

00464 **Correlates of Medical Students' Stigma Toward Mental Illness: A Systematic Review**

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Aims: Stigma towards mental illnesses by healthcare professionals is often cited as a significant barrier for mental healthcare access amongst psychiatric patients. Much of the extant work has focused on addressing attitudes towards psychiatry and psychiatric diseases amongst medical students in psychiatry clerkships. However, a recent review (Stubbs, 2014) has suggested that these prevailing methods of simply providing knowledge and increasing the amount of patient contact time in the psychiatry clerkship are ineffective; and their effects, where present, are unsustainable. The present review thus sought to systematically examine the existing literature on correlates of stigma towards psychiatric conditions amongst medical students to better inform future interventions that seek to address this stigma.

Methodology: The review protocol for this study has been registered at International Prospective Register of Systematic Reviews (Lim & Chu, 2017) and adhered to the PRISMA Guidelines. All articles (up to July 2017) that were archived in PubMed, PSYCInfo, and Cochrane were searched extensively for peer-reviewed publications examining correlates of stigma toward mental illnesses and attitudes toward psychiatry amongst medical students. Articles were independently reviewed by both authors.

Result: 3717 unique articles were found, 84 of which were eventually included in the final review. Close to a quarter of these were from Asia. Findings from the studies were generally classified into demographic, environmental, and psychological correlates. Subsequent qualitative analyses suggested that three larger themes, of culture, experience, and personality, seemed to significantly influence these correlates.

Conclusion: This is the first review to consolidate existing research on the correlates of stigma toward mental illnesses amongst medical students, providing the bases for which future interventions might be developed. However, in striving to develop efficacious and sustainable interventions, it is perhaps key to note that while stigma interventions need to be individualised and culture-specific, it must also be supported in tandem with local government efforts.