Stigma: Concepts, Types, Consequences, and Initiatives To Reduce Stigma and Help-Seeking from a Mental Health Professional

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ABSTRACT

A person is said to be stigmatized when they are subjected to discredit, devaluation, and shame as a result of the characteristics or attributes that they exhibit. In most cases, the effects of stigma on a person's social life are unpleasant and include feelings of alienation, rejection, marginalization, and discrimination. Stigma can affect a person's illness and treatment, including their ability to get professional and suitable medical care for their condition, if it is connected to a health condition like mental illness. It has been pointed out that mental health professionals are not the only ones impacted by stigma; patients' loved ones feel it, too. The cultural and contextual value systems of a society, which can shift over time and between different settings, have a significant impact on stigma. On the other hand, there is a paucity of data regarding the nature of the stigma that patients suffering from mental illness and nurses working in mental health care face in Iraq. These days, stigma's aftereffects are so pervasive that they pose a threat to public health in nearly every Western nation. The fallout might range from social isolation to prejudice towards those with mental illness in the job or classroom. This leads to poor self-esteem and confidence, which in turn hinders social and occupational functioning and therapy for people with mental illness.

Key words: Stigma, Concepts, Types, consequences, reduce stigma, help-seeking
INTRODUCTION

- **HIV**: are two human-infecting species of the retrovirus subfamily Lentivirus. Acquired immunodeficiency syndrome (AIDS) is a result of these factors; it is a disorder in which the immune system gradually fails, leading to the development of potentially fatal opportunistic infections and malignancies. Without HIV therapy, the average life expectancy of a person infected with HIV is 9–11 years [1].

- **Mental Illness**: are illnesses characterized by alterations in affect, cognition, or behavior. Distress and/or inability to do daily tasks at work, home, or school may accompany mental health issues [2].

- **COVID**: is a coronavirus that causes an illness known as COVID-19. WHO first heard about this new virus on 31 December 2019, following a report of a cluster of cases of so-called viral pneumonia in Wuhan, People's Republic of China [1].

- **Stigma**: it entails categorization, generalization, isolation, demotion, and prejudice. Individual, social, and structural factors all interact to create the complex and multifaceted phenomenon known as stigma [3,4].

- **Stigma related to HIV**: HIV-related stigmas include those based on sex, gender identity, sexual orientation, drug use, sex work, and HIV status, among other things. HIV-related stigma includes a wide range of things that make people feel bad about themselves, such as avoiding them, talking about them, verbally abusing them, and shunning them [5].

- **Stigma of mental illness**: Disabilities of the mind carry the greatest social shame. Patients often face discrimination and stigma in addition to the debilitating effects of their condition. Stigmatization of the mentally ill is as old as the word "stigma," which in ancient Greece was a tag for slaves and criminals [6].

    The mentally sick where liberated and institutions were founded during the Enlightenment. However, stigmatization and prejudice peaked during Nazi Germany's death or sterilization of hundreds of thousands of mentally ill people [7].

    Patients who are receiving mental health treatment tend to view themselves as less valuable members of society and are convinced that the stigmas associated with mental illness are accurate [8].
Stigma related to COVID:

In recent years, the stigma surrounding mental health issues has become more important. This is because of changes in society and the way psychiatric care is provided, as well as the effects of recent events like the Covid-19 pandemic. People of certain ethnic backgrounds and anyone who is thought to have been in touch with the COVID-19 virus have been treated differently because of the outbreak. This can make health problems worse and make it harder to stop a spread of a disease [9].

Concepts

The Ancient Greek word stigma implies "branding" or "tattooing," from which we get the word stigma. In the past, it was used to publicly identify traitors, slaves, and those who should be avoided. Everyone in the community was suddenly made aware of the stigmatized person's diminished social standing in this way. The phrase has been historically used in a wide range of contexts, often in relation to psychological disorders. In Goffman's view, this trait is so stigmatizing that the person who possesses it is no longer seen as "whole and ordinary," but rather as "a tainted discounted one [10].

According to the World Health Organization, stigma is "a mark of shame, disgrace, or disapproval that results in rejection, discrimination, and exclusion from participation in a number of different areas of society [3,4].

Dislike, apprehension, aversion, rejection, blame, discrimination, and devaluation all describe stigmatization, which stems mostly from widespread (mis)understandings about mental illness [9].

Studies have shown that the diagnosis of "schizophrenia" is considerably more likely to result in a negative categorization than other diagnoses, such as "depression [11].

Patients with schizophrenia appear to face greater stigma, bipolar disorder also faces no less stigma than schizophrenia, also than those with other mental illnesses, including depression and eating disorders, according to the available data. This is because schizophrenia is considered a chronic psychological disease that greatly affects behavior, insight, thinking, and perception, which confirms the suffering of a person with schizophrenia for a long period of his life. As a result of the stigma, people are less likely to interact with others, have fewer job and educational prospects, and have a less-than-ideal quality of life. Those who suffer from mental health issues
typically avoid seeking help for fear of being called a "mental patient" and subjected to the associated stigma [12].

❖ Types

➢ Types of mental health-related stigma

1. **Self-stigma** means having a poor opinion of oneself because of having a mental disease; this is also called internalized stigma. Negative effects, such as not seeking help, feeling powerless, having low confidence in one's own abilities, and having a lower quality of life, have all been linked to self-stigma [9].

2. **Public stigma** refers to the general public's preconceived notions, fears, and prejudices about people who suffer from mental illness. Discrimination in the workplace and other forms of public stigma have been shown to have serious consequences in studies [15].

3. **Professional stigma** occurs when doctors, nurses, and other medical staff have negative views of their patients due to their own biases or ignorance about mental illness, or when they themselves face stigma from the general public or other medical staff as a result of their work with and connections to stigmatized individuals. Particularly worrisome is the fact that professional stigma may influence a person's care and treatment for mental illness, including treatment for physical disorders, thereby affecting their well-being and recovery [9].

4. **Institutional stigma** means that there is a general lack of acceptance inside the company for people who have been stigmatized, such as those with mental health issues. Such discrimination can become institutionalized in society due to the reinforcement it receives from legal systems, public policy, and professional practices [14].

➢ Conditions Stigmatized in Mental Health

1. Schizophrenia
2. Epilepsy
3. Mental retardation
4. Substance abuse
5. Post-traumatic disorder (anxiety)
6. Depression
7. Dementia
8. Delirium
9. Antisocial personality disorder
10. Parkinson disease

❖ Consequences

People who suffer from mental illnesses are more vulnerable to the effects of stigma. First, stigma can cause label avoidance, which is when someone avoids getting a mental health diagnosis or treatment because they don't want others to know they have one. Poor adherence to psychological and pharmaceutical treatment has also been linked to internalized stigma. Internalized stigma is related to knowing about the psychiatric disorder and the meanings ascribed to it, according to a model developed by Yanos and colleagues (2008) that looks at studies how it affects patients' ability to recover from severe mental illness. Individuals who experience internalized stigma are less likely to seek help and are more likely to use avoidant coping mechanisms, among other poor recovery outcomes [8].

In spite of this, the vast majority of writers concur with Goffman's basic definition, which enumerated the key components of stigma as follows: stigmatization (labeling), stereotyping (stereotyping), social isolation (isolation), prejudice (prejudice), rejection (rejection), ignorance (ignorance), loss of position (status), loss [14].

Fear, ignorance, and prejudice are what drive the public's stigma against mental illness, according to studies. The public's negative attitude toward those who struggle with mental health issues takes many forms. At first, they avoid and shun them out of fear. Second, the populace have an authoritarian belief that they are incapable of caring for themselves or making decisions. Third, people generally view them as immature. The media's portrayal of the mental illness stigma is an ongoing battle for those who suffer from it. Reductions in self-esteem are often the result of encounters with discrimination, prejudice, and stigma [15].

Inadequate medical and psychological care due to stigma might aggravate a patient's condition or lead to frequent readmissions. In addition, the weight of stigma is so strong that patients report it is almost as bad as the symptoms of their condition and negatively affects their personal and professional lives. Family members, friends, and mental health workers are also negatively impacted by stigma. This combined with poor public knowledge of mental disease,
persistent stigma and traditional ideas about mental health, and a lack of local professional expertise, significantly affects the access and quality of services provided to persons living with mental illness. Misunderstanding, prejudice, confusion, and anxiety all stem from the taboo nature of talking openly about mental health stigma. To avoid stigma or judgment, families may choose to keep their mentally ill members out of sight and out of mind [14].

➢ Where can stigma and discrimination occur?

- People who struggle with mental health issues are often discriminated against and have experienced stigma as a result:
  1. **Employment**: not getting jobs or not looking for jobs
  2. **Education**: Being labeled as different and not being given chances to move up in places like schools and universities
  3. **Media**: Exaggerating the severity of mental illness
  4. **Insurance companies**: Reducing access to health insurance for those with mental illness
  5. **Community**: Feeling left out or shunned
  6. **Families**: Putting the blame for their plight on them and rejecting them [16].

❖ Initiatives to Reduce Stigma

It is understandable that overcoming the impacts of stigma might feel just as challenging as battling the sickness itself. The public's attitude toward those who suffer from mental illness may only shift if people have a deeper comprehension of the roots of stigma. The findings showed that respondents with a better understanding of mental illness were less inclined to label the general public as dangerous [17].

Fear of the mentally ill was also shown to be lower amongst these responders. As a result, increasing respondents' knowledge about mental illness leads to higher acceptance of those with such diagnoses. This research suggests that educating the public and breaking down barriers to understanding mental illness are important steps in eliminating stigma [18].

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Strategies to combat stigma towards mental illness [19]:

1. Educate the community on mental health conditions and the healing process.
2. Defining the sick cases of society that have recovered from mental illness and returned to life.
3. Fighting stigma and discrimination when heard or seen.
4. Treating the mental disorder properly is the first and main intervention in this regard at the individual level. Evidence from the realm of physical illness reveals that the successful treatment of a certain ailment lessens the associated stigma.
5. Patients benefit from counseling aimed at boosting their ability to cope and sense of self-worth.
6. Cognitive behavior therapy has been shown to be an effective method for overcoming the effects of self-stigma. Symptom and stress management techniques, as well as mental exercises aimed at altering dysfunctional worldviews, are all part of the cognitive behavior therapy toolbox.
7. Rehabilitating people who have schizophrenia can also help them lead better lives and lessen the social stigma associated with their condition.
8. Raising awareness of health issues and combating stigmatization are two examples of community-based interventions.
9. Support networks and improved access to services for affected individuals are two ways in which community development skills can be fostered.
10. New regulations implemented by organizations, whether public or private, that specifically address stigmatizing behaviors are an example of an intervention at the structural level [6,7].
11. There is no question that stigma in mental illness is one of the most significant barriers to the improvement and growth of mental health care, so psychiatrists should place a lot of attention on actions directed against stigma, especially internalized stigma [7].
12. The National Alliance for the Mentally Ill has been educating the public to assist avoid stigmatizing circumstances by campaigning for improved legal safeguards for people with mental illness in areas like housing and employment [20].
Stigma Associated with help-seeking from a mental health professional

Despite progress in the field of counselling, people who seek or use psychological and mental health services still face stigma. It indicates that treatment, problem acknowledgment, and a belief in one's own ability to handle adversity are all linked to this stigma. According to studies conducted by Schonrt-Reichl and Muller, persons in need often avoid reaching out for assistance for fear of admitting their own weakness. The stigma of seeking help for mental health issues is a significant obstacle even for young people. According to Simmons 34, up to 85% of children in need of mental health therapy are not receiving any. This is largely due to the stigma that surrounds discussing mental illness. Seeking professional mental health care might be hampered by issues like social stigmatization and unfavorable feedback from loved ones. According to research conducted by Leaf et al., the service gap population has a more negative perception of the stigma associated with seeking mental health treatment than the general population. Non-users are nearly twice as likely as users to report feeling stigmatized. As a result, the prevalence of the service gap can be attributed mostly to the existence of stigma barriers. That is the case when people have mental health needs but are not being treated [15].

Conflict of Interest:
The authors declare that they have no conflict of interest.

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الخلاصة

يُقال إن الشخص يتعرض للوصم عندما يتعرض لتشويه السمعة والتقليل من قيمته والعار نتيجة للخصائص أو السمات التي يظهرها. في معظم الحالات، تكون آثار الوصمة على الحياة الاجتماعية للشخص غير سارة وتشمل مشاعر الاختياب والرفض والتهميش والتمييز. يمكن أن تؤثر الوصمة على مرض الشخص وعلاجه، بما في ذلك قدرته على الحصول على رعاية طبية متخصصة ومناسبة لحالته، إذا كانت مرتبطة بحالة صحية مثل المرض العقلي. لقد تم الإشارة إلى أن المتخصصين في الصحة العقلية ليسوا الوحيدين الذين يتأثرون بالوصم؛ ويشعر بذلك أحباء المرضى أيضًا. إن أنظمة القيم الثقافية والسياقية للمجتمع، والتي يمكن أن تتغير بمرور الوقت وبين البيئات المختلفة، لها تأثير كبير على الوصمة. ومن ناحية أخرى، هناك ندرة في البيانات المتعلقة بفترة الوصمة التي يواجهها المرضى الذين يعانون من أمراض نفسية والممرضين العامين في مجال رعاية الصحة النفسية في العراق. في هذه الأيام، أصبحت آثار الوصمة منشورة إلى حد أن هناك تشكل تهديدًا للصحة العامة في كل دولة غربية تقريبًا. قد تتراوح التداعيات من العزلة الاجتماعية إلى التحيز تجاه المصابين بمرض عقلي في العمل أو الفصل الدراسي. وهذا يؤدي إلى ضعف احتكار الذات والثقة، مما يعيق بدوره الأداء الاجتماعي والمهني والعلاج للأشخاص الذين يعانون من مرض عقلي.

الكلمات المفتاحية: الوصمة، المفاهيم، الأنواع، العواقب، والحد من وصمة العار، وطلب المساعدة.