"Shhh... Let's Not Talk About That Now“ - Stigma: A Barrier to Progress

Kari Finley, Ph.D.
Jamie Arpin, B.A.

June 21, 2018 | 3:15 PM – 4:15 PM
Adam Blua, Chief Psychiatrist for the New York City Board of Education in 1946, warned,

"that unless retrained, left-handed children risked severe developmental and learning disabilities..."

Agenda

• Defining Stigma
• How Stigma Shows Up
• Why Stigma Matters
• Ways to Reduce Stigma
Defining Stigma

“A strong feeling of disapproval that most people in society have about something.”

“A mark of disgrace or dishonor associated with a particular circumstance, quality, or person.”

Webster’s New World Dictionary

Stigma can result in

• negative attitudes about people with a condition
• discriminatory behaviors and policies.

Defining Stigma

Public Stigma

• Barrier to new relationships
• Isolate individuals
• Reduce employment
• Reduce access to housing

“Substance use disorder is among the most stigmatized conditions in the US and around the world. People do not want to work with, be related to, or even see people with a substance use disorder in public. Further, many believe that people with a substance use disorder can or should be denied housing, employment, social services, and health care.”


“Humiliation, shame, guilt and angst are not the primary engines of change. Ironically, such experiences can even immobilize the person, rendering change more remote.”

Approximately two-thirds of individuals with substance use disorders do NOT seek treatment... and stigma may be one contributing factor to this underutilization.

Defining Stigma

Public Stigma

Self Stigma

 Courtesy Stigma

- Isolate family members
- Lead family members to feel guilty
- Create a sense of shame
- Less likely to encourage treatment

Defining Stigma

Public Stigma

Self Stigma

Courtesy Stigma

Laws, Policies, Rules

Structural Stigma
- Increase barriers
- Reduce access to treatment and ongoing care
- Reduce employment opportunities
- Poor health outcomes
Defining Stigma

- **Public Stigma**

- **Self Stigma**

- **Laws, Policies, Rules**

- **Structural Stigma**

- **Courtesy Stigma**
Activity

With a partner at your table, discuss how you have seen these different kinds of stigma (Public, Self, Courtesy, and Structural) show up.
I began to wonder....

What are the differences between non-stigmatized versus stigmatized conditions?
Theories

- Labeling Theory
- Attribution Theory
Six Contributing Factors

- Low Stigma
- High Stigma

- Concealability
- Course
- Disruptiveness
- Aesthetic Qualities
- Origin
- Peril

Four Ways to Reduce Stigma

1. Change our language and labels
2. Learn about the issue
3. Personal experiences
4. Review practices and policies

Activity – Personal Action Plan

As we talk through each of the ways we can reduce stigma, time will be provided to reflect and write down some of your thinking on Personal Action Plan provided in your workbook.
The language we use to describe people matters.

“Angie is bipolar.”

vs.

“Angie has a bipolar disorder.”

“Protest any labels that turn people into things. Words are important. If you want to care for something, you call it a ‘flower’; if you want to kill something, you call it a ‘weed.’”

Don Coyhis

<table>
<thead>
<tr>
<th>Common Labels</th>
<th>Person First Language</th>
</tr>
</thead>
<tbody>
<tr>
<td>Addict</td>
<td>Has a substance use disorder</td>
</tr>
<tr>
<td>Schizophrenic</td>
<td>Has schizophrenia</td>
</tr>
<tr>
<td>Learning Disabled</td>
<td>Has a learning disability</td>
</tr>
<tr>
<td>Autistic</td>
<td>Has autism</td>
</tr>
<tr>
<td>Southpaw, lefty,</td>
<td>Is left handed</td>
</tr>
</tbody>
</table>

Reflection - Language and Labels

How could the language you use personally or professionally change to be more inclusive and less stigmatizing?
Stigmas are slow to change, even when evidence no longer supports the underlying assumptions.

Learn About the Issue

Research shows that education reduces stigma.

What do you need to learn more about?

- Brain Science of Addiction
- Mental Health Disorders
- Brain Science of Trauma
- Medication-Assisted Treatment (MAT)

Reflection – Education

What are some stigmatizing assumptions you are making that need to be challenged?

What are some learning opportunities you are willing to seek out?
Experiences can change our beliefs.

Reflection – Experiences

What experiences either personally or professionally have changed your worldviews and expanded your thinking?

What are some intentional experiences you can seek out to reduce stigma?
Ask those you serve with various conditions how practices and policies may impede

- access to services,
- compliance with treatment, and
- overall healing and well-being.
Reflection – Practices and Polices

What practices and polices in your organization might be contributing to stigma?

How could these practices or polices be changed?
What if we could eliminate stigma?
Adam Blua, Chief Psychiatrist for the New York City Board of Education in 1946, warned,

"that unless retrained, left-handed children risked severe developmental and learning disabilities...”


Bibliography continued...


