Abstract

**Background:** In this study, we build on previous work by evaluating whether stigmatizing attitudes towards mental illness are affected by illness characteristics. Based on modifications to a survey that was developed by Corrigan (2003), we examined undergraduate participants’ responses to a character, described in a brief vignette.

**Method:** “Joe” was described as having problems associated with either schizophrenia or depression. We examined whether indications of dangerousness towards self or others (dangerous versus not) and controllability via medications (controllable versus not) influenced perceptions in a 2 x 2 x 2 (illness type vs. dangerousness vs. controllability) ANOVA design. After reading one of eight possible vignettes, participants responded to a list of 54 items (either statements, such as “Joe should be forced to seek counseling,” or questions, such as “How much sympathy would you feel for Joe?”). Responses ranged from 1 (indicating less stigma) to 6.

**Results:** Items were categorized into nine factors (responsibility, pity, anger, dangerousness, fear, willingness to help, coercion, segregation, and avoidance). Respondents were 304 university students (78% female). With regard to main effects analyses, we predicted that stigmatizing reactions of anger, fear and avoidance would be more strongly associated with schizophrenia than depression, and that controllability indications would result in both greater stigma and increased acceptance of coercion into
treatment. We also predicted interactions between dangerousness and controllability, such that when both were present respondents would be more stigmatizing, less willing to help, and more willing to coerce and segregate.

**Discussion:** Implications for anti-stigma programming will be discussed.