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CANCEL CULTURE: THE COSTS TO MENTAL HEALTH

RIPPED APART

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Declaration

The authors declare that they have no relevant material, financial or other interests that relate to the findings described in this report.

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Foreword

Carole Sherwood and Andrew MacLeod have carried out a really useful piece of research showing just how traumatic being cancelled can be. Of the 255 victims in their sample, 80% said their mental health had been adversely affected, with 27% reporting they'd had to take medication as a result. Even more alarming, 20% put themselves in the most severe depression category, compared to just 3% of the general population. Such is the impact of being thrown under a bus for wrongthink.

This comes as no surprise to me – and not just because the Free Speech Union has fought over 6,500 cases and I've talked to many of those people and heard their stories. The wellspring of the idea for the FSU came from my own experience of being cancelled in 2018. I was appointed to the board of the Office for Students, a new higher education regulator, and as soon as it was announced the offence archaeologists set to work, digging through everything I'd said or written trying to find evidence I was an unsuitable person to serve in this public role. Because I've been a provocative journalist for most of my career, it didn't take them long to find a Tutankhamun's tomb's-worth of dodgy material and I started trending on Twitter.

Over the next few weeks I had to resign from one position after another and as I watched my career burn to the ground I longed for advice about what, if anything, I could do to salvage it. Should I get out there in the media and defend myself? Or was it better to lie doggo? Would apologising make things better or worse? Should I seek psychiatric help? Had anyone else been through something similar I could be put in touch with? No such advice was available, partly because cancel culture was still in its infancy. So when I'd recovered, I set about creating the organisation I'd desperately needed when I was at the eye of a Twitter storm. Six years later, demand for the FSU's services has never been higher. We currently get 45 requests for help a week.

The first inkling that my experience was taking a toll on my mental health was when I stepped on the scales about seven days into my cancellation. At this point, a petition demanding that I be sacked from the Office for Students had attracted over 220,000 signatures. I looked down and discovered I'd lost half a stone. In a week! I wasn't eating any less, but the sheer stress of being targeted in this way had led to rapid weight loss – the public humiliation diet. I theorised that it was an atavistic survival mechanism dating back to the Paleolithic period. When you're ex-communicated by your hunter-gatherer band for breaching a sacred taboo, you need to run away as fast as you can before you're ritually slaughtered – and shedding weight means you can run faster.

One source of anxiety was that the haters who were wishing me dead on social media at a rate of about 100 a minute would materialise outside my house, like an actual pitchfork mob in a Hammer House of Horror film. So whenever I left the house I wore a fur trapper hat which covered most of my face as a makeshift disguise. But of course the would-be Torquemadas never appeared in real life. It's a lot easier to join a pile on in the virtual world than it is to confront someone in the flesh.

By the time the dust had cleared about three months later, I'd had to step down from five positions, including my day job running a free schools charity, and my income had been cut in half. With more time on my hands I began to notice that my perception of colours and sounds seemed to have become more intense, so paintings became brighter and music more intoxicating. Was that a trauma response? Hard to say and I never sought a diagnosis, but heightened sensory perception is sometimes reported by people suffering from PTSD. I note that a third of the sample in Carole and Andrew's survey showed signs of PTSD.

"You haven't done anything to deserve this and don't start persuading yourself that you have."

One psychological reaction I experienced which I later discovered is very common was believing that I must deserve the misfortune that had befallen me. I carried out an internal audit of my behaviour dating back decades, searching for reasons why I should be made to suffer. A lecturer in psychology at UCL later explained that I was suffering from the 'just world fallacy' – the belief, very difficult to shed, that the universe is just and nothing good or bad happens without good reason. To preserve this illusion, those who've suffered a major reversal of fortune, as I had, look for things they've done that have brought this on themselves. I eventually discarded this belief, at which point I started to feel a lot better, and the first thing I say to people in the throes of cancellation is: "You haven't done anything to deserve this and don't start persuading yourself that you have."

One thing that emerges from Carole and Andrew's research is just how important your family is when you're going through one of these nightmares. What did the severely depressed have in common? Less support from their families. Without the steadfast loyalty of my wife Caroline, I would have found my own cancellation immeasurably harder to deal with. I pity those who have to cope with such humiliation alone.

So I hope this report is a wake-up call to those who think cancellation is nothing more than holding people to account. Whatever the victims have said or done – and it's nearly always said – they don't deserve to find themselves wriggling at the end of a twitchfork. It's a truly awful experience and we should be grateful to the 255 people who've gone through it for participating in this survey. Perhaps those who read it will think twice next time their finger is hovering over their phone, ready to cast some apostate into outer darkness.

Lord Young of Acton
Director Free Speech Union

1 Executive Summary

We conducted an online survey between June 2025 and April 2026, to investigate people's experience of being cancelled and its relationship to mental health.

The survey contained a range of questions developed specifically for this study, as well as standardised measures of depression, anxiety, stress and post-traumatic stress.

Respondents were invited to describe their experiences of cancellation. 255 respondents who had experienced cancellation were recruited through the Free Speech Union and several other organisations. The sample was predominantly highly educated, middle aged to older men and women who mostly described themselves as heterosexual, white British, and were more right-than-left leaning. Employment, marital status, religion and the presence of dependents varied across the sample.

Key findings:

- Cancellation took place in several different settings. The workplace was the most common, followed by friendship groups and at university. Other settings included the charity sector, volunteering, social media, social clubs, political parties, the arts, professional membership bodies and regulators [see Appendix 3 for full list]. 20% of the sample said their cancellation spanned more than one context.
- Views on gender identity and, to a lesser extent, race, were common reasons for cancellation but there was a wide variety of other reasons, including political views and views on Covid-19, Islam, immigration, Brexit, and support for Israel.
- Respondents reported that cancellation had marked negative effects on their lives, with over 80% saying that their everyday lives had been affected. Just over half the sample said that their career had been affected, with 27% reporting they had lost their livelihood.
- In terms of support, a majority of the sample said they could rely on family. This number was lower for friends and markedly lower for colleagues.
- Respondents described striking effects on mental health. Over 80% said their mental health had been affected. One third said they had sought help from a mental health professional and 27% reported they had taken medication as a result of the cancellation.
- Reported effects on mental health were supported by standardised measures of psychological distress. These showed significantly elevated levels of depression, anxiety and stress compared to general population scores. Over one third of the sample also displayed traumatic responses to their cancellation indicative of Post-Traumatic Stress Disorder.
- A sub-group of about 20% of the sample scored in the most severe depression category (compared to the 3% reported in a general population sample). This sub-group, who also had very high rates of traumatic response, were more likely to have had careers affected or to have lost their livelihoods and experienced damage to relationships and less support from family members.
- We conclude that cancellation is a destructive force that harms psychological health, disrupts the workplace and other environments and presents a risk to wider society through the breakdown of social bonds and trust.

“As far as I can see, cancel culture is mercy’s antithesis.”

Nick Cave, The Red Hand Files, August 2020

2 Introduction

What is cancel culture?

"A way of behaving in a society or group, especially on social media, in which it is common to completely reject and stop supporting someone, especially because they have said something that offends you".
Cambridge English Dictionary

"A form of public shaming in which groups or individuals swiftly denounce and campaign against a target, often using social media."
EBSCO

There are many definitions of 'cancel culture' but it is hard to find one that adequately captures its punitive nature or the fear and self-censorship that has grown around it.[1(p29)] The two definitions shown above, give some sense of what being cancelled might involve: rejection, denouncement, public shaming and withdrawal of support from someone who has said something considered 'offensive'.

What these definitions do not tell us, though, is the effect cancellation has on the lives, careers, reputations and mental health of those who are rejected, denounced and shamed. That is the purpose of this survey. To our knowledge, it is the first survey to explore the effects of cancellation on members of the public, with a specific focus on their mental health.

Historical roots of public shaming

Cancel culture may appear to be a modern phenomenon, but it has ancient roots. Throughout history and across cultures, public shaming and ostracism have been used to punish transgressions and enforce social order.[2] The ancient Greeks ostracised individuals considered a danger to the state, temporarily sending them into exile, while the Puritans in New England used public shaming and exclusion to enforce moral codes.[3] According to Stemper,[2] public shaming "exploits the human fear of social exclusion and loss of reputation to instigate behavioural change or send specific messages". These shaming practices not only punish the individual but also act as a warning to others.

Cancellation in the modern age

Public shaming and ostracism in Western societies still exist as methods of social control, but have evolved from the confines of local market squares and the stocks and floggings of earlier times. Starr[3] argues that, nonetheless, "the underlying mechanisms of public accountability and collective punishment remain strikingly similar".

Developments in digital technology now allow perceived transgressions to be shared and disseminated rapidly, via the internet, to the global 'public square' of social media. Posting something on social media that others consider offensive may result in an online 'mobbing' which has the power to affect an individual's career, reputation, and psychological well-being in a devastating way.[3]

At the same time, according to Campbell and Manning[4] our society has moved from a dignity-based culture, valuing resilience and stoicism, to a victimhood culture where offence is in the eye of the beholder and, as Lukianoff and Haidt[5] point out, feelings are considered more important than facts, and the world is viewed as a battle between good and evil people.

These changes have coincided with what Andrew Doyle describes as 'a new identity-based conceptualisation of 'social justice'"[a] which he argues has "brought with it a mistrust of unfettered speech and appeals for greater intervention from the state".[6(p2)] In other words, free speech is now under threat.

a "What do we Mean by Critical Social Justice" Helen Pluckrose, First published by Counterweight in March 2021.

The costs of cancel culture

US clinical psychologist Chloe Carmichael[7(p5)] makes the case that "Free speech is not just a legal issue" but a "psychological one" and argues that self-censorship is becoming a mental health crisis. Carmichael cites research showing how, over time, self-silencing and fears of being ostracised "particularly around socially sensitive or value-laden topics" have been found to "contribute to anxiety, diminished self-efficacy, emotional numbing and relational strain".[7(p5)] She makes the point that "the ability to speak openly, without fear of exile, is essential for personal well-being and creating a resilient society".[7(p7).]

Many people whose experiences have come to public attention in recent years, were cancelled for failing to conform to contested ideologies such as gender identity and anti-racism. These include philosopher Kathleen Stock, academic Jo Phoenix, writer Graham Linehan, and writer and teacher Kate Clanchy. Their harrowing accounts of ostracism, harassment, abandonment and betrayal are testament to the damage cancellation can, and often does, cause – to livelihoods, reputations, careers, families, friendships and to mental health.

In her book Hounded[8], Jenny Lindsay details the multiple harms caused to women who question the claims of gender identity ideology. Jon Ronson also documents a series of case studies revealing the cruelty of cancel culture and the harm it causes.[9] Similarly, recent reports from Freedom in the Arts[10,11,] and Matilda Gosling[12] for Sex Matters and SEEN in Publishing describe the psychological costs of both cancellation and self-censorship.

Human beings have a strong need to belong, and social exclusion comes at a high cost. Baumeister and Leary's[13(p497)] seminal research proposed that the need to belong is a "powerful, fundamental, and extremely pervasive motivation" which is important to psychological well-being. In human history, survival depended on co-operation within a group and social bonds provided protection against external threats.

The negative consequences of social exclusion, including ostracism, rejection, bullying and discrimination, are well documented in research.[14,15] Threats to social bonds such as exclusion and rejection are associated with psychological distress including anxiety and depression. In fact, 'social pain' has been found to share common physiological mechanisms with physical pain and is thought to be an alarm system for social threats to survival.[16]

Professor of Psychology Dean McKay[17(p15)] warns that "punishing social conditions are now in danger of generating new mental health disorders". He explains that fear of being cancelled is now emerging as an anxiety disorder variant which he names Akyrónophobia from the Greek word meaning 'to nullify'. McKay points out that cancel culture can result in a range of anxiety disorders and that these "should be viewed as cautionary examples of how public discourse and mob-inspired desires for retribution can indirectly inflict pain and suffering on innocent individuals."[17(p17)]

The ultimate harm that cancellation may cause is to contribute to an individual's suicide. There have been several tragic instances where people who have experienced cancellation have subsequently taken their lives. While it is important to acknowledge that suicide is a complex phenomenon that cannot be attributed to a single cause or factor, we believe that these cases raise serious questions about the extent to which cancellation impacts mental health.

Summary

In summary, cancel culture is a phenomenon with roots that date back in history to the use of public shaming and ostracism to punish transgressions and preserve social order. A considerable amount of anecdotal evidence exists suggesting that cancellation is prevalent and that it is driven, in part, by widespread use of digital technology. Psychologists have raised concerns about the risks to mental health of self-censorship and the fear of cancellation. This study is, we believe, the first of its kind to systematically examine the effects on mental health of the experience of cancellation.

3 Background to the research

- An online survey was created, using Qualtrics, with the aim of gathering information about experiences of cancellation and how it may affect mental health. Survey questions were compiled by a team of researchers, based on publicly and personally reported experiences of cancellation and existing literature on ostracism. The survey comprised both fixed-format and open-text questions. The latter were designed to give respondents the opportunity of providing more detailed information about their personal experiences of cancellation and how it had affected their lives and mental health.
- Consultations were then conducted with: (i) Free Speech Union who have extensive experience of working with people who have been cancelled, and (ii) individuals with personal experience of cancellation. Based on these consultations, additional questions were added to the survey while others were clarified and simplified.
- We defined cancellation as: including, but not limited to, any of the following happening in response to you saying or doing something to which others objected: being bullied; harassed; ostracised; suspended from work or a university course; loss of income or income earning opportunities; loss of reputation; loss of friendship; exclusion from a friendship group; online or public 'mobbing'.
- Two standardised measures were included in the survey to assess mental health, one to measure levels of depression, anxiety and stress and the other to assess the presence of traumatic response to the experience of being cancelled.
- The survey was designed, conducted and overseen by a highly experienced team of researchers and clinicians adhering to the British Psychological Society Code of Human Research Ethics, April 2021.[18] Only adults aged 18 and above could take part. A participant information sheet was provided, [Appendix 1]. Those who took part did so anonymously and were informed they could withdraw from the survey at any point. It was clearly stated that clicking on the link to the survey meant that participants were consenting to take part. A debriefing sheet was provided at the end of the survey, giving contact details for organisations that could offer help and support. [Appendix 2]
- The online survey was launched by the Free Speech Union (FSU) on 27 June 2025 and ran until 6 April 2026. It was promoted in the FSU's weekly and monthly newsletters to members. The survey was also promoted in the Daily Sceptic, on X (social media), and through organisations whose members may have experienced cancellation, including: Academics for Academic Freedom; Academy of Ideas; Centre for Male Psychology; Don't Divide Us; Freedom in the Arts; New Culture Forum Locals; Student Academics for Academic Freedom; Thoughtful Therapists; Women's Rights Network; and #Together.

4 The Research

What was in the survey?

Demographics

A range of demographic information was collected to enable us to give a clear picture of who the respondents were. As well as age and sex, these questions covered sexual orientation, marital status, ethnicity, presence of dependents, employment, education and disability. We also asked respondents about political orientation.

Characteristics of the cancellation

A series of questions was aimed at obtaining a clear picture of the cancellation. These questions covered where it happened, what it was about, and how long ago it was. As well as fixed-answer questions, respondents were also asked to describe in their own words what happened, when and where it happened, who was involved, and so on.

How the cancellation affected respondents

Respondents were asked a series of questions, designed for this survey, about whether their mental health had been affected and whether they had taken medication or sought help from a mental health professional. We also asked about relationships – whether family, friends and workplace colleagues were supportive – and damage to relationships with family and friends. Two questions asked about whether the respondent's career had been affected and whether they had lost their livelihood as a result of being cancelled.

Again, in addition to the fixed-format responses, respondents were able to describe the impact on their lives in their own words, as well as describe any disputes, either ongoing or resolved, arising from being cancelled and say what, if anything, had helped.

We also asked people to say to what extent they felt they had recovered from the experience.

Measures of depression, anxiety, stress and trauma

As well as questions about mental health and help-seeking developed for the survey, we included two standardised measures assessing levels of depression, anxiety and stress: the Depression, Anxiety and Stress Scale, short form (DASS-21)[19]; and trauma-related responses using the Impact of Events Scale-Revised (IES-R).[20] These measures allowed us to make comparisons with other populations, including the general population.

The DASS-21 is a commonly used measure to assess levels of depression, anxiety and stress in the general population, as well as being used in clinical populations. In addition to a total score, it provides ranges of what are defined as "normal" levels through to "extremely severe". Categories are based on scores on the longer form (DASS-42), and scores on the DASS-21 need to be doubled for equivalence and match scores to the categories of severity.[19] Scores do not in themselves provide a diagnosis of anxiety or depression.

The IES-R[20] is a widely used instrument for assessing a range of responses to a traumatic event. Total scores are made up of items measuring intrusion e.g., "Any reminder brought back feelings about it"), avoidance (e.g., "I tried not to think about it") and hyperarousal.(e.g., "I had trouble falling asleep"). The diagnostic criteria for Post-Traumatic Stress Disorder (PTSD) were revised in the Diagnostic and Statistical Manual of Mental Disorders, 5th Edition (DSM-5)[21], in 2013, but the IES-R continues to have utility in screening for PTSD symptoms and is listed by the US National Center for PTSD. It remains a widely used instrument which enables comparison with previous published studies. In the current survey it was not used to make claims about firm diagnosis of PTSD, but rather to illustrate the extent of traumatic response symptoms.

5 Findings

Who took part?

A total of 382 people responded to the survey between 27 June 2025 and 6 April 2026. Due mainly to missing data and cases not meeting criteria, the final sample consisted of 255 respondents. There was some variability in numbers across questions due to additional small amounts of missing data. There were 110 males and 144 females with a median age of 58 (range = 18 to 84). The majority of the sample (64%) fell between the ages of 50 and 70.

Ethnicity

The sample was mainly white (92%), with 78% identifying as White British, 8% as White European and a further 6% as another white ethnicity (e.g., White Scottish, White English, White Australian). Three percent described themselves as Mixed Ethnicity and the remaining 5% consisted of a wide variety of ethnicities.

Sexual orientation and marital status

A large majority (84%) described themselves as Straight/heterosexual, 13% were evenly divided between Lesbian, Gay and Bisexual, with the remainder indicating Other or declining to say

Just over half the sample (52%) were married/in a civil partnership/living with partner, 15% were divorced or separated, 30% single and 4% widowed.

Dependents

58% indicated the presence of dependents. Respondents were able to indicate more than one type of dependent, and, either singly or jointly, 68% of those who said they had dependents indicated children, 18% parents and 42% spouse.

Employment

The majority of the sample (56%) were in employment, with 7% unemployed. 22% had retired, and the remainder were either in education, looking after home and/or family, or indicated Other. The Other category contained a variety of responses.

Education

Overall, the sample was highly educated, with 50% educated to postgraduate level and a further 26% to degree level. 5% endorsed Other, such as professional qualifications or other types of diplomas or certificates. The remainder were divided between two levels of school education or no formal education.

Political orientation

Political leanings to the right made up almost half the sample (25% Right and 25% Moderate Right). 21% described their political leanings as Centre, 13% as Moderate Left and 8% as Left. The 8% who endorsed Other did so for a variety of reasons, including no political alignment.

Religion

46% indicated Christian as their religion and 40% indicated that they had no religious belief. A very small number indicated Jewish (3%), Buddhist (<1%) or Hindu (<1%), with 9% selecting Other unspecified. No one indicated Sikh or Muslim.

Disability

Over one third of the sample (N= 87, 34%) indicated that they experienced a disability or had been diagnosed with a neurodiverse condition, with 7% of the total sample describing autism or ASD and 4% ADHD. The remaining 23% who indicated disability described a variety of causes, including chronic pain.

Summary of who took part

The group that took part was predominantly highly educated, middle aged to older men and women who mainly described themselves as Straight/heterosexual, white British, and were more right- than left-leaning. A large number described themselves as Christian, but an almost equally large number said they had no religion. Employment, marital status and the presence of dependents was varied across the sample.

Characteristics of the cancellation

How long ago was it?

There was a wide range of time since cancellation, from 1 to 551 months, with a median of 36 months. Figure 1 shows respondents broken down by length of time since their experience of being cancelled. As can be seen, people were distributed reasonably evenly across these categories.

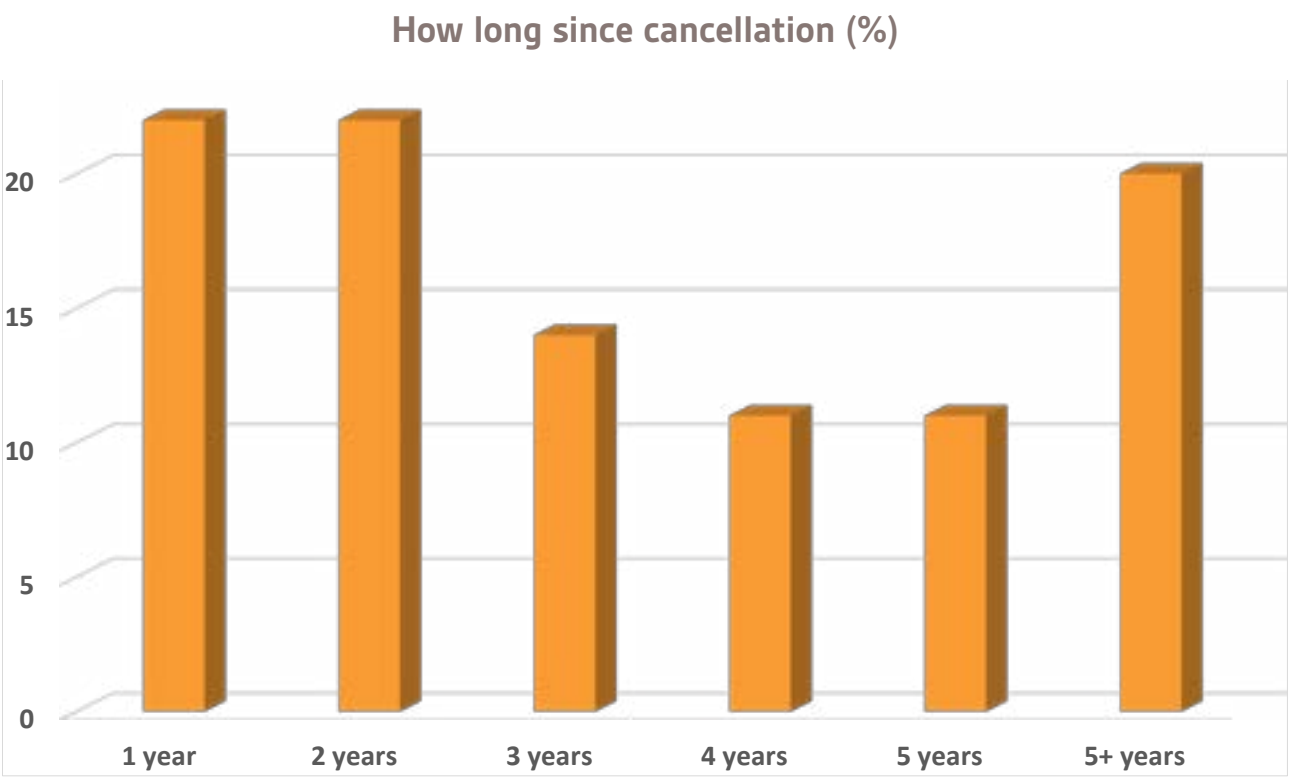

Figure 1. Percentage of respondents by time since cancellation

Where did it take place?

Respondents could endorse more than one option from Workplace, University, School, and Amongst Friendship Group, as well as describing any other context. Figure 2 shows the total numbers endorsing each of the categories. Of the named categories, Work was most prominent, followed by Friendship Group then University. Elsewhere was commonly endorsed and represented by a wide range of contexts, including charity volunteering, online, political parties, arts (writing, performing) and professional membership bodies. Note that, the numbers do not add up to the sample size because people were able to name more than one context. 50 people (20% of the sample) said the cancellation occurred in more than one context.

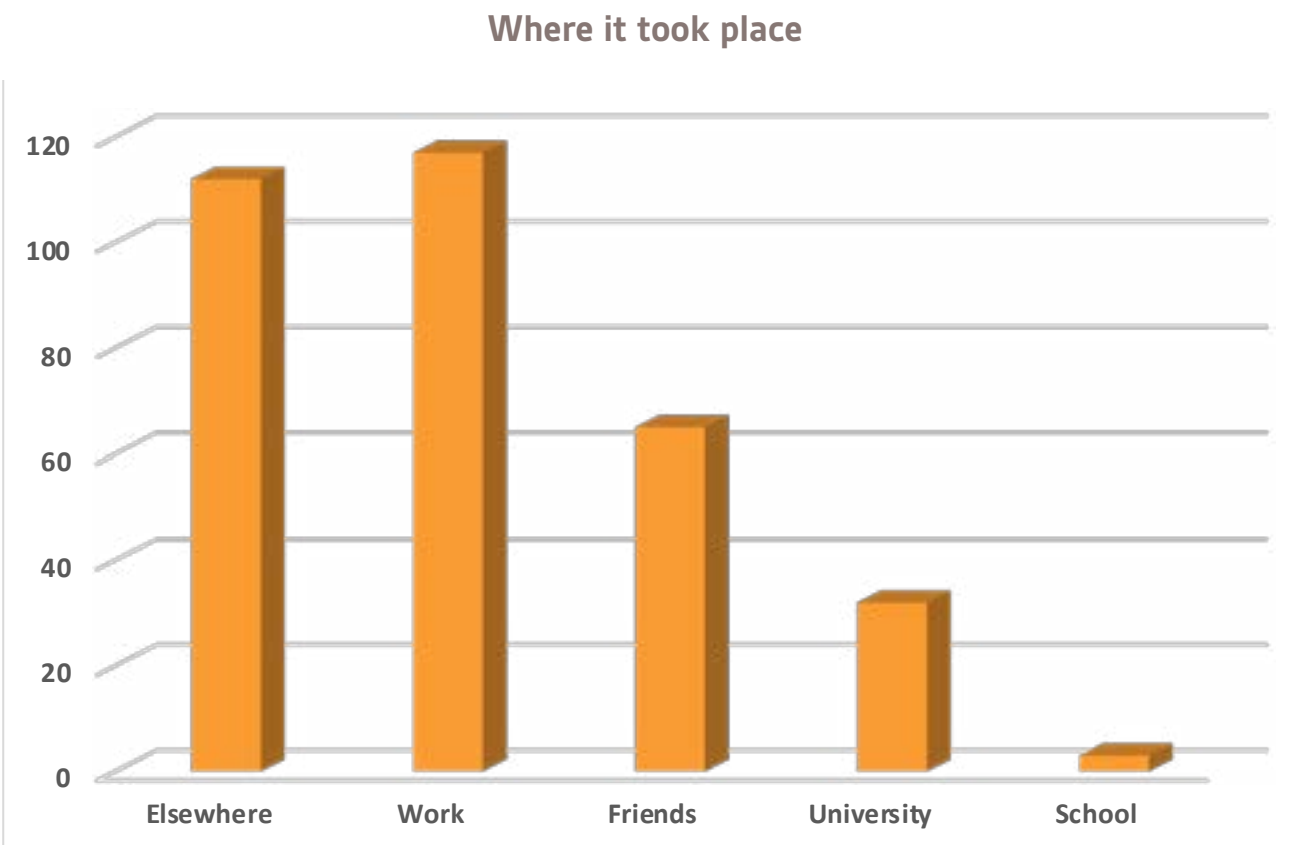

Figure 2. Number of respondents who mentioned each type of cancellation context

What was it about?

Respondents were asked if their cancellation was related to their views on Race, Gender identity, Sex or Other. They were able to indicate more than one. Figure 6 shows that each of the three named categories received substantial responses, with Gender identity being particularly prominent. A variety of Other contexts were named, including Covid-19, politics, immigration, Islam, Brexit and Israel, among others.

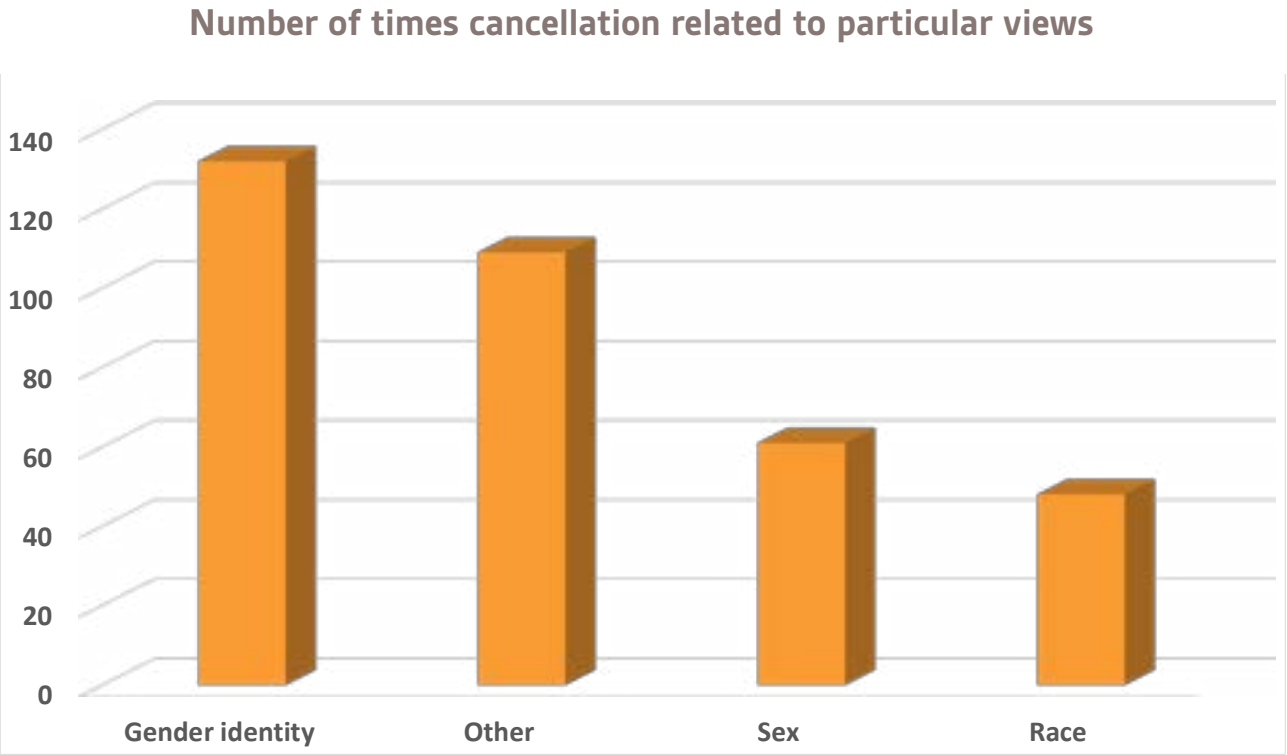

Figure 3. Number of times cancellation was said to be related to particular views.

In summary, our respondents indicated experiences of cancellation that spanned a wide range of time and related to a wide range of issues, with gender identity most prominent. The cancellation occurred in a wide range of contexts, with work and friendship groups being common.

How did respondents think the cancellation affected them?

Mental health, everyday life, and social support

The survey asked respondents to say whether the experience of cancellation affected their mental health, affected their everyday life, whether they could rely on family for support, whether friends stood by them and whether they could rely on workplace colleagues.

There were strong self-reported effects on mental health and everyday life, with the vast majority (85%) agreeing either somewhat or strongly, that their mental health had been affected and 82% agreeing that their everyday life had been affected. 65% agreed that they could rely on family members. Friends standing by them was lower (48%) and workplace colleagues being supportive, substantially lower still, at 16%.

The distinction between family and friends was further reinforced by two questions that asked respondents to rate on a scale of 0 (not at all) to 10 (completely) to what extent cancellation had damaged their relationships with family and damaged relationships with friends. The mean score for the family question was 3.6 whereas for friends it was 5.3. A substantial number of respondents (30%) said it was not at all the case that cancellation had damaged family relationships, whereas this was only the case for 7% when asked about damage to friendships.

On simple yes/no questions, 33% of the sample said they had sought help from a mental health professional as a result of the cancellation, and 27% said they had taken medication as a result of it.

Livelihood and career

Asked a simple yes/no question about whether their careers had been adversely affected, just over half the sample (56%), said that they had. A smaller, but substantial, group (27%) said that they had lost their livelihoods.

Recovery

Respondents were asked to rate on a on a scale of 0 (not at all) to 10 (completely) to what extent they felt they had recovered from cancellation. The mean was 5.8 (SD = 2.7) and Figure 4 shows the percentages of people who endorsed each point on the scale

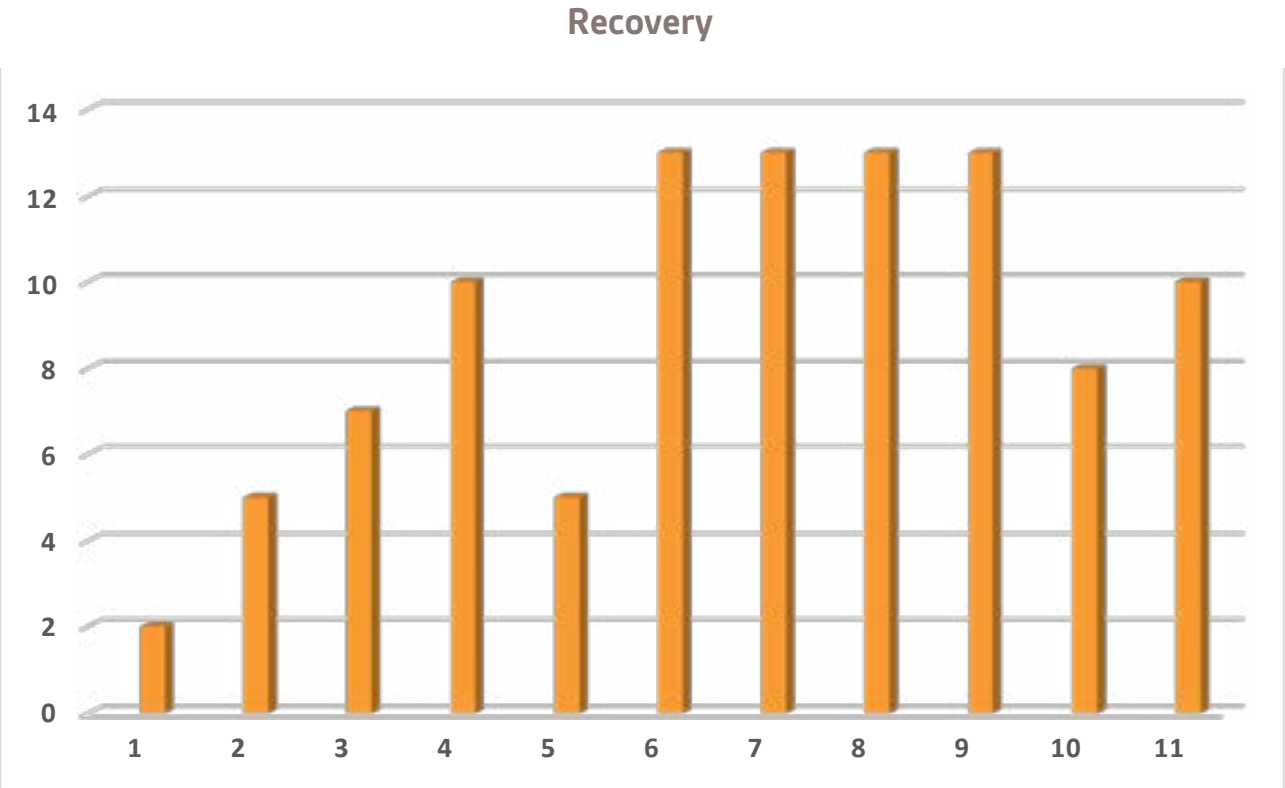

Figure 4. How much people felt they had recovered (0 = not at all to 10 = completely).

Interestingly, there was no relationship between level of recovery and time elapsed since the cancellation occurred.[a]

a Correlation between recovery rating and time since cancellation close to zero ($r(221) = .07$, $p = .279$).

Self-reported mental health using standardised psychological measures

The survey question responses indicated clear and strong effects on mental health from the experience of being cancelled. Two additional, standardised psychological measures gave a fuller picture of mental health effects and the ability to compare how the well-being profile of the sample compared to scores that people would normally be expected to show. The DASS21[19] gives measures of depression, anxiety and stress and the IES-R[20] provides an indication of a trauma-like response to being cancelled.

How did respondents score on measures of depression, anxiety and stress?

As is standard practice, scores on the DASS-21 were doubled in order to be able to compare with the published norms based on the longer form DASS [19].

Figure 5 shows the mean scores for the cancellation sample DASS-21 scores compared to means reported from a large UK general population, also based on multiplying DASS-21 scores by two.[22] The cancellation sample scored substantially higher than the general population sample on all three dimensions.[b]

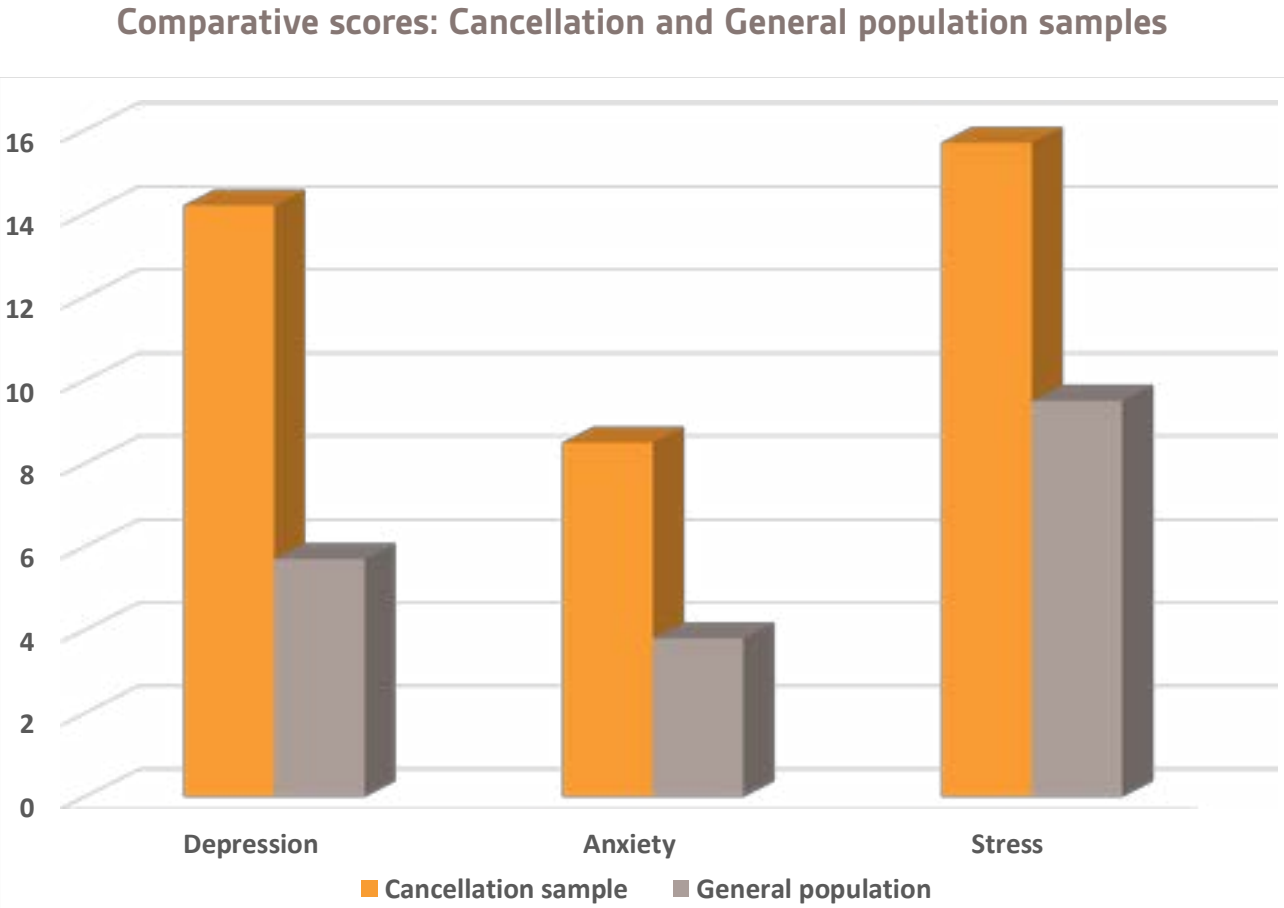

Figure 5. Comparison of cancellation sample and general population sample on mean scores on the DASS-21.

b Using one-sample t-tests, the cancellation sample are significantly higher on all three dimensions: Depression, $t(199) = 9.8$, $p < .001$, $d = .68$; Anxiety, $t(199) = 7.3$, $p < .001$, $d = .51$; Stress, $t(199) = 8.8$, $p < .001$, $d = .62$.

A different way of examining the data is to look at the percentages of people in our sample who have scores falling into different categories of severity as defined by Lovibond and Lovibond.[19]

Figures 6a,6b and 6c show the percentages of our sample falling into each category compared to the general populations sample.[22]

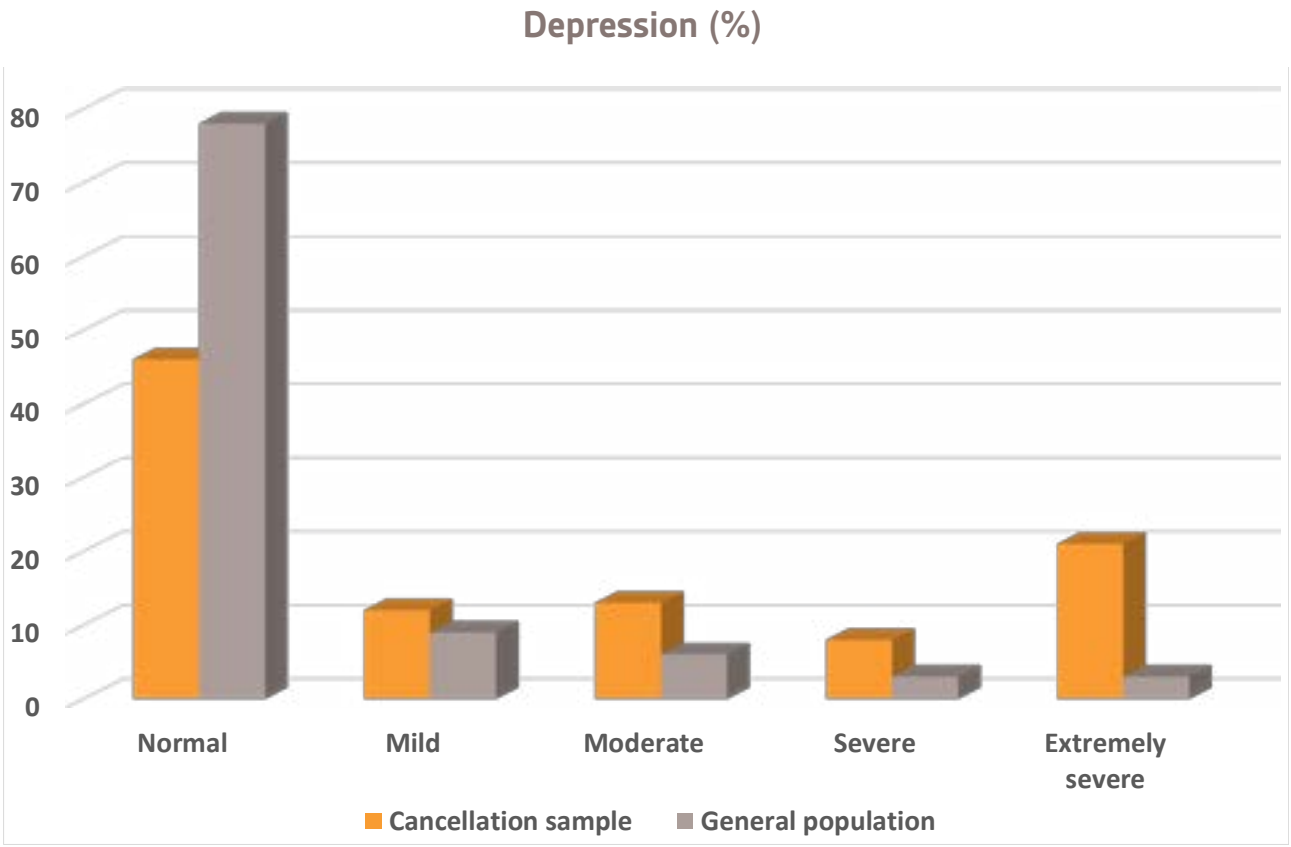

Figure 6a. Percentages in the cancellation sample and general community sample falling into categories of severity for depression

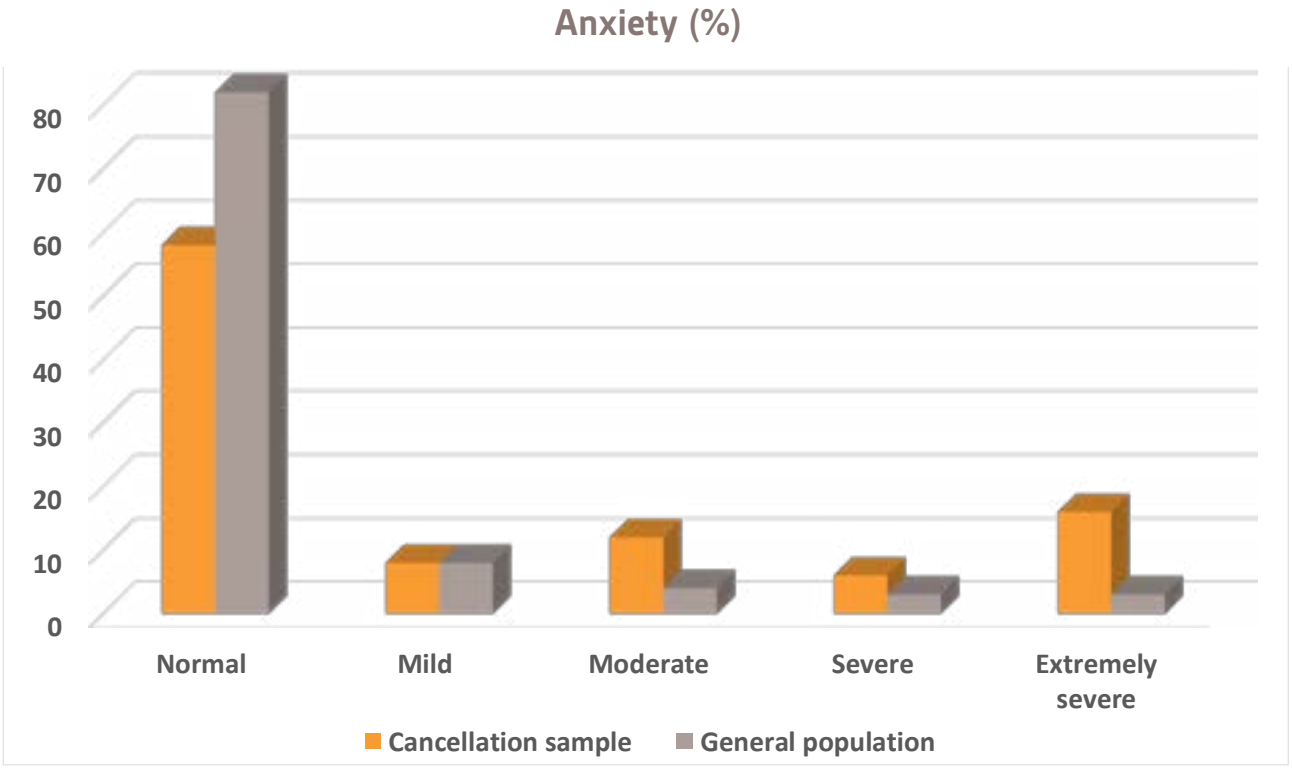

Figure 6b. Percentages in the cancellation sample and general community sample falling into categories of severity for anxiety

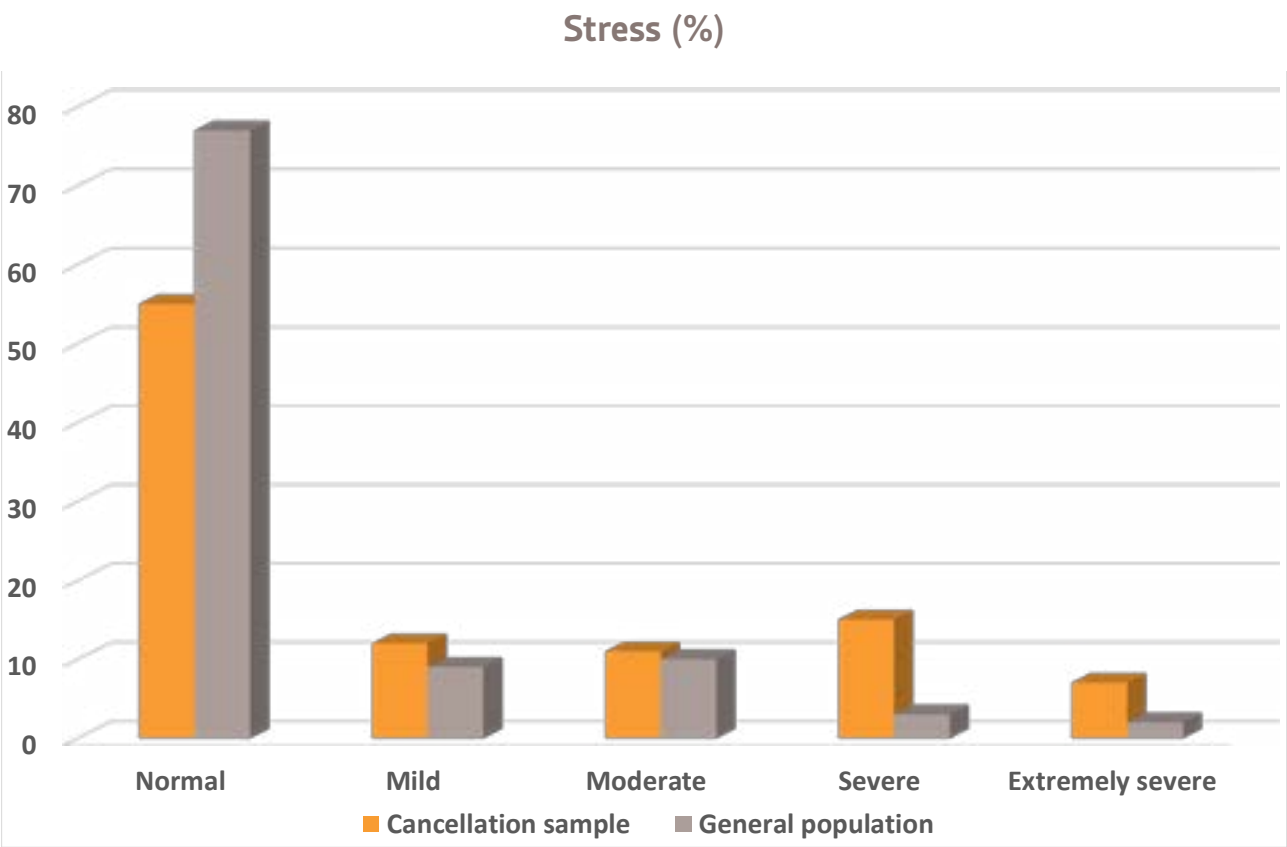

Figure 6c. Percentages in the cancellation sample and general community sample falling into categories of severity for stress.

There is a contrast in most categories, but this is particularly striking for the relative lack of people in our sample scoring in the Normal range and the elevated number scoring in the Extremely Severe range for anxiety and depression: the general population sample has 3% of people in both of those extremely severe categories whereas our sample has 21% and 16% for depression and anxiety, respectively. For stress, the pattern is similar.[c]

In summary, our sample showed, on average, significantly higher levels of depression, anxiety and stress than a general population sample. This is strikingly illustrated by the relatively large subgroup in the cancellation sample who were in the extremely severely depressed, anxious and stressed categories compared to what is found in the general population sample, where those levels were very uncommon. These differences were mainly offset by a much smaller proportion of our sample in the Normal ranges.

c The differences in the two samples falling into the Extremely severe and Normal categories are statistically significant: Depression ($x^2(1) = 163.0$, $p < .001$, $V = .32$); Anxiety ($x2(1) = 103.2$, $p < .001$, $V = .25$); Stress ($x2(1) = 28.5$, $p < .001$, $V = .14$).

How did respondents score on a measure of trauma?

A total score of 33 or over on the IES-R is seen as indicative of the presence of probable PTSD.[23] A score of 37 or more is also sometimes taken as indicating the presence of severe traumatic symptoms.

The mean score in the cancellation sample was 27.6 (Sd = 19.7). So, on average, respondents did not meet the threshold for traumatic response symptoms. However, a substantial sub-sample (38%) scored 33 or over, indicating the presence of probable PTSD, with 90% of those exceeding the threshold for severe symptoms.

For comparison, Figure 7 shows the scores of the cancellation sample in comparison with two other groups who have undergone traumatic experiences. On the left-hand side are the IES-R scores of the Cancellation sample compared with scores from a sample of Vietnam veterans, almost half of whom were confirmed cases and already in treatment with the remainder showing varying levels of PTSD[24]. The second set of two bars shows the cancellation sample compared to a sample of people who had been involved in serious road traffic accidents and whose emotional response included "intense fear, horror, helplessness or the perception that they would die" [25 (p189)]. Thus, both samples were already selected for having high rates of PTSD.

In each case the cancellation sample did score lower than the other two groups[d]. There was overlap, however, with 7% of the cancellation sample scoring higher than the mean of the veteran's group and 35% scoring higher than the mean of the road traffic accident survivors group.

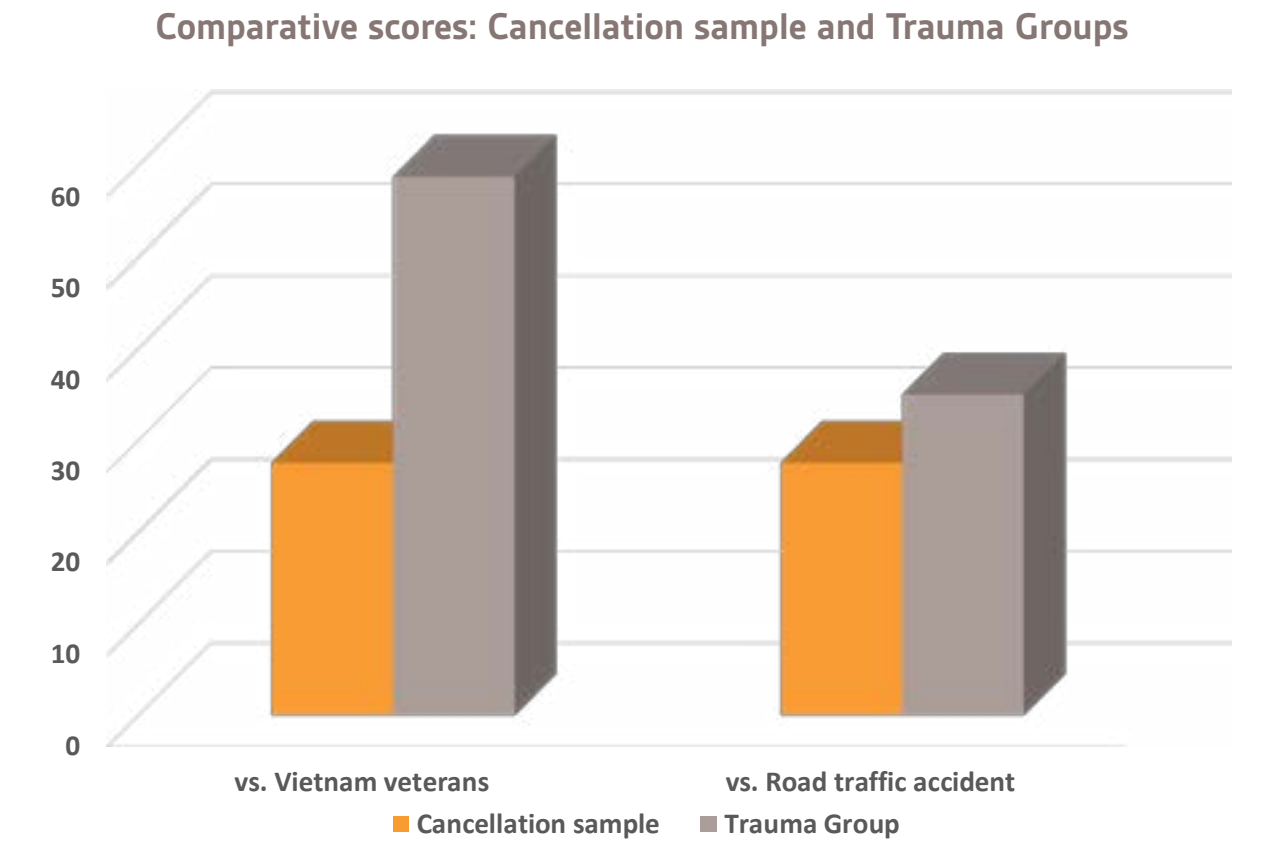

Figure 7. IES-R scores of the cancellation sample compared to Vietnam veterans and those who had experienced a road traffic accident.

In summary, our sample showed notable levels of indicative PTSD, although those levels are lower than groups that have experienced more standard traumatic events and are already selected for the presence of PTSD symptoms – much lower than a combat stress group but closer to a group of people who have survived a serious road traffic accident.

d The cancellation sample score statistically significantly lower than each of the other two groups ($t = (186) = 21.7$, $p < .001$, $d = 1.59$ for Vietnam veterans and $t(186) = 5.1$, $p < .001$, $d = .38$ for road traffic accident survivors).

The aftermath of cancellation and respondents' outcomes

There appears to be within the sample, a sizeable subgroup who experience very high levels of depression, anxiety and stress, as well as clearly showing symptoms of PTSD. To investigate this further, we looked at responses to questions in the survey about the aftermath of cancellation, such as effects on career, livelihood and relationships. In this final section we examine whether any of these effects were related to levels of depression. To address this question, we compared the 41 people in the Extremely Severe depression group to those in the Normal levels of depression group on these "aftermath" variables. For ease of use we refer to the those in the Extremely Severe category as Depressed and those whose scores fell within the Normal level as Non-depressed. We chose levels of depression to define groups as being most or least affected, but it is worth noting that these groupings also relate closely to traumatic stress scores – of the 41 respondents scoring in the Extremely Severe depression range, 36 of them also scored on the IES-R as having probable PTSD.

Livelihood and career

Those who had their career affected or had lost their livelihood were disproportionally likely to be in the depression group, compared to those who had not.[e] Figure 8 illustrates these relationships, with 41% of the Depressed group saying that they had lost their livelihoods, compared to 20% of the Non-depressed group. Nearly half (47%) the Non-depressed group said that their careers had been affected but this figure was even higher (76%) in the Depressed group.

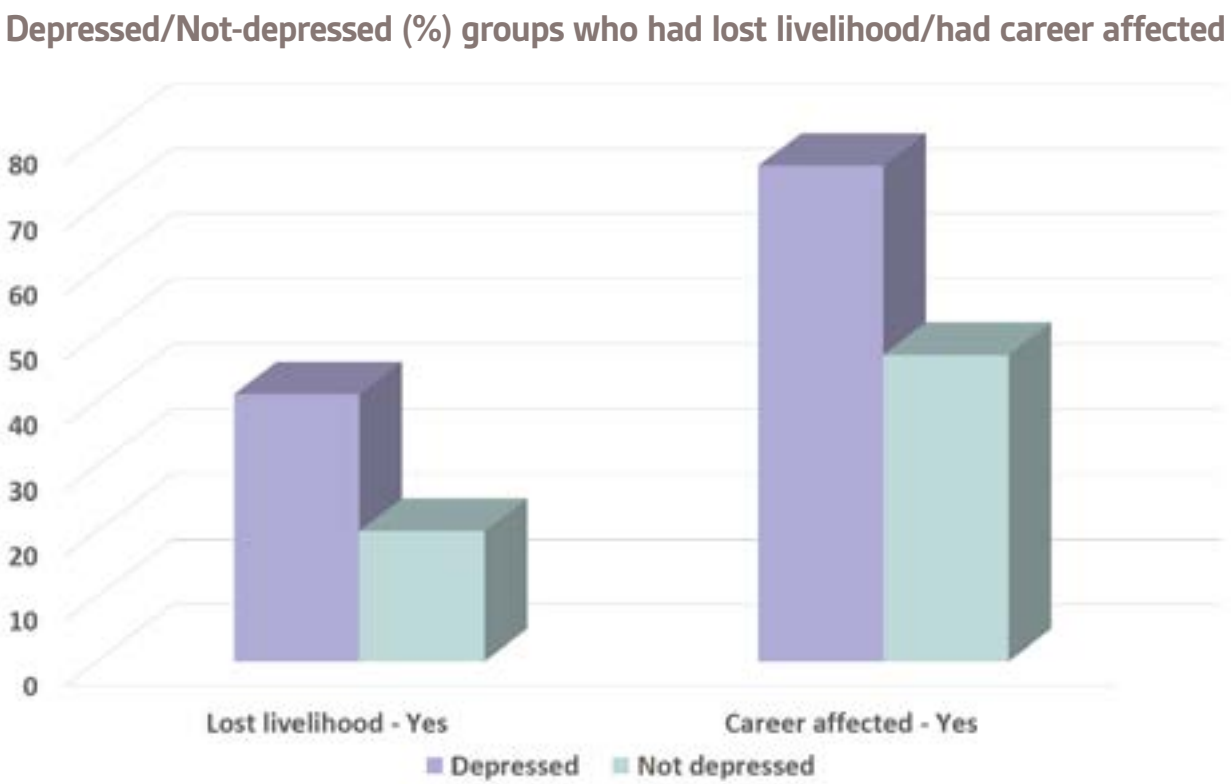

Figure 8. Percentages of Depressed and Not-depressed groups who said that they had lost their livelihood and who said that their career had been affected.

e The association between having career affected and depression ($x^2(1) = 9.6$, $p = .002$, $V = .27$) and loss of livelihood and depression ($x^2(1) = 6.4$, $p = .011$, $V = .22$) were statistically significant.

Relationships

Those in the Depressed group said they were less able to rely on their family and to some extent rated colleagues as less supportive. The difference on friends standing by them was smaller and not reliable.[f]

Figure 9 shows the means for the two groups on each of those variables.

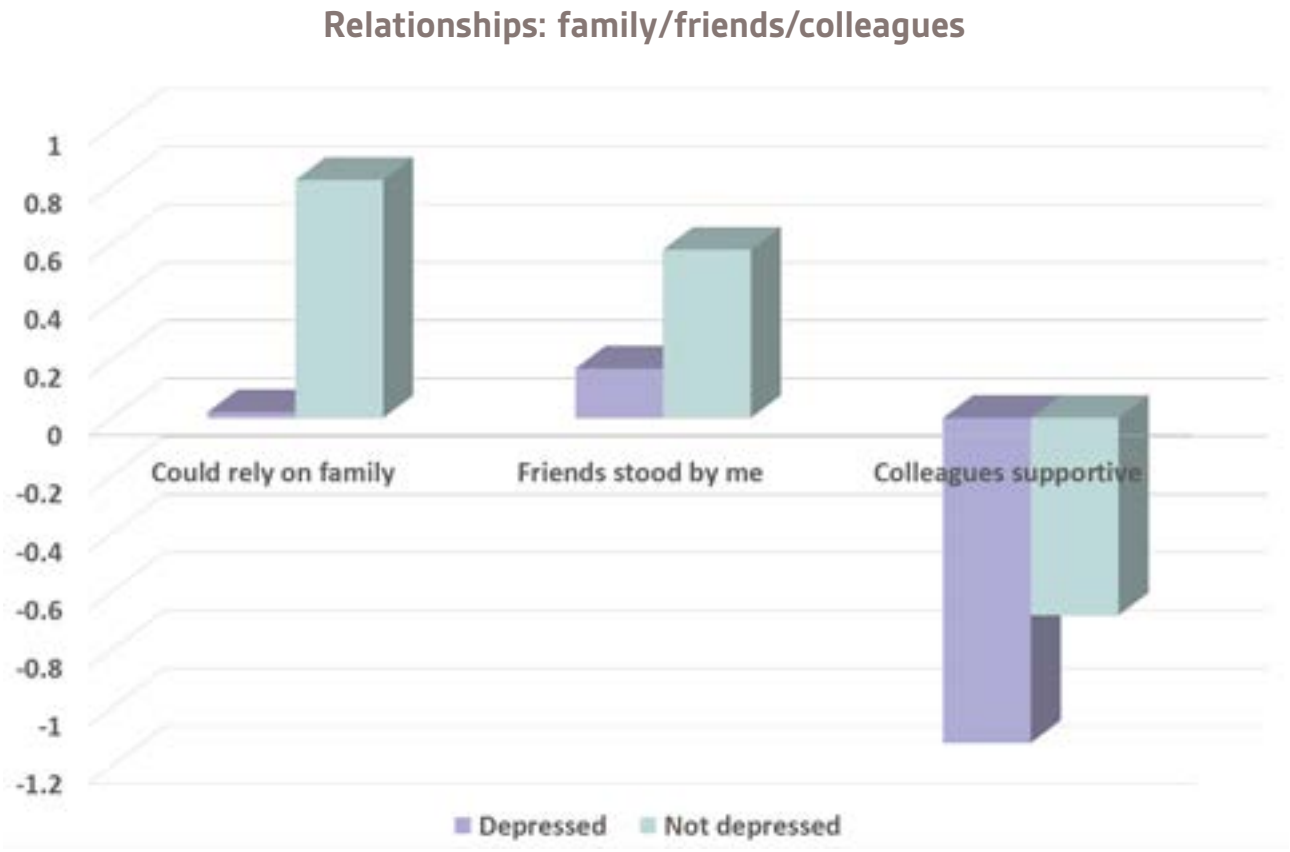

Figure 9 Means for agreement (ranging from -2 to +2) with statements about family, friends and colleagues.

f Depressed significantly lower on reliance on family ($t(56) = 2.4$, $p = .020$, $d = .52$), are not significantly different on friends standing by them ($t(120) = 1.6$, $p = .120$, $d = .31$), and showed a trend towards being significantly lower on colleagues being supportive ($t(81) = 1.70$, $p = .079$, $d = .31$).

Finally, Figure 10 shows the means of the two groups for questions about damage to relationships with family and with friends. The Depressed group reported greater damage to family relationships as well as a smaller effect on friendships.[g]

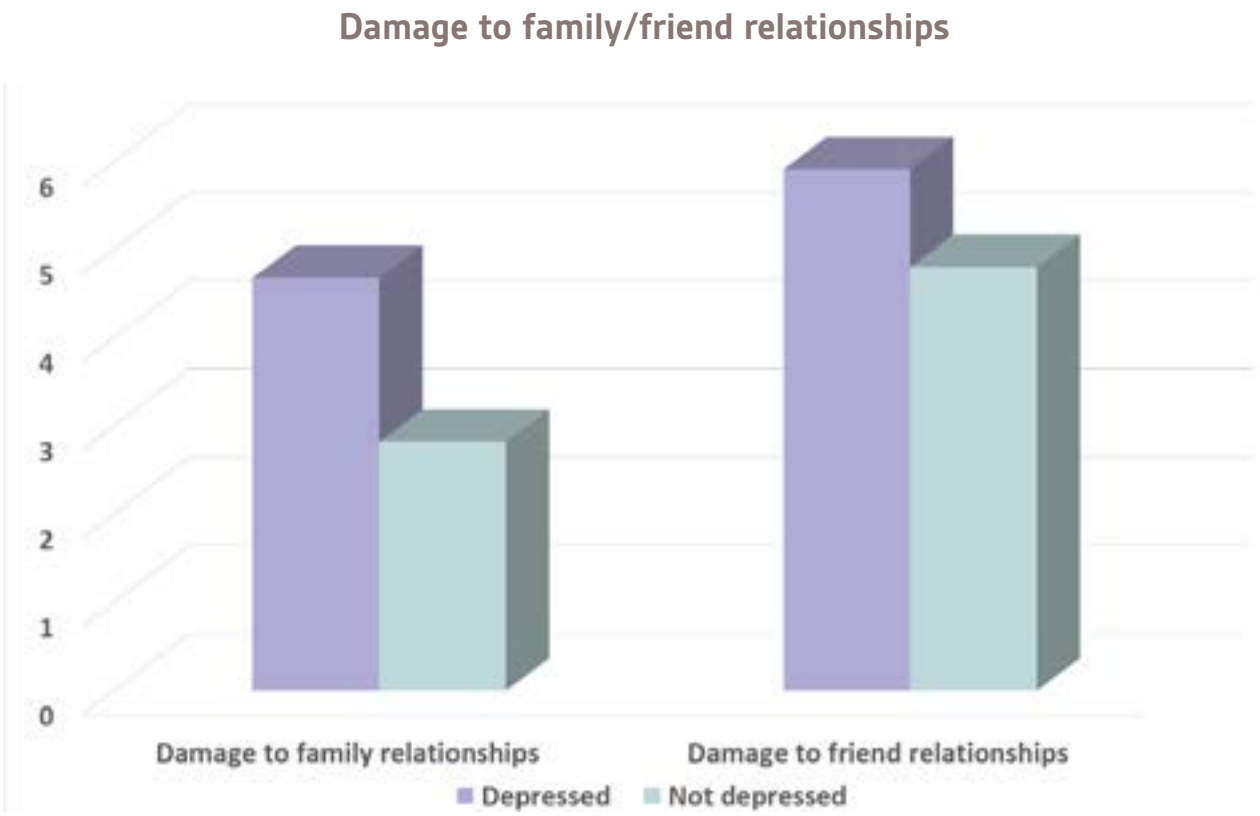

Figure 10. Mean ratings (0 - 10) on extent of damage to family and friend relationships for the two groups.

Overall, there is clear evidence that particular factors in the aftermath of cancellation – effects on work and impact on relationships, as well as supportiveness of those around, especially family – may play an important role in how someone is affected by or able to cope with cancellation.

g Depressed scored significantly higher on damage to family relationships ($t(71) = 2.15$, $p = .035$, $d = .52$) and showed a trend towards being significantly higher on damage to friends ($t(81) = 1.76$, $p = .078$, $d = .34$).

“I complained about males using female only spaces in the workplace”

6 How did respondents describe their experiences of cancellation?

Respondents were invited to explain, in their own words, the kind of cancellation they experienced and how it affected them. They were asked to note in their responses if they did not want us to report anonymously any of the information provided.

In the following quotes, any information that may easily identify the respondent, or others mentioned, has been removed. In such cases two brackets and three dots […] have been inserted to protect anonymity. References to EDI/DEI mean Equality, Diversity and Inclusion.

What was the cancellation experience like?

The first prompt invited respondents to: "Please tell us about the kind of cancellation you experienced (e.g. what happened, when and where did it happen, who was involved etc.)"

As reported previously our findings indicate that most cancellations happened in the workplace:

> **"I complained about males using female only spaces in the workplace."**

> **"Falsely accused of racism due to using an out of date idiom […] while speaking to a work colleague."**

> **"Remarks made in a college as a supply teacher. Considered Islamophobic, and racist."**

Workplace experiences provide some of the clearest examples of the processes involved in cancellation. For example, complaints often led to disciplinary procedures, written warnings, and calls to meetings with HR or senior EDI/DEI staff:

> **"6 months of disciplinary action with 4 different disciplinary meetings including an unsuccessful appeal."**

> **"A stressful and intimidating HR process and labelled me racist, inflammatory and not in line with values. They suggested a referral to Prevent like I was a terrorist."**

> **"I was subject to an investigation which I received no information about […] until the day I was asked to meet with HR and the Head of DEI […]"**

In addition, respondents report being subjected to name-calling, on-and-offline mobbing, bullying, harassment, discrimination, victimisation, ostracism, and death threats:

> **"I was called names, had threats made, my career was directly impacted."**

> **"Collective mobbing, ostracising, a formal grievance raised against me."**

> **"I was targeted for bullying at work, outrageously, with the intention I suppose that I would be upset and leave, I didn't, it got worse and worse…"**

“I have lost two close friends
[...] and I was hurt by it as I believe adults should be able to agree to disagree ...

There are also reports of being side-lined at work, and of losing work, job, career, reputation, or being offered early retirement:

"...I had fewer offers of work and some long-standing clients and contacts distanced themselves from me."

"Dismissal by my university employer for expressing gender critical views."

"The organisation I worked for withdrew work from me, without explaining why and removed my profile from the company website."

"My reputation is destroyed and I have no career."

"I was forced to take early retirement from work."

The experience of cancellation sometimes spanned different areas of an individual's life:

"It happened in my workplace, also in my university, and also in a friend group, I was slowly made to feel unwelcome and then my job was made downright uncomfortable until they finally got rid of me."

Cancellation 'elsewhere' was commonly endorsed in a wide range of contexts.

[see Appendix 3]. Here are some examples:

"During the covid-19 pandemic Twitter blocked my account for posting scientific facts and linking to research articles."

"Asked not to return to a writing group."

"I was forced to leave two local women's groups because they wanted to let men join."

"I was told my group could no longer hold meetings and events at the venue due to what I read out from a book at a meeting at the venue."

"Cancellation from gigs and music events (I'm a musician)."

"As a result of my gender critical beliefs both my son and wife left the family home"

Cancellation among friendship groups was also common:

"Those friends [...] dropped me like a stone with absolutely no explanation of the reasons for doing so. At the time, it really upset me and I felt like I had done something really immoral."

"I have lost two close friends [...] and I was hurt by it as I believe adults should be able to agree to disagree ..."

"Since then the whole friendship group has cut me out. This was very hurtful."

“Years of loyal service
and they throw me
under the bus”

Academics and those in training at university reported being:

> **"Ostracised by fellow university students and staff for gender critical and questioning critical race theory."**

> **"Accused of being anti-trans and ostracised from my group on a psychology/psychotherapy doctorate training."**

One academic reported experiencing:

> **..."an extreme instance of cyber-bullying, from exactly the sort of people who would normally preach about the need to "be kind"."**

In some cases, research projects were cancelled:

> **"the university stopped the research, saying it is ' better not to upset people' by researching a politically incorrect topic."**

There are instances of professionals being reported to their regulatory bodies and/or to the police, sometimes by colleagues who had searched through the respondent's social media accounts:

> **"I was reported to my professional body for comments on social media."**

> **"They used personal data [...] to find my anonymous social media and report me to police and regulator. [...] Regulator insisted it was misconduct to not be supportive of gender ideology."**

> **"... after searching my social media reported me to [...] who then took out a disciplinary case against me at the highest level possible (similar to gross misconduct in the workplace) for failing to validate a trans identity..."**

> **"At one point I was reported to the Health and Care Professions Council."**

What impact did the cancellation have?

Respondents were invited to write, in an open-ended way, a response to the following prompt: "Please describe the impact of this experience on you and your life, e.g., in relation to mental and physical health, finances, employment, colleagues, family, friends or anything else you think it important to tell us about, including any positive consequences)."

The following quotes indicate the extent to which some respondents were affected by cancellation:

> **"Destroyed my career, financially damaged."**

> **"I felt like my whole world had collapsed."**

> **"Years of loyal service and they throw me under the bus."**

> **"No aspect of life was untouched."**

> **"I cannot speak about the experience to some of my closest friends and family."**

“I didn’t know who
to trust anymore.
I felt betrayed”

Negative effects on mental health were widely reported:

"The impact was enormous, I stopped sleeping and eating. The depression and anxiety felt heavier than I thought it was possible."

"It was an extremely alarming episode which gave me panic attacks."

"Mental health 'shattered' felt like nervous breakdown. It is hard for anyone to understand who hasn't been through the same Kafkaesque nightmare of being accused of horrific things eg racism, bigotry, fascism."

"Wrecked my physical and mental health. Trashed my reputation. Ruined my career. Lost me income."

"I decided that I'd rather walk away and start again, as the effects on my health were starting to become life-threatening."

In some cases, respondents reported that cancellation had prompted doubts about themselves and their sanity. They also reported feelings of shame, loss of confidence, self-worth and trust:

"I thought I must be a terrible person. Couldn't sleep/ eat and became hypervigilant."

"Started to doubt my sanity"

"I felt guilty, shamed, and questioning of myself."

"Made me feel worthless."

"I didn't know who to trust anymore. I felt betrayed."

Respondents expressed fears about the possible aftermath and future consequences of cancellation:

"Fears of arrest from police. Feared losing job and home. Reputation damaged although done nothing wrong."

"I've come off FaceBook as I'm frightened of anything I do in my personal life being used against me."

"I find it difficult to open emails from my professional body now as I worry that it will happen again."

"I have never felt safe again out and about as I had so much online abuse it's hard to separate that from reality."

There were reports of loss of friendships, social isolation, loneliness, feelings of grief, and fear of making new friends. Some respondents reported experiencing suicidal thoughts at the time of cancellation:

"I am unable to be in contact with numerous friends. This very upsetting to me. Some of them I've known for over 60 years."

“It’s ripped me apart. I’ve had major depression because of it.
It makes me fearful of making new friends in case it happens again.”

"I was terrified and isolated. A dark and lonely time."

"It's ripped me apart. I've had major depression because of it. It makes me fearful of making new friends in case it happens again."

"My mental health suffered hugely, and at particularly low points I had suicidal thoughts."

However, there were also reports of positive consequences resulting from cancellation, such as discovering inner strengths and determination, appreciating supportive friends, or making new like-minded friends:

"The process has strengthened my resilience and reinforced my professional values."

"It gave me time to reflect on who my real friends are who have supported me and I have made new friends."

"...it provided an opportunity for me to find like minded people."

What helped people cope?

Respondents were prompted to: "Please tell us what helped you to cope with this experience?" (e.g. support from family, friends, workplace colleagues, or the FSU, personal values, religious or spiritual beliefs, previous experience of bad things happening to you, or anything else relevant)."

As previously reported, there is clear evidence that factors such as the supportiveness of family and others may play an important role in how someone copes with cancellation. Respondents reported a range of coping strategies including: support from family and friends; receiving help and support from organisations such as the Free Speech Union, Sex Matters, the Women's Rights Network (WRN) and Let Women Speak; connecting with like-minded people; seeking help from health professionals; religious faith; spiritual beliefs; and inner strength:

"My family were super supportive- without them, I doubt I would've coped. I also made new friends who had similar experiences."

"Support from the FSU. Becoming active in Let Women Speak."

"I've been having therapy for a few months now and it really helps. It gives me an hour to just sob to someone and let it out."

"The reasons that jump out are "religious and spiritual beliefs" and "previous experience of bad things happening."

"...was positive in some ways as I learned a lot about myself and how strong I am."

Were disputes or disagreements related to cancellation resolved or ongoing?

Respondents were asked: "Thinking back to the reason you were cancelled, have any disputes or disagreements arising from this been resolved? If not, what needs to happen to resolve these? (e.g. reconciliation, mediation, court case, employment tribunal, settlement, leaving your job or training course)".

In many cases, respondents reported that, at the time of completing the survey their cancellation and its consequences remained unresolved:

"No it's unresolved, I'm currently taking a case against my former employer."

"There was never any reconciliation. I was effectively barred from this social group."

"They never came back to me even after all the findings show that I was correct in my position."

In other cases, although there had been some formal resolution, this was not considered adequate in view of the apparent unwillingness of organisations to change and the cost to the respondent's reputation or mental health:

"The legal dispute has been settled; the substantive disagreement was not."

"No, apart from my workplace declaring that the matter is resolved. My reputation remains tarnished. There is a clear unwillingness to discuss and much abuse towards gender critical/ anti misogyny individuals."

"I received a settlement and an apology. But the industry in which I worked remains heavily captured by gender identity ideology, which is – to put it mildly – dispiriting."

"Technically everything is resolved. Emotionally, not so much."

Concerns were also expressed that there could be no resolution until or unless organisations were willing to change:

"No the charity continues to discriminate against those with sex realist views."

"They can't be resolved. Organisations and associations have been captured and unless they see reality and common sense, nothing will change."

"The only way to resolve the issue is for the union to be reformed from within."

In some cases, cancellation had led to a reluctance to speak out again or to return to previous careers:

"I continue to work for the same company only now I would think twice about speaking my mind, even though my views are perfectly reasonable."

"I got out of the situation but would never go back to arts/comedy as is hostile towards me and extremely captured by gender identity."

While in friendship groups or family, there may be no resolution in sight:

"Friendship broken up as a result of my not agreeing to pretend that a man was a woman is irreparably broken, I think."

"I would like to be reconciled with my niece."

7 Discussion

Costs

Our findings demonstrate that experiences of cancellation have a profound and serious impact on people's lives and mental health. Respondents to our survey report a range of negative consequences, often involving multiple losses: damage to career; loss of livelihood, income and reputation; broken friendships and fractured family relationships.

In view of these stressful events and losses, it is not surprising that respondents report significant negative effects to their mental health including panic attacks, sleep disturbance, hypervigilance, guilt, shame, loss of confidence, and a sense of worthlessness. Some report having had suicidal thoughts. Others describe social isolation, loneliness and feelings of grief.

These personal accounts of the effects of cancellation on mental health are reinforced by standardised measures of psychological distress which show significantly elevated levels of depression, anxiety and stress in our sample compared to the general population. Over one third of the sample also showed symptoms indicative of Post-Traumatic Stress Disorder. It is a cause for serious concern that the experience of cancellation is associated with such high levels of psychological distress.

Cancellation is a widespread phenomenon

Our survey shows that cancellation takes place in a variety of settings, of which the workplace is most common, and that it appears to be a society-wide problem. [Appendix 3]. There is also evidence that cancellation is not necessarily confined to one aspect of a person's life. 20% of our sample said they had experienced cancellation across several different settings, losing jobs, colleagues, friendships and careers that gave meaning to their lives.

The process is the punishment

Those whose cancellation took place at work describe being subjected to disciplinary procedures, bullying, discrimination, harassment, ostracism, being side-lined and receiving death threats, giving weight to the view that 'the process is the punishment'.[26] Our findings also suggest that work colleagues were the least likely to provide support. Several respondents cited EDI as a factor in their cancellation. In view of research[27] highlighting the harms that may be associated with certain EDI trainings and the risks of inducing hostility to imaginary prejudice, this is an area that would benefit from further investigation.

Outside of the workplace, there were many troubling reports of the effects of cancellation: musicians prevented from performing at gigs; women forced to leave women's groups because men were admitted; friends cut out of friendship groups; and the fracture of family relationships. Respondents spoke of the hurt caused by the loss of friendships, the sense of betrayal and not knowing who to trust anymore. One told us, "My family won't speak to me" and "I am completely alone".

Reasons for cancellation

A common reason given for cancellation in our survey was Gender identity. Freedom in the Arts (FITA) also found this to be the case in their survey[10(p5)] and the report 'Everyday Cancellation in publishing' similarly described a 'hostile environment' for those who question gender identity beliefs.[12(p11)] As well as gender, cancellations related to race were also common and respondents reported a wide range of other reasons

including expression of political views, raising concerns about Covid-19 restrictions, Islam or immigration or Brexit. Some of these reasons were also identified as 'dangerous topics' in FITA's survey.[10(p5)]

Coping with cancellation

Our findings show that receiving support from others, such as family and friends, plays an important role in helping people cope with cancellation. Other ways of coping reported by respondents include connecting with like-minded people and contacting organisations such as the Free Speech Union or Let Women Speak. Some said that they gained strength from their religious or spiritual beliefs. One third of the sample said they had sought help from a mental health professional and 27% said they had taken medication to help them cope with their cancellation.

Positive consequences

There were some reports of positive consequences resulting from the cancellation experience such as discovering inner strengths, appreciating supportive friends and the making of new like-minded friends. These reports align with the concept of post-traumatic growth where experiences of trauma or challenging events can lead to positive changes in self-perception, relationships and a greater appreciation of life and new possibilities.[28,29]

Seeking therapy: a word of caution

In view of the high levels of psychological distress associated with cancellation, those affected may benefit from seeking therapeutic help, but we would urge caution as the mental health professions have themselves become politicised.[30-32]

It is important to find a mental health professional who practices in a neutral, ethical and non-judgemental way, using an evidence-based approach. There is a list of mental health organisations that can provide such help in Appendix 4.

Limitations

- The survey was self-selecting with respondents voluntarily choosing to take part rather than being randomly selected. This may have led to a biased sample as those who chose to participate might differ from those who did not. Self-report methods are known to be susceptible to response biases, memory errors or misinterpretation of question. There may also have been demand characteristics, with those who took part giving responses they thought were expected.
- We had no baseline (pre-cancellation) measurements for depression, anxiety, stress or post-traumatic responding in our sample. This means that we cannot be sure that respondents were not already depressed, anxious, stressed or traumatised for other reasons before their cancellation. Readers can form their own view about the plausibility of this explanation. Respondents were, however, asked to complete the traumatic stress measure directly in relation to their cancellation experience, which mitigates these limitations to some extent.
- The questionnaire item asking respondents to provide the reason for their cancellation offered multiple choices including 'Sex'. While some respondents interpreted this to mean sex realism/gender critical beliefs, others took it to mean experiences of misogyny or misandry. In retrospect this item could have been worded differently to make the distinction clearer.
- Time constraints and lack of resources meant that a full thematic analysis of detailed, open-text responses was not conducted, although this could be followed-up at a later stage if resources were available.

Despite these limitations, we believe that evidence from this exploratory survey provides a valuable source of information and that its findings illustrate the extent to which cancellation impacts individuals' psychological health and their everyday lives.

Recommendations

- The impact of being cancelled is a neglected area of research that requires further investigation, particularly in view of its considerable psychological, occupational and social costs.
- EDI training programmes should be subject to rigorous evaluation to ensure they do not inadvertently cause more harm than good.
- Psychological interventions should be developed with the aim of helping those who have been cancelled to process the experience and identify effective coping strategies.
- Support is required for those who have been socially excluded and isolated to help connect them with like-minded others and assist them in recovering their mental health and well-being.

8 Conclusion

The aim of this survey was to investigate the effects on mental health of being cancelled. What we found is a cause for serious concern. The costs are high. One of our respondents said of their experience: "It's ripped me apart". This visceral description captures well the brutal nature of cancellation: the mental anguish of being harassed, ostracised, and even subjected to death threats; the pain caused by the fracture of families, relationships and long-standing friendships; the sudden and devastating loss of careers, livelihoods and reputations; the betrayal and loss of trust.

Simply put, our survey indicates that cancellation, and cancel culture more generally, is a destructive force that wreaks havoc with people's lives and psychological health. It also has a disastrous effect on wider society, stifling the ability to speak freely and truthfully. Yet still the cancellations continue. What is to be done? Can we find a way to restore our common humanity, learn how to agree to disagree, show tolerance and forgiveness to heal the divisions that are ripping us and our society apart? There are no simple answers to these questions. What we do know, however, is that many people are suffering the consequences of cancel culture at a time of rising mental health problems and overstretched healthcare services.

The ability to speak freely and express alternative points of view is necessary for a psychologically healthy, resilient and free society. Our findings show what the costs can be to mental health when people are prevented from or punished for freely expressing their views. Until this is acknowledged and action taken to protect freedom of speech, more lives are likely to be lost or ripped apart by cancel culture.

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To return to the first occurence in the text, click the body of thereference (excluding any weblink).

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Appendix 1: Participant Information & Consent Form

A survey by the Free Speech Union and Save Mental Health

Title: The Impact of Cancellation on Mental Health

Introduction

If you are over the age of 18 and have experience of cancellation, we invite you to take part in this survey to help us understand the impact of cancellation on mental health. What we mean by 'cancellation' includes, but is not limited to, any of the following happening in response to you saying or doing something to which others objected: being bullied; harassed; ostracised; suspended from work or a university course; loss of income or income earning opportunities; loss of reputation; loss of friendship; exclusion from a friendship group; online or public 'mobbing'. If you have experienced any of the above or something similar, and would potentially be interested in telling us about what happened, please read the following information carefully and decide whether or not you consent to take part.

What will my participation involve?

You will be asked to complete an online questionnaire. Your responses will be anonymous but you will be given a participant code. Please keep a note of this in case you need to contact us. In addition to basic demographic information, such as age, sex and ethnicity, you will also be asked to provide some information regarding the nature of your cancellation experience, as well as your mood. Some questions will ask for a scaled response, and some will allow you to provide more detailed responses. If there are any questions that you do not feel comfortable answering, please feel free to skip them. When you are asked to provide more detailed responses, please indicate if you do NOT want us to report any of the information you have shared with us. At the end of the questionnaire, you will be provided with some 'debriefing' information.

How might it affect me?

You may find that recalling experiences of cancellation is upsetting. Please consider carefully if you are prepared to go ahead, particularly if you have mental health problems that might be worsened by thinking about past events. If you start the survey and, while completing it, decide you do not wish to continue, you are free to withdraw at that point, without penalty. If, after completing and submitting the survey you then decide you want your data to be removed, please contact us at: admin@save-mental-health.uk with your Participant ID, before [date]. After this date your anonymised data will have been amalgamated into the dataset for the study and cannot be removed.

How will my data be managed and stored?

All data collected will be anonymous, treated in complete confidence and stored in a secure manner. No information that enables identification of any individual will be used.

How will the data be used?

The data from this survey will provide the Free Speech Union and not-for-profit group Save Mental Health with important information about the effects of cancellation on mental health. The anonymised findings from the survey will be publicised widely to raise awareness of the effects of cancellation and identify any shortcomings in current mental health provision.

Consent: Please note that by continuing with the survey at this point and clicking on the link below, you are consenting to take part: https://qualtricsxmrt7zw4ztq.qualtrics.com/jfe/form/SV_0kwiVdVTnNnaWOO

Appendix 2: Participant Debrief

The Impact of Cancellation on Mental Health

Thank you for taking the time to participate in this study. Your contribution has been valuable in helping us understand more about experiences of cancellation, and how it can impact mental wellbeing.

If you have any remaining questions about the survey at any time please contact:
Yes.

For further support:

If you have any concerns about your wellbeing following participation in this survey or feel you need any further support with your mental health, there are a number of services available to you:

- Your GP
- Local NHS talking therapies service: https://www.nhs.uk/nhs-services/mental-health-services/find-nhs-talking-therapies-for-anxiety-and-depression/
- Crisis resources and helplines: https://www.mind.org.uk/information-support/guides-to-support-and-services/seeking-help-for-a-mental-health-problem/mental-health-helplines/
- If urgent help is required, please call 999 for an ambulance or go straight to A&E if you can.
- Critical Therapy Antidote can provide names of non-judgemental professional clinicians: https://criticaltherapyantidote.org/
- Just Therapy can also provide you with access to non-judgemental professionals: https://just-therapy.org/

Withdrawal from the survey:

Please remember that you are free to withdraw your data from this study until [date] by emailing: admin@save-mental-health.uk quoting your Participant ID.

Further Research

If you would like to contribute to further research by sharing your experience of cancellation in an interview, please email us at: admin@save-mental-health.uk

Appendix 3: Where did your cancellation happen?

Workplace

Arts

Charities

Councils

Court services

Entertainment

Mental health services

News and Media

NHS/Healthcare

Publishing

Self-employed/freelance

Voluntary sector

Education Sector

College

School

University

Friendship Groups

Clubs

Friends

Special interest groups

Elsewhere

Amateur Dramatic groups

Banks

Campaign groups

Events management/conferences

Gaming clubs

Home/Family

Internet/Social media

Local government

Membership associations

Mother and Baby groups

Online forums/Whatsapp

Police services

Political parties

Professional/Regulatory bodies

Public Safety sector

Pubs

Rape crisis support

Retail sector

Trade Unions

Women's groups

Writing groups

Appendix 4: Mental health professionals and other useful organisations

Mental Health Professionals

Critical Therapy Antidote (UK & International) https://criticaltherapyantidote.org/contact/

Just Therapy (UK & Ireland) https://just-therapy.org/

Beyond Trans (International) https://beyondtrans.org/therapist-directory/

Therapy First (US & International) https://www.therapyfirst.org/find/

Open Therapy Institute (US) https://www.opentherapyinstitute.org/find-a-therapist/

Useful Organisations

Academics for Academic Freedom https://afaf.org.uk/

Academy of Ideas https://academyofideas.org.uk/

Bayswater Support Group https://www.bayswatersupport.org.uk/

Biology in Medicine https://biologyinmedicine.substack.com/

Centre for Male Psychology https://www.centreformalepsychology.com/

Don't Divide Us https://dontdivideus.com/

Committee for Academic Freedom https://afcomm.org.uk/

Freedom in the Arts https://www.freedominthearts.com/

Free Speech Union https://freespeechunion.org/

Let Women Speak https://www.letwomenspeak.org/

New Culture Forum (NCF) Locals https://www.newcultureforum.org.uk/ncf-locals-form

Not the Easy Way https://nottheeasyway.co.uk/

Protect and Teach https://protectandteach.org/

Scottish Union for Education https://scottishunionforeducation.substack.com/about

Sex Matters https://sex-matters.org/

Student Academics for Academic Freedom https://afaf.org.uk/student-academics-for-academic-freedom-safaf/

#Together https://togetherdeclaration.org/

Thoughtful Therapists https://www.thoughtfultherapists.org/

#Women's Rights Network https://www.womensrights.network/