

Effect of a contact-based education intervention on reducing stigma among community health and care staff in Beijing, China

Submission date 11/06/2020	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered <input checked="" type="checkbox"/> Protocol
Registration date 18/06/2020	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
Last Edited 30/08/2022	Condition category Mental and Behavioural Disorders	<input type="checkbox"/> Individual participant data

Plain English summary of protocol

Background and study aims

Increasing evidence suggests that the stigma associated with mental illness is a powerful barrier to accessing mental health care worldwide. Consistent findings in high-income countries have shown that contact with people with mental illness is the most effective intervention to reduce stigma. However, little evidence is available at present on how to reduce stigma in low- and middle-income countries, including China. The aim of this pilot study is to assess how feasible an intervention to reduce stigma among the primary care and community healthcare staff through a contact-based education intervention.

Who can participate?

Staff from primary care centers, community committees, Civil Affairs, and the China Disabled Persons' Federation in the localities involved in the study: the Haidian District, Chaoyang District, and Fangshan District.

What does the study involve?

Participants will be randomly assigned to either receive a lecture on mental health stigma only or to receive a lecture followed by a session with patients. The lecture will last 1 to 1.5 hours health and patient contact session lasts 1 hour and involves contact with recovery patients with mental illness.

Participants will be interviewed and evaluated by researchers 4 times, each time lasting about 30 minutes. The interview evaluation will discuss background information about participants (such as age) and information on their knowledge, attitude, and behavior about stigma of mental illness and people with mental illness. These evaluations will take place before the lecture, after the lecture/lecture and session, 1 month after intervention, 3 months after intervention.

What are the possible benefits and risks of participating?

A possible benefit of the study is that it will help participants to learn about mental illness and

may improve perceptions and understanding of people with mental illness. Participation may also help to develop appropriate strategies for the treatment of stigma surrounding mental illness and improve the lives and survival of people with mental illness and their families.

Discomfort may be caused by the content of the questionnaires completed by the participants. These are stated for the purpose of assessing stigma related to mental illness. If certain items in the scale cause discomfort, participants may refuse to answer.

Where is the study run from?

The study run from Peking University Sixth Hospital (China) and King's College London (UK).

When is the study starting and how long is it expected to run for?

From November 2016 to March 2019

Who is funding the study?

This study is supported by King's College London – Peking University Health Science Center Joint Institute for Medical Research.

Who is the main contact?

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Contact information

Type(s)

Scientific

Contact name

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Additional identifiers

Clinical Trials Information System (CTIS)

Nil known

Protocol serial number

ECEIRSCSBC01

Study information

Scientific Title

Effect of a contact-based education intervention on reducing stigma among community health and care staff in Beijing, China (ECEIRSCSBC): a pilot randomized controlled study

Acronym

ECEIRSCSBC

Study objectives

A contact-based education intervention reduces the stigma associated with mental illness more than a lecture to community health and care staff.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Approved 07/02/2017, the Peking University Institutional Review Board (Room 501, Yifu Building, Peking University Health Science Center, No 38, Xueyuan Road, Haidian District, Beijing, 100191 China; llwyh@bjmu.edu.cn; +86 10 82805751), ref: IRB00001052-16077

Study design

Double-blind randomized controlled trial.

Primary study design

Interventional

Study type(s)

Prevention

Health condition(s) or problem(s) studied

Stigma associated with mental illness

Interventions

Participants had an equal probability of being assigned to the two groups. The coordinator in each site gave a study number to each participant according to the order in which informed consent was obtained. Using a computer-generated randomization a list was compiled through simple randomization, participants were randomly assigned (ratio 1:1) to the control or intervention group.

Those in the control group received the lecture alone without contact, while those in the intervention group were invited also to stay for a session that followed immediately after this, i. e. the contact session.

Participants will complete questionnaires regarding their knowledge, attitudes, and behavior regarding mental health before the lecture and then after either the lecture (control group) or the session (intervention group), and in face-to-face evaluation sessions at 1 and 3 months follow up.

Intervention Type

Behavioural

Primary outcome(s)

Mental health-related knowledge measured using the Mental Health Knowledge Schedule (MAKS) at baseline, immediately after the intervention, and after 1 and 3 months

Key secondary outcome(s)

1. Mental health-related attitudes measured using The Mental illness: Clinicians' Attitudes (MICA) at baseline, immediately after the intervention, and after 1 and 3 months
2. Intended behavior measured using the Reported and Intended Behaviour Scale (RIBS) at baseline, immediately after the intervention, and after 1 and 3 months

Completion date

28/03/2019

Eligibility

Key inclusion criteria

1. Staff from primary care centers, community committees, Civil Affairs, and China Disabled Persons' Federation
2. Aged between 18 and 60 years
3. More than one year of work experience
4. Literate

Participant type(s)

Health professional

Healthy volunteers allowed

No

Age group

Adult

Lower age limit

18 years

Sex

All

Total final enrolment

121

Key exclusion criteria

Does not meet inclusion criteria

Date of first enrolment

13/12/2018

Date of final enrolment

29/12/2018

Locations

Countries of recruitment

China

Study participating centre

Zhoukoudian Community Health Service Center

No 28 Zhoukoudian Street

Fangshan District

Beijing

China

102400

Study participating centre

Balizhuang Community Health Service Center

No 11 Yanjingxili

Chaoyang District

Beijing

China

100053

Study participating centre

Shangdi Hospital

No.6, Shucun West Road

Nongda South Road

Haidian District

Beijing

China

100084

Study participating centre

Malianwa sub-district office of the Haidian District People's Government

Yard 8, Malianwa Street

Haidian District

Beijing

China

100193

Sponsor information

Organisation

Peking University Sixth Hospital

ROR

<https://ror.org/05rzcwg85>

Funder(s)

Funder type

University/education

Funder Name

King's College London – Peking University Health Science Center Joint Institute for Medical Research

Results and Publications

Individual participant data (IPD) sharing plan

The datasets generated during and/or analysed during the current study are not expected to be made available due to constraints on the data sharing permissions of the samples included in this study, the trialists are not allowed to share the data for public use

IPD sharing plan summary

Not expected to be made available

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article		01/07/2022	16/08/2022	Yes	No
Protocol file	in Chinese version 6		30/08/2022	No	No