A framework for identifying stigmatisation patterns in patients with mental health conditions in the acute healthcare setting

1996–2020 was carried out, only qualitative primary studies published in English featuring health professionals and patients with mental health conditions in acute-care settings were included. A snowballing method was then applied to identify further relevant literature by backward and forwards steps. For example, only primary qualitative studies of patients with mental health conditions in critical settings met inclusion criteria; however, quantitative studies or those in medical surgical settings and studies of patients living with HIV were nevertheless included.

Due to the limitations of this review, further high-quality research is required. Such future research should collect data from both quantitative and qualitative observational or interventional studies to further develop an understanding of stigmatisation patterns in different cultures and to capture all intervention approaches and methods applied to patients with mental illness in acute-care settings. Future research on stigma categorisation and reduction should focus on rigorous evaluation and on addressing stigma at multiple ecological levels within critical care in order to develop a sustainable response. Standardising measures to facilitate comparisons between intervention approaches and methods is an important step towards this.

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