



# Stigma, Self-Stigma, and Identity in Severe Mental Illness: Negative Consequences and Ways to Counter

*This product accompanies the 'Stigma, Self-Stigma, and Identity in Severe Mental Illness: Negative Consequences and Ways to Counter Panel ' which is available for viewing [here](#).*

## Overview of Self-Stigma and Severe Mental Illness

Public mental health stigma is pervasive and has many negative impacts. One consequence is that it can lead to self-stigma among mental health service users, including people with severe mental illness. This info sheet discusses how self-stigma can impact identity development of service users and shares ways that mental health staff can help combat mental health stigma.

### Moderator:

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## What is Stigma and Serious Mental Illness (SMI)?

### What is Stigma?

- Stigma refers to negative attitudes towards or discrimination against a group of individuals based off certain attributes
- Stigma often stereotypes groups by pushing harmful, disrespectful beliefs into social spaces

### What are Serious Mental Illnesses (SMIs)?

- Serious mental illnesses are mental, behavioral, or emotional disorders which lead to a severe impairment in the quality of one's day to day life and limit one or more major life activities<sup>1</sup>
- Examples of SMI include<sup>2</sup>
  - Bipolar disorder
  - Major depressive disorder
  - Schizophrenia



# What is Stigma and Serious Mental Illness (SMI)? Cont.

## What is Stigma in Mental Health? <sup>3</sup>

- Stigma in mental health refers to negative attitudes towards mental illness
  - An example is believing that an individual with mental illness is “dangerous, incompetent, [and has] character weakness” <sup>4</sup>
- There is often the belief that individuals with SMI are:
  - *Likely to be violent*
  - *Not likely to be productive*
  - *Shouldn't care for children*
- **The presence of stigma in mental health settings can prevent individuals from seeking care**
  - In 2020, about 65% of the approximately 14 million individuals with SMI received care <sup>4</sup>
- There are multiple forms of stigma including structural and interpersonal/public
  - **Structural or institutional** stigma refers to negative attitudes toward mental illness that are perpetuated by an organization's policies or through legal frameworks <sup>5</sup>
  - **Interpersonal/public** stigma is the most common when discussing stigma in general terms, and refers to negative attitudes from the public towards individuals with mental illness <sup>5</sup>

## What is Self-stigma? <sup>6</sup>

- **Self-stigma is the manifestation of agreeing with negative attitudes towards one's own mental illness** and can also be referred to as internalized stigma
  - Self-stigma has been related to **poor health outcomes** such as failure to seek/access treatment and poorer quality of life
- A person is never to blame for having self-stigma, as it is an effect of external stigma
  - There are further concerns about:
    - *Independency, disconnectedness*
    - *Reduction of self-esteem & self-efficacy*
    - *How stigma affects identity*



## Discrimination in Health Care<sup>9</sup>

- Consumers of mental health services and their families often describe mental health professionals as a source of stigma, with specific **providers frequently focusing on the disease and ignoring the person**
- Mental health professionals unfortunately can **endorse stereotypes** about mental illness
  - Discrimination can include providers withholding diagnoses or not giving explicit diagnosis in an effort to avoid labels
  - Mental health professionals who reinforce stigma show negative attitudes about prognosis and fail to maintain a recovery-oriented narrative
- Professionals reinforcing these attitudes can impact the individual's quality of care and treatment they receive, affecting their overall wellbeing and recovery
- Primary care providers may misattribute signs and symptoms of physical illness to mental health which leads to under-diagnosis and mistreatment of physical conditions

**In a study of California adults, 4% reported being discriminated against while accessing mental health or substance use services<sup>7</sup>**



# Identity & Self-Stigma

## What is One's identity? <sup>9</sup>

- **Identity is an individual's sense of self and the roles they occupy in their life**
- The onset of SMI often occurs in adolescence and early adulthood, which are key periods of one's identity development
  - Developmental Theory posits that youth often struggle to develop a coherent identity, in which they may experience diffusion
    - **Diffusion:** a state in which the individual may have difficulty in locating themselves meaningfully in a social setting and drift from one venture to another

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## Identity, Mental Illness, and Self-Stigma

Through different processes, the idea of having a mental illness can take over one's identity and take priority over other identity categories

### Link's Modified Labeling Theory <sup>7</sup>

Socially held stereotypical attitudes about mental illness are absorbed during childhood which then take on personal relevance when a person is diagnosed fostering increased negative emotions

According to this perspective, it is not necessary for one to even experience stigma or discrimination directly to become aware of it

- Self-stigma can lead to **over** or **under** identification with illness
  - **Under identification**
    - Not wanting a label
  - **Over identification**
    - Ignoring other identities and focusing only on treating illness



# Fighting Against Stigma

## What can we do? <sup>9</sup>

- **Use Person First Language in Conversation**

- Person first language is important because it centers the individual before their illness (person with “illness” i.e., depression)
- In certain communities, the condition IS important to be mentioned first such (i.e., in the deaf community)

- **Confront and Advocate About Mental Health**

- Challenging and questioning stigma
  - In the workplace
  - Family and friends
  - In yourself
- Being an ally/advocate
  - Getting involved with mental health organizations such as NAMI and volunteering
- Engaging in community and political work



- **Continuing Education and Setting Goals**

- It is important to continuously educate oneself and others about stigma, stereotypes, and discrimination
- Promoting Recovery Attitudes
  - Community integration
    - Replace public stigma with commitment to helping people achieve their goals in their community
  - Personal Empowerment
    - Ensuring that people with SMI have complete control of their own life (shared decision making)



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