

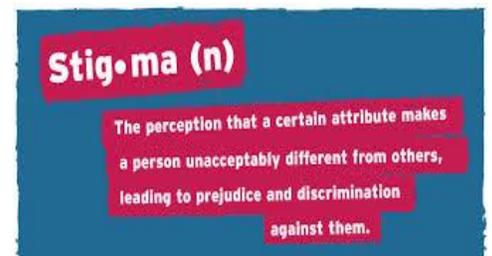


Reducing Stigma Around Mental Health and Accessing Support

WREP Brief #4

What is Stigma?

Stigma is a collection of stereotypes, prejudice, and discrimination against individuals or groups presenting with differences identified as negative. Stereotypes may be defined as harmful and disrespectful beliefs about a group. Prejudice reflects agreement with negative stereotypes, leading to emotional consequences and beliefs. Discrimination is behavior resulting from those prejudicial beliefs.



Stigma against individuals with mental health conditions exists in almost every culture and has a significant impact on health. Stigma against people with mental health concerns is longstanding, pervasive, and powerful. **Mental health stigma has been described as having worse consequences than mental health conditions themselves.** People with mental health concerns face discrimination and marginalization in multiple ways, as do many people exposed to potentially traumatic events.

Individuals exposed to trauma and loss can develop a broad range of emotional and behavioral reactions. It is important to remember that traumatic stress reactions are normal reactions to abnormal circumstances. Posttraumatic stress and grief reactions may evolve over time into psychiatric disorders, including posttraumatic stress disorder (PTSD), anxiety, and depression. Exposure to trauma may also exacerbate preexisting mental health problems, including depression and anxiety.

Individuals who have been exposed to potentially traumatic events may encounter multiple layers of stigma. They may experience stigma from the trauma itself or surrounding circumstances, as well as stigma related to the psychological consequences of the traumatic event. These sources of stigma may be compounded by prejudice, stereotypes, and discrimination associated with race/ethnicity, sexual orientation, gender identity, religion, or other cultural factors.

Though stigma against trauma and its psychological consequences is a significant challenge, having a better understanding of what stigma looks like in the workplace context and how to address it can help decrease the toll of stigma on health and well-being.

Types of Stigma

- **Public stigma** refers to negative stereotypes or discriminatory attitudes endorsed by the general public about mental health conditions
- **Self-stigma** refers to individuals internalizing public stigma about mental illness, often resulting in shame and negative self-perceptions
- **Stigma by association or affiliate stigma** refers to prejudice or discrimination extended to close friends or family associated with individuals with mental illness
- **Structural stigma** reflects social and institutional policies that limit opportunities for people with mental health concerns

	Public	Self	Affiliate	Structural
Stereotypes and Prejudice	People with mental health concerns are dangerous, incompetent, to blame for their disorder, unpredictable	People disrespect and discriminate against people with mental health concerns and I agree that I am dangerous, incompetent, and to blame	People related to individuals with mental health concerns may also be dangerous, incompetent, or to blame for their relative's health	Stereotypes and prejudices are embodied in formal or informal policies or across organizational culture
Discrimination	Therefore, employers may not hire them, landlords may not rent to them, the health care providers may offer a lower standard of care	Thoughts may include: "Why try? Someone like me does not deserve to get a good job or get good health care".	Therefore, employers may not hire or promote relatives of people with mental health conditions	Leads to loss of opportunity, like limited options for promotion or career trainings

Source:

Adapted from Corrigan, et al.

Stigma and Avoidance of Treatment for Trauma

Stigma presents a major barrier for people with mental health concerns to seek help to address those very concerns. **Multiple research studies demonstrate that stigma prevents people from seeking treatment from mental health professionals or contributes to people ending treatment prematurely.** Less than half of the adults in the U.S. who need services and treatment get the help they need. The average delay between the onset of symptoms and intervention is 8-10 years. Many people [living with mental health conditions](#) do not feel comfortable sharing their concerns with their friends or family members. Stigma may worsen isolation, guilt, and shame which are common in many mental health conditions associated with trauma, like depression, anxiety, and PTSD.

Stigma and discrimination can worsen mental health conditions in several ways. First, stigma itself may contribute to worsening symptoms. A comprehensive [review of research](#) demonstrates that self-stigma leads to negative effects on recovery among people diagnosed with psychiatric diagnoses. In addition to contributing to mental health symptoms, stigma also plays a significant role in delaying or preventing people from getting treatment.

Some negative effects attributed to stigma include:

- Reduced hope
- Decrease in self-esteem
- Increase in mental health symptoms
- Difficulties with social relationships
- Reduced likelihood of completing treatment
- Increased difficulties at work

Over [half of people with mental illness](#) do not seek professional care for their mental health concerns. Some people avoid or delay seeking treatment due to concerns about being treated differently or fear of losing their jobs or workplace discrimination. Avoidance of mental health treatment related to stigma may doubly impact those affected by trauma, as avoidance is a hallmark behavioral consequences of trauma. By preventing people from seeking needed support for mental health conditions related to trauma, stigma may prolong the psychological effects of traumatic exposures.

Stigma regarding mental health problems disproportionately affects care seeking in communities of color. People from racial/ethnic minority groups are less likely to receive mental health care for multiple reasons, which may include public, self, and structural stigma. Racial/ethnic minority youth with behavioral health issues are more frequently referred to the juvenile justice system than to specialty health care, compared with white youth. Mental health problems are common among people in the criminal justice system, which has a disproportionate representation of racial/ ethnic minorities. Black and Latinx youth, disproportionately affected by trauma and community violence, are less likely to participate in mental health services. Youth who are most likely to be exposed to trauma are the least likely to receive the services that could offset its effects. In addition to limited availability or access to culturally informed trauma focused treatments, many members of diverse communities

experience stigma against mental health conditions and treatments. Asian Americans are among the least likely to seek mental health treatment, despite similar rates of mental health concerns as other individuals. This is in part due to public and self-stigma in communities of color, and in part due to structural stigma experienced by these communities related to institutions and systems of healthcare. (See more on [mental health in Diverse Populations](#).)

Source: Adapted from American Psychiatric Association patient and family resources on Stigma, Prejudice and Discrimination Against People with Mental Illness and Cultural Competency

Social Consequences of Stigma

Stigma was identified by the U.S. Surgeon General's Report on Mental Health as a public health concern that leads people to "avoid living, socializing or working with, renting to, or employing" individuals with mental illness. Stigma has significant social and economic consequences, leading to shrinking social networks, exposure to bullying or discrimination, or limitations in career development. Given that mental health conditions are the leading cause of disability in the United States, factors that delay or deter treatment of mental health may compound the negative impact of stigma on social and career opportunities. Some of the social consequences of stigma may have particular impact on functioning in the workplace or career development.

Some social consequences of stigma include:

- Social isolation or limited ability to form strong social networks
- Lack of understanding by family, friends, coworkers, or others
- Considered as an "other" or being alienated
- Fewer opportunities for work or social activities
- Being misunderstood as irresponsible or inability to make their own decisions
- Exposure to bullying, physical violence, or harassment
- Perception as being dangerous
- Less likely to be hired or promoted
- Less likely to get safe housing
- More likely to be criminalized than offered health care services
- Fear of rejection or low self-perception preventing pursuit of career opportunities
- Reluctance to seek help when referred due to fear of rejection or job loss

Source: Adapted from Mayo Clinic and National Alliance for Mental Illness

Stigma in the Workplace

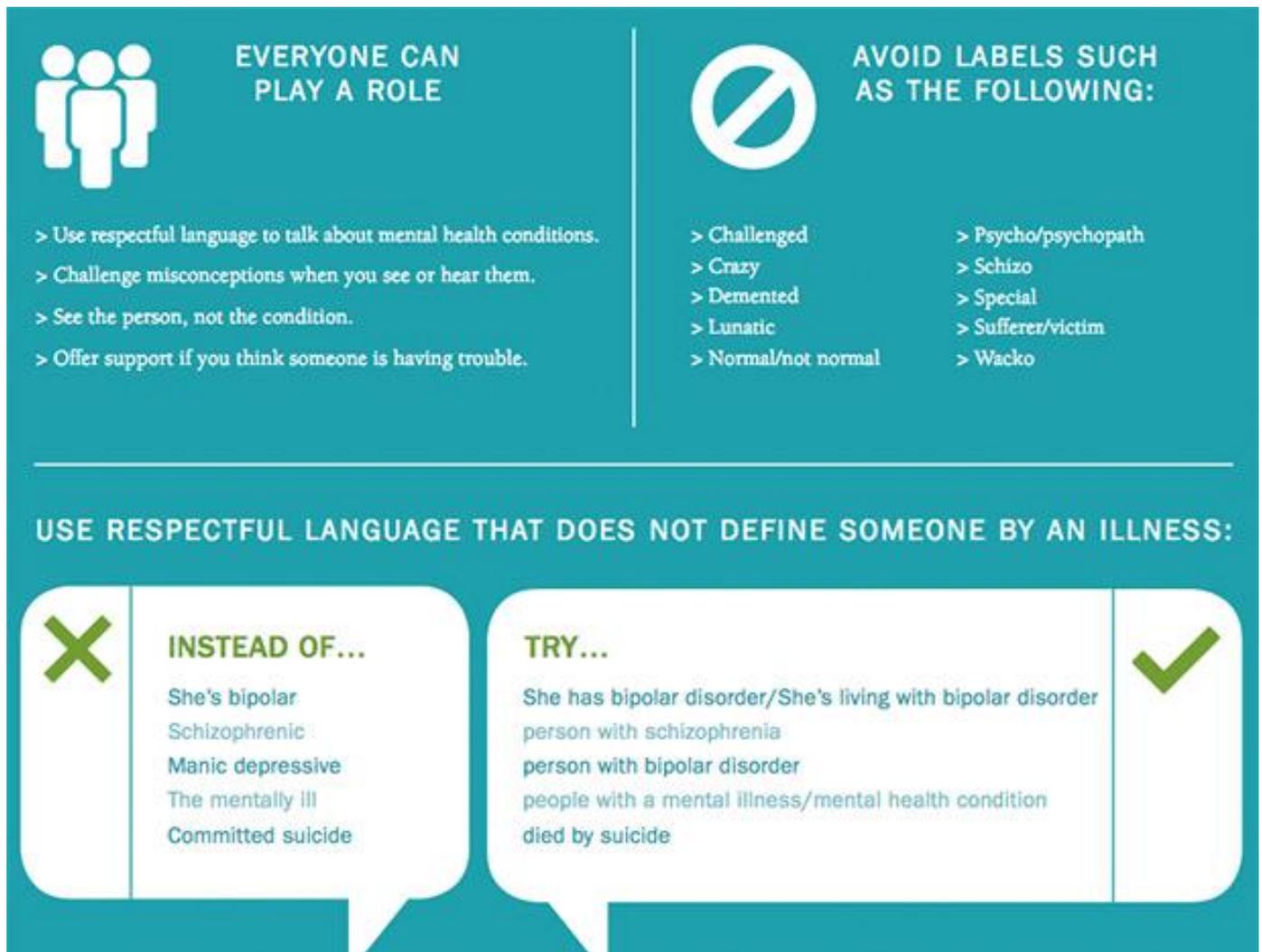


Mental health stigma is still a major challenge in the workplace according to a [2019 national poll](#) conducted by the American Psychiatric Association (APA). **Approximately half of polled workers expressed concern about discussing mental health issues in the workplace, and only one in five are completely comfortable with sharing mental health concerns.** Notably, about one third of the workers worried about the consequences of help-seeking behavior. More than one in three workers reported concern about retaliation or being fired if they sought mental health care, especially younger men. Though younger men were more concerned about retaliation, younger workers of all genders were more comfortable discussing mental health concerns openly than their older counterparts. Knowledge about mental health in the workplace provides encouragement, as three in four workers reported they would recognize signs of anxiety, depression, or other mental illness among co-workers and a majority would reach out to a co-worker showing signs of mental health concerns.

Employers have been increasing effort to address stigma against mental health conditions in the workplace, as evidenced by programs such as employee assistance programs or onsite mental health services. To help support employers, the American Psychiatric Association Foundation's developed an online resource, the Center for Workplace Mental Health. The [Center for Workplace Mental Health](#), focused on raising awareness of mental health concerns, information sharing on resources and support available to employees, and specific efforts to break the silence that surrounds the topic of mental health.

Source: Adapted from American Psychiatric Association Center for Workplace Mental Health

Best Practices for Reducing Stigma



EVERYONE CAN PLAY A ROLE

- > Use respectful language to talk about mental health conditions.
- > Challenge misconceptions when you see or hear them.
- > See the person, not the condition.
- > Offer support if you think someone is having trouble.

AVOID LABELS SUCH AS THE FOLLOWING:

- > Challenged
- > Crazy
- > Demented
- > Lunatic
- > Normal/not normal
- > Psycho/psychopath
- > Schizo
- > Special
- > Sufferer/victim
- > Wacko

USE RESPECTFUL LANGUAGE THAT DOES NOT DEFINE SOMEONE BY AN ILLNESS:

INSTEAD OF...	TRY...
<ul style="list-style-type: none">She's bipolarSchizophrenicManic depressiveThe mentally illCommitted suicide	<ul style="list-style-type: none">She has bipolar disorder/She's living with bipolar disorderperson with schizophreniaperson with bipolar disorderpeople with a mental illness/mental health conditiondied by suicide

The National Alliance on Mental Illness (NAMI) provides 9 ways that individuals can act to reduce stigma of mental illness:

“How do you fight stigma?”

1. Talk Openly About Mental Health

“I fight stigma by talking about what it is like to have bipolar disorder and PTSD on Facebook. Even if this helps just one person, it is worth it for me.” – Angela Christie Roach Taylor

2. Educate Yourself And Others

“I take every opportunity to educate people and share my personal story and struggles with mental illness. It doesn't matter where I am, if I over-hear a conversation or a rude remark being made about mental illness, or anything regarding a similar subject, I always try to use that as a learning opportunity and gently intervene and kindly express how this makes me feel, and how we need to stop this because it only adds to the stigma.” – Sara Bean

3. Encourage Equality Between Physical and Mental Illness

“I find that when people understand the true facts of what a mental illness is, being a disease, they think twice about making comments. I also remind them that they wouldn't make fun of someone with diabetes, heart disease or cancer.” – Megan Dotson

4. Show Compassion for Those With Mental Illness

“I offer free hugs to people living outdoors, and sit right there and talk with them about their lives. I do this in public, and model compassion for others. Since so many of our homeless population are also struggling with mental illness, the simple act of showing affection can make their day but also remind passersby of something so easily forgotten: the humanity of those who are suffering.” – Rachel Wagner

5. Choose Empowerment Over Shame

“I fight stigma by choosing to live an empowered life. To me, that means owning my life and my story and refusing to allow others to dictate how I view myself or how I feel about myself.” – Val Fletcher

6. Be Honest About Treatment

“I fight stigma by saying that I see a therapist and a psychiatrist. Why can people say they have an appointment with their primary care doctor without fear of being judged, but this lack of fear does not apply when it comes to mental health professionals?” – Ysabel Garcia

7. Let The Media Know When They're Being Stigmatizing

“If I watch a program on TV that has any negative comments, story lines or characters with a mental illness, I write to the broadcasting company and to the program itself. If Facebook has any stories where people make ignorant comments about mental health, then I write back and fill them in on my son's journey with schizoaffective disorder.” – Kathy Smith

8. Don't Harbor Self-Stigma

“I fight stigma by not having stigma for myself—not hiding from this world in shame, but being a productive member of society. I volunteer at church, have friends, and I'm a peer mentor and a mom. I take my treatment seriously. I'm purpose driven and want to show others they can live a meaningful life even while battling [mental illness].” – Jamie Brown

9. Be Conscious of Language

"I fight stigma by reminding people that their language matters. It is so easy to refrain from using mental health conditions as adjectives and in my experience, most people are willing to replace their usage of it with something else if I explain why their language is problematic." – Helmi Henkin

Source: <https://www.nami.org/Get-Involved/Pledge-to-Be-StigmaFree/StigmaFree-Me>

DO SAY	DON'T SAY
<ul style="list-style-type: none">○ "Thanks for opening up to me."○ "Is there anything I can do to help?"○ "How can I help?"○ "Thanks for sharing."○ "I'm sorry to hear that. It must be tough."○ "I'm here for you when you need me."○ "I can't imagine what you're going through."○ "People do get better."○ "Oh man, that sucks."○ "Can I drive you to an appointment?"○ "How are you feeling today?"○ "I love you."	<ul style="list-style-type: none">○ "It could be worse."○ "Just deal with it."○ "Snap out of it."○ "Everyone feels that way sometimes."○ "You may have brought this on yourself."○ "We've all been there."○ "You've got to pull yourself together."○ "Maybe try thinking happier thoughts."

Source: <https://makeitok.org/#!whatsStigma>