Stigma Associated with Mental Health Problems: A Review

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Authors' contributions

Review Article

ABSTRACT

Stigma is the negative attitude towards a distinguishing negative trait or personal feature. Although there have been inflow of efficient and feasible mental health therapies and programs and medical advances, nothing could be effective to reduce stigma. Stigma results in negative outcomes including difficulties with employment, poor social life and a decreased quality of life and self-esteem. Health care professionals and community people have to raise voices against stigma. Effective way of tackling mental illness stigmas are speaking out freely about mental disorders, avoid self-stigma, avoid labeling and discrimination, avoiding use of insolent language for mentally ill and get proper treatment. Poor mental health literacy and stigmatizing attitudes towards mental illness is more among community members so there is need to prevent the mental illness stigma in community and educate the people regarding mental health and measures to tackle mental illness stigma.

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1. INTRODUCTION

Stigma is when someone is considered negatively because they have a distinguishing trait or personal feature that is viewed as a negative [1]. There are growing derogatory views and perceptions about individuals who have a mental health disorder. Discourteous attitudes and assumptions about individuals who have a mental health condition are rising. Stigma will bring in prejudice. Discrimination may be obvious and clear, like someone who makes a discourteous comment regarding psychiatric illness or medication, or it may be unintentional or implicit, like someone who ignores it because of their delusional, violent or harmful disorder. Mentally unstable person also will pass judgment on himself. Stigma causes people feel guilty for something that's outside their influence. Stigma is an unfair contribution to the suffering for a group of individuals who still face such a tremendous load [1,2].

2. HARMFUL EFFECTS OF STIGMA RELATED TO MENTAL ILLNESS

- Reluctance from finding support or care from others.
- Family members, friends, co-workers or others do not understand the people with mental illness.
- Less jobs, education or social incentives or difficulty seeking housing.
- Teasing, physical aggressive and intimidation.
- Health insurance which does not fully cover the comprehensive care and not include the full diagnosis of psychiatric disease.
- They have feeling that problems cannot resolve or the condition cannot change.
- The self-esteem is impaired. This may lead to them not receiving care, withdrawing from community, abusing alcohol and narcotics or even suicide [1].
- Stigma induces inequality and separates people.
- Stigma increases the length of disease which is not treated [2].

3. MEASURES TO TACKLE MENTAL ILLNESS STIGMA

Health care professionals and community members have to lift voices against stigma within the mental health community. They have to face up against stigma every day, in whatever way feasible.

4. FOLLOWING ARE THE MEASURES TO TACKLE MENTAL ILLNESS STIGMA

Speak freely about mental disorders- Individuals with mental disorder tend to communicate to trustworthy persons regarding their disease. Ex. Ex. Mates, family, parents and particularly psychiatrist and psychiatric nurse healthcare professionals. Educate others, and express their own experience and mental disease experiences [3].

Avoid tolerating self-stigma- Don't conceal the psychiatric condition from this planet. Individuals with mental disorder should be a contributing part of community. They can have their mates. They have to take treatment from health professionals and they should take treatment positively. Even if they are fighting with mental illness they can live a meaningful life [3].

Evade labeling of mentally illness person- Should not tag the people with their psychiatric disorder. For instant "She is manic" or "He is depressive." Alternatively, claim, "She has a mania" or "He has Depression." and don't imply he's/ she's psychologically impaired. Instate of say "He has a psychiatric illness" This honors the particular individual that has a mental disorder. This acknowledges that the individual is not labeled a psychiatric disorder [4].

Avoid scaring of mentally illness person- In certain instances, psychologically unstable individuals can show odd actions while their illness becomes more serious, although not always so. Mental illness sufferers are not more likely to be violent than the general population. In reality, they are more likely to become victims of violence. Hence don't scare them but we should be careful [4].

Avoid to use insolent language for mentally illness person- Like he is mad, foolish & silly ect. [4].

Do not be cruel or accuse mentally disturbed individuals- Don't say everyone is all right simply because they appear or behave all right, or occasionally smile or chuckle. Depression, anxiety, and other psychiatric disorders may also

be unnoticed, but the patient might always be in significant internal pain. Provide help and reassurance anytime someone has difficulty controlling their disease4 [4].

Mentally ill individual can be a role model - Stigma is also caused by lack of knowledge and evidence which is unreliable. Design these stigma-reducing approaches by educating to colleagues, relatives, employers and others. Share the message that therapy works so they will heal. It takes time to improve attitudes, but consistency is the answer and keep putting the message out and bring a meaningful difference about the way we treat others [4].

Get treatment. Individuals of psychiatric disorders can be hesitant to accept they seek care. Don't let the anxiety of being diagnosed with a mental disorder deter them from finding assistance. Treatment can improve by recognizing what's wrong and growing the effects that conflict with their job and personal life [5].

Don't agree to stigma, create self-doubt and shame. Stigma doesn't just come with anyone else. Mental disorder is falsely perceived to be a symptom of moral failure or that they would be able to manage it without support. looking for psychotherapy, enlightening themselves about their condition and linking with others who have mental illness can help them grow self-esteem and overcome negative self-judgment [5].

Do not embrace negativity, build guilt and self-doubt. If the person have a mental illness, they may be reluctant to tell anyone about it. Their family, friends, clergy or members of their community can offer them support if they know about their mental illness. Reach out to people they trust for the compassion, support and understanding their need [5].

Encourage psychiatric person to joint self help group - Any local and regional organizations, such as the National Alliance on Mental Illness (NAMI), provide local services and online tools that help alleviate stigma by informing mentally disabled individuals, their communities and the general public. Many state and federal organizations and services, such as those focused on occupational training and the Veterans Affairs Department (VA), offer help for individuals with mental illness [5].

Obtain help at school for mentally ill child- When every child has a learning-influencing

mental disorder, find out which strategies and services may improve. Discrimination toward students as a consequence of a mental disorder is against the rule, and educators at the primary, secondary and college levels are expected to accept students as much as practicable. Explore appropriate strategy and tools with students, scholars or administrators. If a instructor is ignorant of a student's condition, it may contribute to bullying, cognitive difficulties and low grades [5].

People continue to speak out against the stigma- Educate the public about mental illness and myths about mental illness. Encourage them to talk against the mental illness stigma and do not accept the negative attitude about mental illness in community [5].

Facilitating fairness between physical and mental disorder-People know the real truth of what a psychiatric condition is, and a disability, they think twice before speaking. We wouldn't have fun around anyone who has asthma, lung failure or cancer [5].

Express respect for those with mental disability-Give free hugs to them, stay right there and chat about their life with them. This will be performed in public and demonstrate concern for others as pattern because too many homeless persons often deal with mental disorder, the mere act of expressing love will improve their day, but still inform travelers of something that is too quickly overlooked by others who suffer [5].

Choose dignity over shame- Combat guilt by deciding to lead a life of dignity that involves owning themselves and declining to enable others to decide how they think or feel for themselves [5].

Be sincere about their treatment- People who are mentally ill should take their treatment sincerely and fight against stigma by approaching therapist and a psychiatrist and show community people that treatment can change the life of mentally ill person [5].

Let the media know when people are being stigmatizing- Let the public know whether you are stigmatizing-Mental disease can be addressed in the community. Don't feel ashamed to discuss mental health issues [5].

5. DISCUSSION

A research was conducted to know the character of mental illness-related stigma in a rural and semi-urban Indian population, and establish an intervention program and see its effects. Experimental research design was used. Simple random sampling technique used for recruiting the participants for the study. Community members including persons with chronic mental illness and their caregivers from rural and semi-urban areas was the sample. Semi structured interview was conducted for assessing the nature of stigma then administered an intervention package on the basis of initial findings and two post assessments were carried out. The result claimed that the participants supported the stigmatized mentality related to various types of mental disorder. The mindset of caregivers was less stigmatic than that of members of community. During intervention, substantial improvements in behavior about some forms of mental disease were reported and this changed perspective was maintained through the second experiment, that is, after three months of experiment. So the study concluded that rural and semi-urban people have a stigmatizing attitude towards mental illness. Intervention kit that reflects on the related dimension of mental disease should be used to alleviate mental disorder stigma [6].

One comparative research conducted to equate Taiwanese Chinese mental health literacy and stigmatizing attitudes with those observed in other studies of Australian and Japanese participants, and to investigate how mental health literacy and stigmatizing attitudes contribute to various views of triggers of mental disorder. Total 287 participants were recruited by convenience sampling technique. Findings revealed that a much lower percentage of Taiwanese people could correctly identify depression and schizophrenia than the Australians. The Taiwanese respondents viewed psychiatrists and health psychologists as more supportive than social workers and general practitioners (GPs) and demonstrated greater confusion regarding the efficacy of such drugs relative to the Australian and Japanese samples. Interestingly, Taiwanese Chinese have relatively elevated rates of schizophrenia stigma, but lower levels of depression stigma relative to Japanese respondents. Taiwanese respondents with higher rates of schizophrenia-related mental health literacy were less likely to associate with individuals with schizophrenia than those with lower levels of mental health literacy. It was concluded that public education programs are needed to improve knowledge of various mental illnesses and reduce stigmatizing attitudes among Chinese Taiwanese people. In To order to create culturally appropriate instructional services, attention must be given to the above socially and culturally based values [7].

One of the community-based research conducted in Udupi district of South India to determine the understanding of stigma against mental disorder revealed/indicated that .... The study design was conducted cross-sectionally among 445 respondents who were selected through convenience sampling. Result stated that 74.61%. Stigma prevalence was high under all four CAMI scale domains. High prevalence of inequality was found among women and those with higher incomes. The report indicates that there is a clear need to remove mental illness-related discrimination and boost the region's mental wellbeing status [8].

Regmi and others studied about the Mental Health of Nepali Migrants in India [9]. Khatib et al conducted a review on effect of electronic media among children and adolescents on substance abuse [10]. There are studies addressing different mental health problems in this region [11-13]. Joshi et al compared total self-stigma between schizophrenia and alcohol dependence patients [14]. Padole studied about stigma related to psychiatric disorders among physiotherapy students in Central India [15].

6. CONCLUSION

Poor mental health literacy and stigmatizing attitudes towards mental illness is more among community people so there is need to prevent the mental illness stigma in community and educate the people regarding mental health and measures to tackle mental illness stigma.

CONSENT AND ETHICAL APPROVAL

It is not applicable.

COMPETING INTERESTS

Authors have declared that no competing interests exist.

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