



ENDING STIGMA STARTS WITH YOU

PREVENTING MENTAL ILLNESS & SUBSTANCE USE RELATED STIGMA & PROMOTING RECOVERY ORIENTED PRACTICES IN PRIMARY HEALTH CARE



South Riverdale
COMMUNITY
HEALTH CENTRE



Mental Health
Commission
of Canada

Commission de
la santé mentale
du Canada

This intervention was designed and tested using a **participatory action research** approach to address stigma among primary health care providers at community health centres (CHCs) in Ontario.

An **organizational and systems** approach was used in order to:

1. Enhance communication between decision makers and health care providers
2. Create environments that prevent stigma/discrimination and promote recovery

OVERALL FINDINGS

5.9 %

IMPROVEMENT IN STIGMATIZING ATTITUDES TOWARDS THOSE WITH MENTAL ILLNESS AND ADDICTIONS¹

9.4 %

IMPROVEMENT IN ATTITUDES CONCERNING THE POTENTIAL FOR RECOVERY OF PEOPLE WITH ADDICTIONS²

8.4 %

REDUCTION IN FEELINGS OF SOCIAL DISTANCE FROM THOSE WITH ADDICTIONS³

¹ Opening Minds Survey for Health Care Providers
² Recovery Assessment Scale-Addictions
³ Bogardus Social Distance Scale-Heroin Dependence

INTERVENTION

COMPONENT 5: ANALYSIS OF INTERNAL POLICIES & PROCEDURES

This component involves the evaluation of CHC policies and procedures to identify both strengths and areas for improvement in service delivery.

COMPONENT 4: RECOVERY-BASED ARTS

Arts-based methods are used as a vehicle for primary health care providers to learn from consumer/survivors and community members about personal experiences with stigma, discrimination, and recovery.

COMPONENT 1: TEAMS OF LEADERS

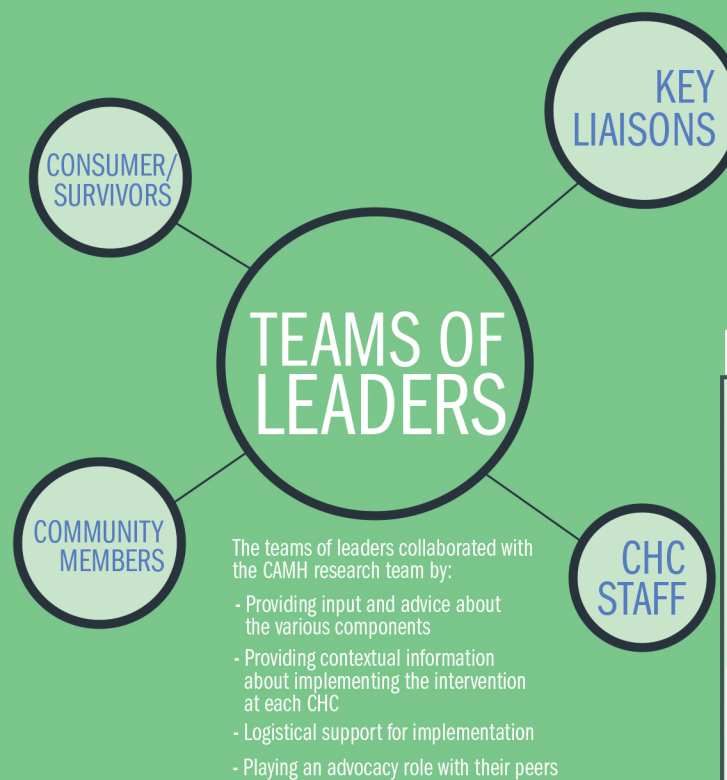
The teams of leaders provide leadership in a collaborative effort to reduce stigma and discrimination towards individuals with mental illness and substance use issues.

COMPONENT 2: INNOVATIVE CONTACT-BASED EDUCATION

This component sought to increase knowledge and develop competencies on anti-stigma and discrimination and pro-recovery approaches.

COMPONENT 3: RAISING AWARENESS

This component is intended to compliment the other components by raising awareness about stigma, discrimination and recovery among CHC staff, clients and community members.



LEADERSHIP TRAINING

A training was created to develop the skills and comfortability levels of leaders for addressing stigma and discrimination with their peers.

This workshop, *Dealing with Difficult Conversations from a Trauma Informed Perspective*, aimed to:

- describe how a trauma-informed perspective can impact conversations
- explain strategies for managing difficult conversations, particularly about stigma related with mental illness and substance use

88.8 %

OF STAFF AGREED THAT THE WORKSHOPS ARE USEFUL FOR THEIR WORK

CONTACT-BASED EDUCATION

aims to



RAISE
AWARENESS



DEVELOP
POSITIVE
ATTITUDES



REDUCE
STIGMATIZING
ATTITUDES

by exposing

PRIMARY HEALTH CARE WORKERS TO
THE PERSONAL STORIES
OF CONSUMER/SURVIVORS

WORKSHOPS

Three contact-based educational workshops were designed to improve anti-stigma and recovery oriented competencies, with the ultimate aim of enhancing quality care and treatment delivered by primary health care providers.

The workshops incorporated the following elements:

- Adult learning principles
- Direct contact with consumer/survivors
- Interactive learning methods, such as:
 - small group discussions
 - panel discussions
 - role play

FINDINGS

72.7 %

OF STAFF FELT THAT THE TRAINING SESSIONS ARE USEFUL FOR THEIR WORK

90.5 %

OF STAFF FOUND THE TRAINERS (EXPERTS AND CONSUMER/SURVIVORS) BOTH KNOWLEDGABLE AND ENGAGING

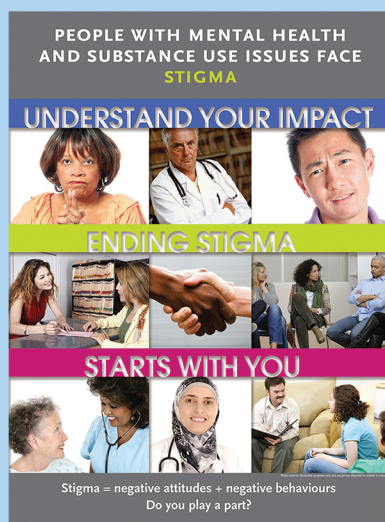
AWARENESS

RAISING

This component involves the use of various forms of media to increase awareness about stigma and discrimination as well as showcase recovery. It is intended to compliment the other components by raising awareness among CHC staff, clients and community members.

LOGO & POSTER

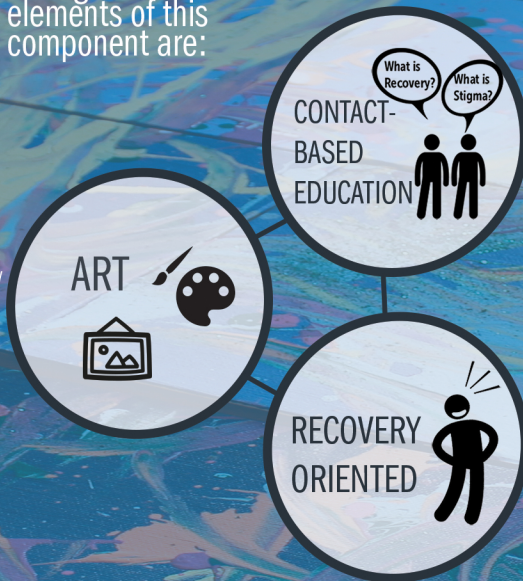
ENDING
STIGMA



RECOVERY BASED ARTS

Staff and clients attended workshops to explore stigma, discrimination and recovery through art. The three core elements of this component are:

Art is an impactful medium for self-expression and has the ability to encourage the 'unlearning' of socially ingrained stereotypes about mental illness and substance use. It provides a great opportunity for creative collaboration and acts as a vehicle for discussing issues about stigma and recovery.



Contact-based education is at the core of recovery-based arts. It allows for primary health care providers to gain a better understanding of the role they play in stigma, discrimination, and recovery from the perspective of individuals who have directly been affected by mental illness or substance use issues.

Recovery is an ongoing process of growth where consumer/survivors actively take on the challenges of stigma and discrimination to create a sense of purpose and identity beyond their symptoms and illness.

Analysis of INTERNAL POLICIES & PROCEDURES

WHY?

Organizational policies and procedures influence primary health care providers' attitudes, values, behaviours and social norms in the workplace. They are also the foundation for service delivery in health care settings because they indicate how policies are expected to translate into action.

HOW?

Policies and procedures can manifest structural stigma and discrimination unintentionally. This can ultimately contribute to the disparity in care that consumer survivors face. Since a policy analysis tool for identifying stigmatizing content did not exist, a tool was developed based on a number of existing frameworks.

The team of leaders from Unison identified and selected relevant policies and procedures for analysis including:

- Managing Disruptive Behaviour, Threatening, Violent and Aggressive Behaviour Protocol
- Primary Care Client Intake Protocol
- No-Show Protocol
- Acute Mental Disturbance Protocol
- Terminating Client Relationship Protocol

WHAT?

OUTCOMES

Recommendations for strengthening CHC policies:

- Concepts such as equity, dignity and respect should become embedded in the decision making process
- Ensure policies are conveyed to staff and appropriate measures are in place to evaluate its use and determine its efficacy
- Stigma and/or discrimination should be incorporated in policies/procedures- as a means to promote an anti-stigma/anti-discrimination environment

For more information on our project:

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