**STIGMA AND MENTAL HEALTH**

**[Abstract:0118] Stigma and mental health**

Attitudes of general population and physicians towards alcohol addiction

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**Objective:** To assess attitudes of general population and physicians towards alcohol addiction and to investigate whether medical education has a positive effect towards alcohol dependence or not.

**Method:** 99 medical doctors working at Afyonkarahisar University hospital, in public hospitals or health centers and 101 people selected from the community to represent the overall population participated in our study. Socio-demographic information of the participants were received, and then they were asked to complete the Social Distance Scale (SDS), the Characteristics Scale (CS), the Skill Assessment Scale (SAS), and the Dangerousness Scale (DS) anonymously, without the related stigma. Validity and reliability of this survey were reported in previous studies. DS consists of eight (8) items concerning Social Distance, measuring establishing contact with person affected by a given condition. CS consists of twenty (20) items. This evaluates the impact of personality and behavior attributed to a person affected by a given condition. SAS defines various not obviously expressed abilities related to a given condition. DS consists of four (4) items, investigating whether a mentally disabled patient is a threat to others.

**Results:** Comparing Doctors' and general population groups according to the stigma sub-scale, there was no statistically significant difference between the two groups (p>0.05).

**Conclusions:** In this study, it was found that there was no significant difference between attitudes towards alcohol addicts between Doctors' and General population groups, 2 out of 3 people in both groups have negative attitudes towards alcohol addicts and medical education did not change these attitudes. Discrimination and stigma applied towards addicted people may obstruct the treatment of addiction. Especially, doctors play an important role for reducing stigmatization towards addicted people within the community. During medical education (especially rotation of psychiatry), application and development of new education strategies about addiction, in addition to basic courses, may help to reduce negative attitudes towards alcohol addicted people.

**Keywords:** alcohol addiction, stigma, medical education

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**[Abstract:0639] Stigma and mental health**

Medical education and stigmatization impact on the formation of ideas about psychotropic medications

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**Objective:** In 2008, the European Commission adopted the European Pact for Mental Health and Well-being, where stigmatization control was promoted to one of the priority areas. There are misconceptions about psychotropic medications. The negative take on psychotropic medications leads to their rejection and refusal to take these medications. It results in recrudescence, disease chronification, and early disability. The research purpose is to study the medical education and stigmatization impact on the formation of ideas about psychotropics to further a program of destigmatization.

**Methods:** The following respondents took part in the research: KSMA students that studied psychiatrics (100 people); KSMA students that have not studied psychiatrics (100 people) and general practitioners (150 people). The original questionnaire was used as the research tool. It was designed to study the image of psychiatrists, mentally sick patients and psychotropic medications.
Results: The results showed that 80.73% of KSMA students that had not studied psychiatrics reckon that psychotropic medications should be used “only in the case of severe mental disorders.” About half of the respondents of this group believe that “psychotropic drugs do not increase the quality of life,” “they are unessential” and, accordingly, the respondents would not take such medications. These answers demonstrate a negative attitude to the medicinal treatment of mental disorders. A more positive view of psychotropic medications is observed in students that studied psychiatrics. They described these medications as «nonnarcotic medications meant for treatment» - 83.49%, «they are essential» - 69.73% and «these can control mentality» - (79.0%). More than 65.0% of the respondents of this group believe that “they would take psychotropic medication prescribed by a doctor”. However, along with the positive views there are still such views as: “these shouldn’t be used by the doctors of other specialties”, “the use of psychotropic medicines only for severe mental disorders” - (61%). This suggests that the study of psychotropic drugs at the undergraduate level significantly mitigates the negative attitudes; however, there remains an unconscious fear of their usage.

Conclusion: Considering the commitment of the WHO to expand capacity “in primary care for the treatment of common mental disorders” (Izmir, Turkey 2013), the study also included general practitioners. When analyzing their answers, we found that more than 30% of doctors do not use psychotropic medications in their practice at all or they use only the medicines of the previous generation. Over 40% of respondents answered that they “do not know” how to treat patients with such common disorders as depression and panic disorder. One of the main causes for this problem is the high degree of stigmatization towards psychotropic medications. The main conclusions are the following:

1. Education in mental health mitigates the negative view of psychotropic medications but does not turn it into a positive attitude.
2. Misconceptions about psychotropic medications form a generally negative attitude to mental health services, poor understanding of its functions and negative attitudes to treatment.
3. It is necessary to change educational programs in psychiatrics at the undergraduate and postgraduate levels, including programs for general practitioners.

Keywords: stigmatization, psychotropic medications, education in mental health