): mental

health OR mental illness OR mentally ill OR mental disorder OR mental patient OR mental problem OR (depression NOT W/1 economic OR great) OR depressed OR depressive OR schizo* OR psychosis OR psychotic OR eating disorder OR autism* OR anorexi* OR bulimi* OR personality disorder OR dissociative disorder OR anxiety disorder OR anxiety attack OR panic disorder OR panic attack OR obsessive-compulsive disorder OR OCD OR post-traumatic stress OR PTSD OR social phobia OR agoraphobi* OR bipolar OR ADHD OR attention deficit.

Two students from the degree course in psychiatric rehabilitation techniques at the University of Modena and Reggio Emilia (Pingani et al., 2013), who had requested to work on their thesis on this project, underwent specific training that consists definition of stigma in mental health, elements constituting the phenomenon of stigma, various types of stigma in the mental health context, components of discrimination in the media, and stigma and newspapers: a critical analysis of the literature prepared by a senior researcher. The students independently categorized all the articles into two groups “articles related to mental health” (rMH) or “articles not related to mental health” (nrMH). The rMH category comprises solely articles offering information on mental health issues, such as the use of diagnostic terms, features of psychotherapy, psychopharmacological treatment, or descriptions of rehabilitation. All other articles (e.g., those that make metaphorical references to mental health challenges like “The market trend in this period is depressed” or use slang to describe criminal situations such as “A madman shot into the crowd”) are classified as nrMH. In the event of divergent evaluations by the two students, the senior researcher intervened to determine the appropriate categorization for the article.

Subsequently, each of the two students collected the following information for each rMH article: number of words in the title and in the text; publication date; whether the article is (or at least starts) on the front page (Yes/No); classification of the disorder discussed in the article severe mental illness, associated with schizophrenia and bipolar disorder, and common mental disorder, referring to other psychiatric disorders like anxiety, depression, or autism; and article evaluation. Four options were available for article evaluation (Li et al., 2021): stigmatizing themes include danger to others, hopeless victim, and strange behavior, and the cause of their mental illness was their personal responsibility, skeptical of seriousness or pejorative or inappropriate language; antistigmatizing themes, on the contrary, encompass sympathetic portrayal (of the general public or public figures), discussing various causes of mental illness (genetic, psychosocial, or others), highlighting recovery from or successful treatment of mental illness (pharmaceutical, psychosocial, or other/not specified), promoting mental health, addressing stigma and injustice, and discussing prevalence. Articles that presented both stigmatizing and antistigmatizing elements with equal emphasis (e.g., both as primary elements) were coded as “mixed.” Articles with neither element present were coded as “neutral.” In the event of divergent evaluations by the two students, the senior researcher intervened to determine the appropriate categorization for the article.

Statistical Analysis

The qualitative variables were described using absolute frequency and percentage, while the quantitative variables were described with the mean and standard deviation.

The agreement between the two students in assigning an article to one of the two groups (rMH and nrMH) and classifying it (stigmatizing, nonstigmatizing, neutral, and mixed) was assessed using Cohen’s κ coefficient and analyzed according to Fleiss’ guidelines (Fleiss, 1971): 0 indicates poor agreement, .01–.20 suggests slight agreement, .21–.40 indicates fair agreement, .41–.60 signifies moderate agreement, .61–.80 denotes substantial agreement, and .81–1.00 represents almost perfect agreement. The chi-square test was employed to examine the presence of statistically significant differences in the distributions of two qualitative variables. The Wilcoxon signed-rank test was used to assess whether there is a significant difference between a quantitative variable for rMH and nrMH. For the identification of potential predictors of stigmatizing articles, the following approach was used (logistic regression): Stigmatizing/nonstigmatizing articles resulting from the evaluation of rMH articles were considered as the dependent variable, while other variables previously studied in the literature as possible predictors of stigmatizing attitudes were utilized as independent variables (the year of publication, number of words in the title, number of words in the article, presence of the article on the front page, and type of disorder).

A variance inflation factor exceeding 4 or a tolerance below .25 is indicative of potential multicollinearity in regression analysis.

Results

A total of 1,988 articles meet the inclusion criteria, and their distribution across the 6 years under study is described in Table 1. The same table displays the absolute and percentage frequencies of nrMH and rMH articles. The agreement between the two evaluators to distinguish between rMH and nrMH articles was nearly perfect, with a Cohen’s κ coefficient of .99. The percentage of rMH articles varies from 17.79% in 2006 to 72.84% in 2021, and there is a statistically significant difference in the distribution of articles (rMH/nrMH) over the 6 years considered ($\chi^2 = 16.52$; $df = 5$; $p = .005$). In the Supplemental Material (Table S2 and Figure S1), the analysis of the distribution of nrMH and rMH articles among the individual years under study is available.

Table 2 delineates the categorization of rMH articles into stigmatizing, nonstigmatizing, neutral, or mixed classifications. The agreement between the two evaluators in categorizing each rMH article into the four Cohen’s κ categories denoted a substantial agreement, with a Cohen’s κ coefficient of .77 (Cohen, 1968). The year with the highest percentage of stigmatizing articles was 2009 (19.78%), while in 2018, no stigmatizing articles were identified. There is a statistically significant difference in the characterization of rMH articles (stigmatizing/nonstigmatizing/neutral/mixed) across the years under study ($\chi^2 = 65.50$; $df = 15$; $p < .001$). Figure 1 illustrates the trends of the four categories over time. In the Supplemental Material (Table S3 and Figure S2), the analysis of the distribution of stigmatizing/nonstigmatizing articles across the individual years under study is available.

The average length of the title and overall length of an article are 8.28 (± 3.36) and 480.62 (± 269.37), respectively, for the rMH subgroup, while for nrMH articles, they are 8.12 (± 4.22) and 523.43 (± 380.40). A statistically significant difference was found between the two groups regarding the total length of the text ($p = .04$), which is greater in the nrMH group. The percentage of articles on the front page is 12.42% for rMH, while it is 10.66% for nrMH ones: No

Table 1

Absolute Frequencies and Percentages of Identified Articles, as Well as Mental Health-/Not Mental Health-Related Articles, Provided for Each Year of Investigation

Year	N (% calculated on the total number of articles)	nrMH (% calculated based on the total number of articles per year)	rMH (% calculated based on the total number of articles per year)	Chi-square test
2006	326 (16.40)	268 (82.21)	58 (17.79)	$\chi^2 = 16.52, df = 5, p = .005$
2009	361 (18.16)	268 (74.24)	93 (25.76)	
2012	255 (12.82)	190 (74.51)	65 (25.49)	
2015	300 (15.09)	243 (81)	57 (19)	
2018	352 (17.71)	255 (72.44)	97 (27.56)	
2021	394 (19.82)	287 (77.84)	107 (27.16)	

Note. nrMH = not mental health-related; rMH = mental health-related.

statistically significant difference emerges between the two subgroups ($\chi^2 = .44; df = 1; p = .51$; Table 3).

Logistic regression identified two significant predictors of stigmatizing articles: the number of words in the title ($-.14; .03$) and the type of disorder addressed ($1.77; <.001$). Specifically, a lower number of words is associated with a higher probability of having a stigmatizing article. On the contrary, the discussion of a severe disorder in the article is a predictor of a stigmatizing article. The regression analysis did not reveal situations of collinearity (Table 4).

Discussion

This study aimed to achieve four objectives: describing the quantity of articles, spanning from 2006 to 2021, containing one or more words related to the mental health sphere; determining the number of identified articles addressing issues related to mental health; for articles concerning mental health, identifying those with a stigmatizing meaning and analyzing their proportion over time; and identifying potential predictors of stigmatizing articles.

The distribution of newspaper articles dealing with mental health has shown significant changes over time. Research conducted in the United Kingdom between 1992 and 2008 revealed a reduction in negative articles about mental illness and an increase in articles explaining psychiatric disorders (Goulden et al., 2011). Similarly, a study from 2008 to 2016 in the United Kingdom found an increase in the proportion of articles presenting mental illness in an anti-stigmatizing manner and a simultaneous decrease in the depiction of mental illness as stigmatizing in newspaper coverage (Rhydderch et al., 2016). Furthermore, an evaluation of changes in U.K. newspaper coverage of mental illness from 2008 to 2016 indicated a significant increase in the proportion of antistigma articles and a decrease in stigmatizing articles over the years (Li et al., 2021). Moreover, a

retrospective study on English newspapers in India revealed that over time, newspaper coverage of mental illness became less stigmatizing (Arneaud et al., 2023). These studies collectively seem to suggest a positive shift in the portrayal of mental health in newspaper articles over time. In a previous study by our research group (Pingani et al., 2018) that focused on the use of the term “schizo*” in newspapers, it demonstrated a reduction over time in the percentage of stigmatizing articles. Specifically, in articles addressing mental health issues, the percentage decreased from 70.27% in 2001 to 29.17% in 2015. The evidence from the literature appears to be supported by our study conducted in the Italian context: The percentage of nonstigmatizing articles increased from 65.52% in 2006 to 78.31% in 2021. A more complex trend is observed in articles with a stigmatizing tone: Despite a significant decrease in their percentage in 2018, it rebounded to 8.43% in 2021. This value is lower than that of 2009 (19.78%) but higher than that of 2006 (6.89%).

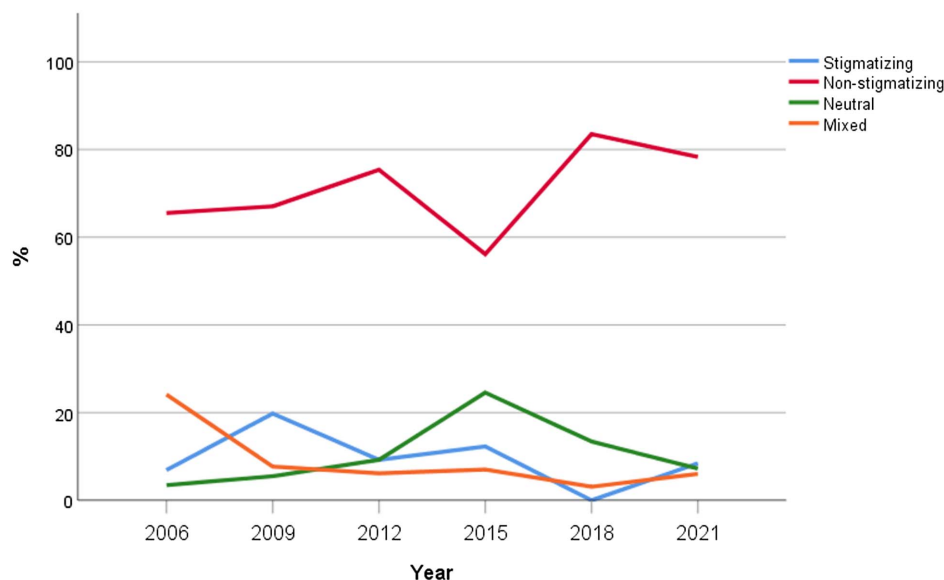
From the study of the characteristics of the articles, only one statistically significant difference emerged between the rMH and nrMH groups: the number of words in the articles is greater, on average, in the second group (523.43 ± 380.40 vs. 480.62 ± 269.37). Concerning this result, some purely speculative hypotheses can be formulated, which require further evidence for validation. One possible explanation for the difference in article length could be related to the complexity and depth of the subject matter. Mental health-related articles may require a more focused and succinct approach to effectively communicate information and support readers in understanding and addressing mental health concerns. Conversely, articles not related to mental health may cover a wider range of topics, allowing for more extensive discussions and analyses, leading to longer article lengths. Additionally, the target audience and purpose of the articles may also contribute to variations in article length. Articles related to mental health may be designed to provide clear and accessible information to individuals

Table 2

Distribution of Mental Health-Related Articles Across the Four Different Stigma-Related Categories

Year	Stigmatizing	Nonstigmatizing	Neutral	Mixed	Chi-square test
2006	4 (6.89%)	38 (65.52%)	2 (3.45%)	14 (24.14%)	$\chi^2 = 65.50, df = 15, p < .001$
2009	18 (19.78%)	61 (67.03%)	5 (5.50%)	7 (7.69%)	
2012	6 (9.23%)	49 (75.39%)	6 (9.23%)	4 (6.15%)	
2015	7 (12.28%)	32 (56.14%)	14 (24.56%)	4 (7.02%)	
2018	0	81 (83.51%)	13 (13.40%)	3 (3.09%)	
2021	7 (8.43%)	65 (78.31%)	6 (7.23%)	5 (6.03%)	

Figure 1
Trends of the Four Different Stigma-Related Categories Over Time



Note. See the online article for the color version of this figure.

seeking support or guidance, leading to a more concise writing style. In contrast, articles not related to mental health may target a broader audience or aim to explore complex issues in greater detail, resulting in longer articles.

The final objective of our study pertained to defining potential predictors of stigmatizing newspaper articles. The logistic analysis conducted identified two factors: the article’s focus on severe mental illness (such as schizophrenia) and a reduced number of words in the title. Based on evidence in literature, there is a difference in the way newspaper articles address severe mental disorders compared with other mental disorders. Newspaper articles detailing crimes committed

by individuals with schizophrenia tend to be significantly longer and contain more stigmatizing language compared with those addressing other mental disorders. Interestingly, anxiety was viewed more favorably by the public in comparison to other mental disorders, as it was associated with fewer negative stereotypes and perceived as more likely to be curable (Hasan & Musleh, 2018; Li et al., 2021). A stimulating contribution comes from Hildersley et al. (2020), who estimated that articles about schizophrenia were 6.37 times more likely to be stigmatizing than articles about other diagnoses. Regarding this topic, the contribution provided by Aoki et al. (2016) is indeed significant: Their findings revealed a negative shift in

Table 3
Qualitative and Quantitative Characteristics of Mental Health-Related Articles

Qualitative variable	rMH			nrMH			Wilcoxon signed-rank test
	<i>M</i> (\pm <i>SD</i>)	Median/ mode	Minimum/ maximum	<i>M</i> (\pm <i>SD</i>)	Median/ mode	Minimum/ maximum	
Number of words in the title	8.28 (\pm 3.36)	8.50/9	1/26	8.12 (\pm 4.22)	8/9	1/62	<i>p</i> = .26
Number of words in the article	48.62 (\pm 269.37)	468/491	26/1579	523.43 (\pm 380.40)	494/221	1/8372	<i>p</i> = .04

Quantitative variable	rMH		nrMH		Chi-square test
	<i>N</i>	%	<i>N</i>	%	
Is the article in the front page?					$\chi^2 = .44, df = 1, p = .51$
Yes	56	12.42	161	10.66	
No	395	87.58	1,350	89.34	
Type of disorder				n.c.	n.c.
SMI	31	6.87			
CMD	420	93.13			

Note. rMH = mental health-related; nrMH = not mental health-related; n.c. = not calculable; SMI = severe mental illness; CMD = common mental disorder.

Table 4*Logistic Regression for the Definition of Possible Predictors of Stigmatizing Articles*

Independent variable	Coefficient						Multicollinearity diagnostic	
	Estimate	Standard error	z	Wald test			Tolerance	VIF
				Wald statistic	df	p		
Year (2009)	−0.862	0.609	−1.415	2.002	1	.157	.748	1.336
Year (2012)	0.417	0.728	0.573	0.328	1	.567		
Year (2015)	−0.311	0.713	−0.436	0.190	1	.663		
Year (2018)	17.449	1153.508	0.015	2.288 × 10 ^{−4}	1	.988		
Year (2021)	−.093	0.678	−0.137	0.019	1	.891		
Number of words in the title	−0.143	0.065	−2.200	4.841	1	.028	.871	1.148
Number of words in the article	0.001	0.001	1.593	2.539	1	.111	.879	1.137
Article in front page (Yes/No)	−0.738	0.620	−1.191	1.419	1	.234	.908	1.101
Type of disorder (SMI/CMD)	1.771	0.526	3.370	11.360	1	<.001	.868	1.152

Note. VIF = variance inflation factor; SMI = severe mental illness; CMD = common mental disorder.

newspaper coverage of bipolar disorder because the number of articles discussing bipolar disorder and associating it with danger increased over the study period (1992–2012). The authors speculate that this trend may reflect evolving public perceptions of psychiatric illnesses: In the past, there was limited awareness or bias surrounding bipolar disorder, while individuals with schizophrenia were often unjustly perceived as dangerous. However, people have now gained a broader understanding of various psychiatric conditions, encompassing both positive and negative aspects. The research by Dubugras et al. (2011) analyzed information about schizophrenia divulged by a prestigious Brazilian daily newspaper: The analysis revealed that the articles conveyed stigmatizing messages, with a prevalent theme being the association of schizophrenia with dangerousness.

There is evidence regarding the importance of the title in conveying and inducing stigmatizing consequences (Ecker et al., 2014) demonstrating that misleading headlines affect readers' memory, their inferential reasoning, and behavioral intentions, as well as the impressions people form of faces, but no literature evidence confirms our findings that the decrease in the length of the title is associated with a higher likelihood of having a stigmatizing article. We can hypothesize that a particularly short title must use sensational and impactful words to attract the attention of the reader and, therefore, has a greater probability of being stigmatizing. This result does not align with a previous study also carried out on Italian newspapers (Pingani et al., 2018). On the contrary, the literature has depicted stigmatizing stories as significantly shorter than nonstigmatizing stories in the Australian print and online news media, whereas our results did not corroborate this finding (Cain et al., 2014).

Our study has several limitations that should be acknowledged: (a) The study only involved two national newspapers; (b) local newspapers, which might have yielded different results, were not considered; (c) no magazines, weeklies, or informational periodicals were taken into consideration; (d) the random sampling of days may not have generated a truly representative sample; and (e) the online search might have missed articles not present in the newspaper's database.

Conclusion

The fight against the stigma of mental illness is crucial for the well-being and inclusion of individuals with psychological distress

in society (Corrigan & Watson, 2002). The media, particularly newspapers, have been found to play a significant role in shaping stereotypes and fostering discriminatory behavior related to mental illness. Olstead (2002) highlighted the influence of reporting techniques utilized by the popular press and the ways in which power, knowledge, and ideology articulate through media reports about mental illness, contributing to the conflation of mental illness and criminality. Although our study demonstrates an optimistic, albeit inconsistent, trend in the number of stigmatizing articles over time, as previously documented in the literature and reflected in our choice to include "... and is there no new thing under the sun?" in the title, it remains imperative to continue promoting the appropriate use of the press in addressing issues related to mental health. We believe that there are three main strategies to pursue this aim: involve journalists in training courses aimed at increasing awareness of the importance of correctly addressing the topic of mental health; involve peer workers and health care professionals present in the area in these training courses; and evaluate the real effectiveness of these interventions to be able to redefine them for increased effectiveness.

However, we must not forget that in this process of improvement, it is essential to also involve other actors who can play a significant role: publishers, who are responsible for editorial decisions and the direction of newspapers, and mental health charities, which can provide resources, up-to-date information, and specific guidance to help journalists better understand the complexity of mental health issues. This multistakeholder approach can ensure a comprehensive vision and greater effectiveness in addressing the challenges related to stigmatization and misinformation about mental health in the media, particularly in newspapers.

References

- Accertamenti Diffusione Stampa. (2022). *Consultazione dati*. <https://www.adsnotizie.it/Dati/Index>
- Alyousef, S. M., Alhamidi, S. A., Albloushi, M., & Eid, T. A. (2020). Perceptions of media's contribution toward stigmatization of mental health by Saudi Arabian nurses. *Journal of the American Psychiatric Nurses Association, 26*(6), 568–575. <https://doi.org/10.1177/1078390319855771>
- Aoki, A., Aoki, Y., Goulden, R., Kasai, K., Thornicroft, G., & Henderson, C. (2016). Change in newspaper coverage of schizophrenia in Japan over 20-year period. *Schizophrenia Research, 175*(1–3), 193–197. <https://doi.org/10.1016/j.schres.2016.04.026>

- Arneaud, G. J., Kar, A., Majumder, S., Molodynski, A., Lovett, K., & Kar, S. (2023). Mental health disorders in English newspapers of India: A retrospective study. *The International Journal of Social Psychiatry*, 69(3), 646–652. <https://doi.org/10.1177/00207640221132426>
- Burns, S., Tapsell, A., Perlman, D., Patterson, C., & Moxham, L. (2022). Stigma in the media: Investigating journalism students attitudes towards mental illness. *International Journal of Mental Health Nursing*, 31(1), 104–110. <https://doi.org/10.1111/inm.12941>
- Cain, B., Currie, R., Danks, E., Du, F., Hodgson, E., May, J., O’Loughlen, K., Phan, Y., Powter, J., Rizwan, N., Shahim, S., Sinsion, D., Loughnan, S., & Haslam, N. (2014). “Schizophrenia” in the Australian print and online news media. *Psychosis*, 6(2), 97–106. <https://doi.org/10.1080/17522439.2013.764349>
- Carmichael, V., Adamson, G., Sitter, K. C., & Whitley, R. (2019). Media coverage of mental illness: A comparison of citizen journalism vs. professional journalism portrayals. *Journal of Mental Health*, 28(5), 520–526. <https://doi.org/10.1080/09638237.2019.1608934>
- Clement, S., Schauman, O., Graham, T., Maggioni, F., Evans-Lacko, S., Bezborodovs, N., Morgan, C., Rüsch, N., Brown, J. S. L., & Thornicroft, G. (2015). What is the impact of mental health-related stigma on help-seeking? A systematic review of quantitative and qualitative studies. *Psychological Medicine*, 45(1), 11–27. <https://doi.org/10.1017/S0033291714000129>
- Cohen, J. (1968). Weighted kappa: Nominal scale agreement provision for scaled disagreement or partial credit. *Psychological Bulletin*, 70(4), 213–220. <https://doi.org/10.1037/h0026256>
- Corrigan, P. W., & Rao, D. (2012). On the self-stigma of mental illness: Stages, disclosure, and strategies for change. *The Canadian Journal of Psychiatry/La Revue canadienne de psychiatrie*, 57(8), 464–469. <https://doi.org/10.1177/070674371205700804>
- Corrigan, P. W., & Watson, A. C. (2002). Understanding the impact of stigma on people with mental illness. *World Psychiatry*, 1(1), 16–20.
- Corrigan, P. W., Watson, A. C., Heyrman, M. L., Warpinski, A., Gracia, G., Slopen, N., & Hall, L. L. (2005). Structural stigma in state legislation. *Psychiatric Services*, 56(5), 557–563. <https://doi.org/10.1176/appi.ps.56.5.557>
- Coverdale, J., Nairn, R., & Claasen, D. (2002). Depictions of mental illness in print media: A prospective national sample. *Australian and New Zealand Journal of Psychiatry*, 36(5), 697–700. <https://doi.org/10.1046/j.1440-1614.2002.00998.x>
- Dubugras, M. T. B., Evans-Lacko, S., & de Jesus Mari, J. (2011). A two-year cross-sectional study on the information about schizophrenia divulged by a prestigious daily newspaper. *Journal of Nervous and Mental Disease*, 199(9), 659–665. <https://doi.org/10.1097/NMD.0b013e318229cf90>
- Ecker, U. K. H., Lewandowsky, S., Chang, E. P., & Pillai, R. (2014). The effects of subtle misinformation in news headlines. *Journal of Experimental Psychology: Applied*, 20(4), 323–335. <https://doi.org/10.1037/xap0000028>
- Eichenberg, C., Strobl, L., Jaeger, T., Kirsha, A., Laugharne, R., & Shankar, R. (2023). Comparison of attitudes to media representation of mental illness between journalists and mental health professionals in Russia with German-speaking countries of Switzerland, Germany, and Austria. *The International Journal of Social Psychiatry*, 69(5), 1113–1120. <https://doi.org/10.1177/00207640221141589>
- Evans-Lacko, S., Gronholm, P., Hankir, A., Pingani, L., & Corrigan, P. (2016). Practical strategies to fight stigma in mental health. In A. Fiorillo, U. Volpe, & D. Bhugra (Eds.), *Psychiatry in practice: Education, experience, and expertise* (pp. 237–255). Oxford University Press.
- Fleiss, J. L. (1971). Measuring nominal scale agreement among many raters. *Psychological Bulletin*, 76(5), 378–382. <https://doi.org/10.1037/h0031619>
- Fox, A. B., Earnshaw, V. A., Taverna, E. C., & Vogt, D. (2018). Conceptualizing and measuring mental illness stigma: The mental illness stigma framework and critical review of measures. *Stigma and Health*, 3(4), 348–376. <https://doi.org/10.1037/sah0000104>
- Goffman, E. (1963). *Stigma: Notes on the management of spoiled identity*. Prentice Hall.
- Goulden, R., Corker, E., Evans-Lacko, S., Rose, D., Thornicroft, G., & Henderson, C. (2011). Newspaper coverage of mental illness in the UK, 1992–2008. *BMC Public Health*, 11(1), Article 796. <https://doi.org/10.1186/1471-2458-11-796>
- Hasan, A. A.-H., & Musleh, M. (2018). Self-stigma by people diagnosed with schizophrenia, depression and anxiety: Cross-sectional survey design. *Perspectives in Psychiatric Care*, 54(2), 142–148. <https://doi.org/10.1111/ppc.12213>
- Hildersley, R., Potts, L., Anderson, C., & Henderson, C. (2020). Improvement for most, but not all: Changes in newspaper coverage of mental illness from 2008 to 2019 in England. *Epidemiology and Psychiatric Sciences*, 29, Article e177. <https://doi.org/10.1017/S204579602000089X>
- Kenez, S., O’Halloran, P., & Liamputtong, P. (2015). The portrayal of mental health in Australian daily newspapers. *Australian and New Zealand Journal of Public Health*, 39(6), 513–517. <https://doi.org/10.1111/1753-6405.12441>
- Klin, A., & Lemish, D. (2008). Mental disorders stigma in the media: Review of studies on production, content, and influences. *Journal of Health Communication*, 13(5), 434–449. <https://doi.org/10.1080/10810730802198813>
- Lauber, C., Nordt, C., Braunschweig, C., & Rössler, W. (2006). Do mental health professionals stigmatize their patients? *Acta Psychiatrica Scandinavica. Supplementum*, 113(s429), 51–59. <https://doi.org/10.1111/j.1600-0447.2005.00718.x>
- Li, Y., Hildersley, R., Ho, G. W. K., Potts, L., & Henderson, C. (2021). Relationships between types of UK national newspapers, illness classification, and stigmatising coverage of mental disorders. *Social Psychiatry and Psychiatric Epidemiology*, 56(9), 1527–1535. <https://doi.org/10.1007/s00127-021-02027-7>
- Link, B. G., & Phelan, J. C. (2001). Conceptualizing stigma. *Annual Review of Sociology*, 27(1), 363–385. <https://doi.org/10.1146/annurev.soc.27.1.363>
- Marino, M. I., Adogba, O., & Tilli, N. (2020). Mental health interventions: Reflections on a radio program as alternative for stigma reduction and social integration. *Frontiers in Communication*, 5, Article 550912. <https://doi.org/10.3389/fcomm.2020.550912>
- O’Brien, A. (2021). Reporting on mental health difficulties, mental illness and suicide: Journalists’ accounts of the challenges. *Journalism*, 22(12), 3031–3047. <https://doi.org/10.1177/1464884920903855>
- Olstead, R. (2002). Contesting the text: Canadian media depictions of the conflation of mental illness and criminality. *Sociology of Health and Illness*, 24(5), 621–643. <https://doi.org/10.1111/1467-9566.00311>
- Pescosolido, B. A., Manago, B., & Monahan, J. (2019). Evolving public views on the likelihood of violence from people with mental illness: Stigma and its consequences. *Health Affairs*, 38(10), 1735–1743. <https://doi.org/10.1377/hlthaff.2019.00702>
- Pescosolido, B. A., & Martin, J. K. (2015). The stigma complex. *Annual Review of Sociology*, 41(1), 87–116. <https://doi.org/10.1146/annurev-soc-071312-145702>
- Peteet, J. R. (2019). Approaching religiously reinforced mental health stigma: A conceptual framework. *Psychiatric Services*, 70(9), 846–848. <https://doi.org/10.1176/appi.ps.201900005>
- Pingani, L., Fiorillo, A., Luciano, M., Catellani, S., Vinci, V., Ferrari, S., & Rigatelli, M. (2013). Who cares for it? How to provide psychosocial interventions in the community. *International Journal of Social Psychiatry*, 59(7), 701–705. <https://doi.org/10.1177/0020764012453812>
- Pingani, L., Forghieri, M., Ferrari, S., Ben-Zeev, D., Artoni, P., Mazzi, F., Palmieri, G., Rigatelli, M., & Corrigan, P. W. (2012). Stigma and discrimination toward mental illness: Translation and validation of the Italian version of the Attribution Questionnaire-27 (AQ-27-I). *Social Psychiatry and Psychiatric Epidemiology*, 47(6), 993–999. <https://doi.org/10.1007/s00127-011-0407-3>

- Pingani, L., Giberti, S., Coriani, S., Ferrari, S., Fierro, L., Mattei, G., Nasi, A. M., Pinelli, G., Wesselmann, E. D., & Galeazzi, G. M. (2021). Translation and validation of an Italian Language Version of the Religious Beliefs and Mental Illness Stigma Scale (I-RBMIS). *Journal of Religion and Health, 60*(5), 3530–3544. <https://doi.org/10.1007/s10943-021-01195-9>
- Pingani, L., Pinelli, G., Coriani, S., Ferrari, S., Fierro, L., Giberti, S., Mattei, G., Nasi, A. M., Evans-Lacko, S., Wesselmann, E. D., & Galeazzi, G. M. (2022). Can a negative religious causal attribution of mental illness affect the phenomenon of public stigma? *Mental Health, Religion & Culture, 25*(7), 665–681. <https://doi.org/10.1080/13674676.2022.2106198>
- Pingani, L., Sampogna, G., Borghi, G., Nasi, A., Coriani, S., Luciano, M., Galeazzi, G. M., Evans-Lacko, S., & Fiorillo, A. (2018). How the use of the term “schizo*” has changed in an Italian newspaper from 2001 to 2015: Findings from a descriptive analysis. *Psychiatry Research, 270*, 792–800. <https://doi.org/10.1016/j.psychres.2018.10.076>
- Rhydderch, D., Krooupa, A.-M., Shefer, G., Goulden, R., Williams, P., Thornicroft, A., Rose, D., Thornicroft, G., & Henderson, C. (2016). Changes in newspaper coverage of mental illness from 2008 to 2014 in England. *Acta Psychiatrica Scandinavica, 134*(Suppl. 446), 45–52. <https://doi.org/10.1111/acps.12606>
- Roberts, S. O., Bareket-Shavit, C., Dollins, F. A., Goldie, P. D., & Mortenson, E. (2020). Racial inequality in psychological research: Trends of the past and recommendations for the future. *Perspectives on Psychological Science, 15*(6), 1295–1309. <https://doi.org/10.1177/1745691620927709>
- Thornicroft, G. (2008). Stigma and discrimination limit access to mental health care. *Epidemiologia e Psichiatria Sociale, 17*(1), 14–19. <https://doi.org/10.1017/S1121189X00002621>
- Van Brakel, W. H. (2006). Measuring health-related stigma—A literature review. *Psychology Health & Medicine, 11*(3), 307–334. <https://doi.org/10.1080/13548500600595160>
- Wahl, O. F., & Harman, C. R. (1989). Family views of stigma. *Schizophrenia Bulletin, 15*(1), 131–139. <https://doi.org/10.1093/schbul/15.1.131>
- Whitley, R., & Wang, J. (2017). Good news? A longitudinal analysis of newspaper portrayals of mental illness in Canada 2005 to 2015. *The Canadian Journal of Psychiatry/La Revue canadienne de psychiatrie, 62*(4), 278–285. <https://doi.org/10.1177/0706743716675856>

Received January 10, 2024

Revision received April 26, 2024

Accepted May 28, 2024 ■