

Mental Illness Stigma and Its Effects on Recovery

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Persons who have mental illness often experience stigmatization. These people then internalize the negative attitudes of society and convert to self-stigmatize (Podogrodzka-Niell and Tyszkowska, 2014). A noteworthy share of society grasps a negative attitude on the road to the mentally ill, and this behaviour has not altered for years. This is still happening in society, even with the promotion of information about mental illnesses and their increasing recognition of psychiatric treatment.

There are different forms of stigma: prejudice, discrimination, dread, disgrace, suspicion, and stereotypes. It refers to the behaviour of people who have a mental illness; people seize the stereotypes about mental illness constructed by society towards themselves. They assumed that they would be rejected socially and possess no value for society. They fear direct discrimination by society due to mental illness. The general public in the Western world is considered responsible for the construction of stigmas. People in the Western world have stigmatizing attitudes about mental illness, and in this list, well-trained professionals are included along with the general public. This paper will discuss stigmatization and how it affects the process of recovery of people who have any mental illness.

There are internal and external sources of stigma, which can consist of unconscious comments and conducts, or these can be determined actions. People can also be self-stigmatized because of internal factors. Both become the source of loss of self-esteem and an open approach towards treatment (Markowitz, Angell and Greenberg, 2011). This approach then has an effect on the process of recovery because of loss of self-esteem as this self-esteem was necessary to increase the ability to change. There can be structural discrimination, and society may reduce the number of available resources for these people. For example, there can be an inefficient system of mental health care for these patients in the context of stigma. Stigmatizing behaviours are not always evident, and there can be a manifestation of these behaviours in subtle forms. When people have internal and external stigmatization, then they have strong feelings of shame related to a specific attribute of their personality or the illness. Moreover, a person with stigmatization is expelled from various zones of social functioning because of his rejection and discrimination in society.

Thus, stigma affects people's lives people who have mental illness in many different ways. The main disadvantage of stigma is that it proves a hindrance in the way of the recovery process from mental illness. It is a barrier to pursuing early treatment, as people mostly do not go for professional help until they suffer from serious symptoms. Due to the stigma, people may also disengage from therapeutic interventions, or they may not continue their medication. All these serve as sources of hindrance in the recovery process. Recovery is a process that enables the person to have a sustaining

and optimistic life along with dealing with all the limitations of the illness (ANGERMEYER and Schomerus, 2012). A recovery process is related to stigma, but these are contrary concepts. For example, if recovery has a claim that there is a half-full glass of opportunities, then stigma has a claim in the opposite direction that there is a half-empty glass. Challenges are identified and accepted in the recovery process, while in stigma, there is the identification of obstacles. If a person has a mental illness and the general public associate stigma with this, then the person's self-esteem declines. A person is also not able to continue the recovery process as a result of a stigma associated with them due to mental illness. There is also a reduction in social opportunities, which can include employment opportunities or lower employment rates along with accommodation. People, due to the associated stigma, did not want to be connected with these people and stigmatized them. Thus, when people do not want to have a stigma associated with them, then they avoid the treatment and drop out of treatment. This not only affects people who have mental illness, but it is a source of disturbance for those also who are linked with these patients. This is a societal perspective and is not an individual one. This is also rooted in culture, which has an important influence on this process. Some social factors affect the process of recovery and, at the same time, also become a source of stigma for people who have mental illness (Podogrodzka-Niell and Tyszkowska, 2014). These include public perception along with the media coverage of the illness. Moreover, the patient's social network, their attitude and the role of the family are the main factors. These all serve as a source of an obstacle to the process of recovery.

For example, the media, as the main factor, plays a crucial role in spreading the process of stigmatization due to the large coverage ability. The social reluctance is mainly due to stereotypical media coverage related to the illness. For example, the media tries to highlight the criminals associated with certain mental disorders. It also shows people who have mental illness as poor, ignorant, and wicked. The only social support that these people get is from their family as they have a poor social network, or it is limited only to their family system. Therefore, stigma can jeopardize the recovery process at a time when people require a lot of support, reinforcement, and love. It becomes the source of diminishing their ability to track a pathway of health concerning the body as well as spirit.

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