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ABSTRACT

This paper describes two studies conducted to determine whether there is a stigma associated with being in psychotherapy and if so, how that stigma compares with the well-documented stigma associated with mental illness (Wahl, 1995). In the first study, community members (n=89) were asked to listen to an audiotaped statement from a young man. All participants listened to the same statement, and were either told the statement was from a college student, a college student in psychotherapy, or a college student who is mentally ill. The prediction that the college student in psychotherapy and the college student who is mentally ill would be rated similarly was partially supported. In the second study, the procedures were identical except that the participants (n=76) were asked to read a written transcript of the same audiotaped statement. Again, the prediction that the college student in psychotherapy and the college student who is mentally ill would be rated similarly was partially supported. Results suggest that persons in psychotherapy and persons designated as mentally ill are seen as no different from each other, but very different from persons believed to be normal. (JDM)



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Stigma of Psychotherapy: It's Not OK to Get Help James D. Slavet, Lisa Parker, Jennifer M. Kitowicz, and Marian L. MacDonald University of Massachusetts, Amherst

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Abstract

Two studies were conducted to determine whether there was a stigma associated with merely being in psychotherapy and if so, how that stigma compares to the well-documented stigma associated with mental illness (Wahl, 1995).

In study one, eighty-nine community members were asked to listen to an audiotaped statement from a young man. Subjects were asked to rate the young man, based on his statement, on eleven traits. All participants listened to the same statement, but some were told the statement was from 1) a college student, 2) a college student in psychotherapy, 3) a college student who's mentally ill. Ratings for the college student condition were generally more positive than the other two conditions. The prediction that the college student in psychotherapy and the college student who is mentally ill would be rated similarly and differently than the college student was partially supported.

In study two, seventy-six participants were asked to read a hand written transcription of the above-mentioned audiotaped statement. The remainder of the procedure for study two was identical to study one. Ratings for the college student condition were generally more negative than the other two conditions. Again, the prediction that the college student in psychotherapy and the college student who is mentally ill would be rated similarly and differently than the college student, was partially supported.

Explanations for the statistically different, but conceptually similar differences, are discussed.



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Stigma of Psychotherapy: It's Not OK to Get Help

James D. Slavet, Lisa Parker, Jennifer M. Kitowicz, and Marian L. MacDonald

The intent of this work, as originally conceived, was to replicate the findings reported in the Consumer Reports article evaluating psychotherapy (Consumer Reports, 1995). That study was seen as a landmark one: it solicited evaluations of psychotherapy's impact from persons reporting on their own experiences, to an independent entity (the Consumer's Union), and with no apparent implicit or explicit incentive to bias their responses in any way. The finding of a positive effect, then, was seen as enormously credible. Replicating that finding seemed a reasonable task for a Senior Honor's Thesis project, which was the original reason for this work.

When potential thesis committee members were consulted, their reactions to the proposed work were quite negative. They both exclaimed that no one "in their right mind" would admit to having been in psychotherapy to a data collector, so that their evaluations of psychotherapy's impact on them could not be measured. The thoughtful comments of these committee members immediately suggested a different study, namely, evaluating whether the stigma long believed to be associated with being designated as mentally ill was also associated with being designated as in psychotherapy.

Study One

Study One was designed to look at whether there was a stigma associated with being in psychotherapy that paralleled the stigma associated with being mentally ill.

Method

Subjects

Eighty-nine participants (32 men and 57 women), ranging in age between 21 and 55, contributed data to this study.



Procedure

Participants were approached in public settings (e.g., shopping malls, hospitals, court houses, and hair salons) and asked to rate an audiotaped autobiographical presentation by a young man randomly described as being either a college student (condition one), a person in psychotherapy (condition two), or a mentally ill person (condition three). Participants heard the presentation via a Walkman and reported their reactions using the eleven six-point rating scales. Scale order and direction were randomized and counterbalanced to control for order effects. After reporting their impressions of the audiotaped person, participants were asked to indicate "Have you ever known anyone (including yourself) who has been in psychotherapy?" and "If so, and if there was more than one person, think of the person you know best, and rate how you believe that person's experience in psychotherapy affected them by circling one of the phrases below".

Results

Initial analyses identified the structure characterizing the set of rating scales. Ratings were subjected to a Principal Components Analysis. Examination of the scree plot suggested that a two component solution, accounting for 55.83 percent of the observed variance, was the most appropriate. The two component solution was orthogonally rotated; scales with loadings greater than plus or minus .5 were selected as markers. Component One, dubbed Character Style, was marked by incompetent, weak, dull, awkward, sad, insecure, reserved, and untrustable. Component Two, dubbed Relational Style, was marked by shy and dependent. Scores for negatively loading markers were reflected, and component scores were computed for each subject by combining scores from component markers.

One-way analyses of variance yielded significant F-ratios for both components one (F $_{2,86}$ = 3.29) and two (F $_{2,86}$ = 14.52). Post hoc comparisons on Component One means revealed a significant difference between the college student and mentally ill condition means (p = .015) and a near significant difference between the college student and psychotherapy patient condition



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means (p = .073). The psychotherapy patient and mentally ill condition means were not significantly different (p = .525). On Component Two, post hoc comparisons indicated significant differences between the means for the college student and the mentally ill conditions and the college student and the psychotherapy patient conditions (p's = .000 and .000, respectively). Again, the psychotherapy patient and mentally ill condition means were not significantly different (p = .809).

The second research question, which had in fact been the principal impetus for this work, concerned how participants evaluated the impact psychotherapy had had on persons they had known who had gone through it. Eighty seven percent of the sample reported having known someone who had been a psychotherapy patient. Ninety seven percent of those participants reported that therapy's impact had been helpful.

Discussion

On both Components One and Two, there were no significant differences between the ratings given to the psychotherapy patient and the mentally ill conditions. Moreover, the ratings given to the psychotherapy patient and college student conditions were significantly different on Component Two and marginally significantly different on Component One. These results supported the notion that persons in psychotherapy bear the same stigma, as do persons labeled mentally ill. This finding is especially powerful in light of the fact that it emerged among a sample of persons who for the most part had known someone who had been in psychotherapy and who evaluated that person's psychotherapy experience as having been helpful to them.

Study Two

Study Two was done to replicate the effect found in Study One, namely, that persons designated as being in psychotherapy and persons designated as being mentally ill would be seen as comparable to one another and as different than persons designated as normal.



Method

Subjects

Seventy-six participants (41 men and 35 women), ranging in ages between 21 and 66, contributed to this study.

Procedure

Participants were approached in public settings (e.g., laundromats, highway rest stops, street corners, beaches) and asked to rate a handwritten statement (transcribed from the above mentioned audiotape) by a young man randomly described as being either a college student (condition one), a person in psychotherapy (condition two), or a mentally ill person (condition three). Participants read the statement and reported their reactions using the eleven six-point rating scales. The remainder of the method for study two was identical to the method for study one described above.

Results

As in study one, initial analyses identified the structure characterizing the set of rating scales. Ratings were then subject to a Principal Components Analysis. Examination of the scree plot suggested a two component solution, which accounted for 51.88 percent of the observed variance. The two component solution was then subjected to orthogonal rotation and scales with loadings greater than plus or minus .6 were selected as markers, Component One dubbed Interpersonal Weakness, was marked by the traits weak, awkward, dull, and dependent.

Component Two, dubbed Quiet, was marked by the traits shy, reserved and trustable.

One-way analyses of covariance yielded significant a significant F-ratio for component one ($F_{2,22} = 5.98$), but not component two ($F_{2,26} = .28$), when experience in psychotherapy and age were controlled for, respectively. Post hoc comparisons on component one means showed a significant difference between the college student condition and mentally ill college student condition means (p = .004), and between the college student condition and college student in psychotherapy condition means (p = .016). Furthermore, on component one no difference was found between the means of the mentally ill college student condition and the college student in



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psychotherapy condition. Surprisingly, the college student was rated more positively than the other two conditions on component one. Nonetheless a significant difference is observable between ratings of the mentally ill college students and the college student in psychotherapy and ratings of college students, when a confounding variable was controlled.

Again, the second research question in this study concerned how participants evaluated the impact psychotherapy had had on persons they had known who had gone through it.

Seventy nine percent of the sample reported having known someone who had been a psychotherapy patient. Ninety three percent of those participants reported that therapy's impact had been helpful.

General Discussion

Study Two's results yielded an unexpected finding which, when a confounding variable was controlled, replicated the results from Study One, but conceptually rather than simply statistically. Put differently, in Study One, ratings given to the psychotherapy patient and mentally ill conditions were comparable and *negative* relative to the condition representing being "normal." In Study Two, Component One ratings given the psychotherapy patient and mentally ill conditions were comparable to one another and significantly different than the ratings given the condition representing "normal", when the confounding variable of how a known person's experience in psychotherapy had affected that person was controlled. This difference, unlike the difference detected in Study One, suggested that persons in psychotherapy and persons designated as mentally ill were seen in a more *positive* direction. This phenomenon --- seeing mentally ill persons more positively than persons believed to be normal ---has been reported previously and termed a "benevolent intentions" effect (Link, Cullen, Frank, & Wozniak, 1987). While this result did not replicate the result found in Study One statistically, it did replicate the effect conceptually and suggests that persons in psychotherapy and persons designated as mentally ill are seen as no different than one another but very different than are persons believed to be "normal".



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