Social stigma

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Overview

- What is stigmatization?
- Determinants of stigmatization
- Consequences of stigmatization
- Stigma and social interaction
- How can we reduce stigmatization?
- AIDS-related stigma in developing countries
Definition of Stigma

An attribute or characteristic of a person that is deeply discrediting. This attribute is devalued in a particular context and calls into question the full humanity of this person. Because of this negatively valued attribute, persons are devalued, spoiled or flawed in the eyes of others (Crocker et al., 1998; Jones et al, 1984)
Stigmatization vs. stereotyping

- Stigmatization is always negative, whereas stereotyping can also be positive
- Stigmatization more at individual level than stereotyping
Manifestations of stigmatization

Overt behavioral manifestations
  dehumanization
  threat
  avoidance
  social rejection

Subtle manifestations
  non-verbal expressions of discomfort
  ambivalence in social interaction
Dimensions of stigmatization
Goffman, 1963

- Tribal stigma
- Abominations of the body
- Blemishes of individual character
Dimensions of stigmatization
Jones et al., 1984

- Concealability
- Course
- Disruptiveness
- Aesthetic qualities
- Origin
- Peril
Determinants of stigmatization

- Onset controllability
- Contagiousness
- Seriousness
Cognitive-emotional Model of stigmatization

Contagiousness of Disease

Seriousness of Disease

Onset controllability

Fear

Pity

Anger

Stigmatization
Public Reactions to Persons With HIV in the Netherlands


Risk perceptions quite realistic.

Stigmatizing responses reported by relative small number of people. However, less compassion for persons with HIV compared to other serious diseases.
Consequences of stigmatization

- Social consequences
- Psychological consequences
- Health consequences
Social consequences

Disruption of relationships with acquaintances, relatives or friends

Hamper development of new relationships

Reduced social network and social isolation
Psychological consequences

Anxiety

Depression

Lower self-esteem?
Health consequences

Limited number of social support providers

Delays in treatment or testing
Coping with stigma

- Problem-focused coping
  - Self-oriented
    - Concealment
    - Eliminating stigmatized condition
  - Other-oriented
    - Campaigns to reduce stigmatization

- Situation-oriented
  - Avoidance of certain situations
  - Seeking affiliation with similar others
Coping with stigma

- Emotion-focused coping
  - Downward social comparisons
  - External attributions
  - Disengage self-esteem from particular stigmatizing contexts
Dilemma of disclosure

- Disclosure: social support versus social stigma
- Drawbacks concealment:
  - no social support
  - stress: constantly ‘on stage’
Stigma and social interaction

- Awkward moments
- Ambivalence
Why do awkward moments occur?

The perceiver:

- Fear of danger
- Stigma by association (courtesy stigma)
- Statistical infrequencies of some stigmas
- Thought suppression
- Misinterpretations
- Hostility and just-world beliefs
- Approach-avoidance mechanisms
- Contradiction of verbal and nonverbal behavior
Why do awkward moments occur?

The stigmatized:

- Fear of rejection
- Being ‘on stage’
- Self-loathing
- Overinterpretation
Reducing stigmatization

- Changing stereotypes
- Personal contact with members of stigmatized groups
- Interaction strategies
Changing stereotypes

- Suppression of stereotypes
  ... Rebound effects

- Exposure to stereotype-inconsistent information
  ... Subtyping
  -> Stereotype-disconfirming attributes must be present among large number of group members
  -> Stereotype-inconsistent information must not differ too much from people’s preexisting stereotypes
Personal contact with members of stigmatized groups

- Contact hypothesis
- Extended contact hypothesis
- Empathy
Interaction strategies

Stigmatized individuals can foster positive social reactions in initial encounters by adopting certain interaction strategies. This might be useful to ‘break through’ initial contact.

Keep in mind that persons with HIV are not held responsible for reduction of stigmatization.

Fighting stigmatization at all levels.
Interaction Strategies

Interaction strategies to reduce stigmatization of persons with HIV

- Predictable behavior
- Coping with HIV
Interventions That Have Been Effective in the Past

Review of 22 interventions to reduce HIV/AIDS stigma (Brown, Macintyre & Trujillo, 2003)

14 studies: increase tolerance in the general population
5 studies: increase willingness to treat PLHA among health care workers
3 studies: improve coping strategies to deal with HIV/AIDS stigma
Interventions That Have Been Effective in the Past

Four types of interventions:
- Information-based approaches
- Skills building
- Counseling approaches
- Contact with affected groups
Interventions That Have Been Effective in the Past

Majority of studies reported some positive results, many also found negative or mixed results

- publication bias
- long-term effects unknown
- limited number of participants
- most studies (n = 16) conducted in developed countries
- no national level interventions to combat stigma...
Interventions That Have Been Effective in the Past

Implications for interventions

- Information together with skills building is more effective than information alone.
- Contact with PLWA is one of the most promising approaches, but it is clearly not sufficient without improved understanding about the disease (e.g., together with information approaches)
Mass-media Campaigns

Only a few campaigns have been evaluated: limited results.

Mass-media campaigns
- May be used to reinforce knowledge about HIV transmission through casual contact.
- May also try to increase compassion for people with HIV and intensify people’s involvement with HIV.
- May be used as an umbrella for other interventions to reduce HIV/AIDS stigma.
AIDS stigma in developing countries

ICRW-research: Causes of AIDS stigma in developing countries:

1. Lack of in-depth knowledge about HIV transmission
2. AIDS is seen as killer disease (fear of death)
3. AIDS is associated with norm-violating sexual behavior
4. Personal responsibility for immoral sexual behavior
5. HIV is seen as a punishment from God for sexual sins
AIDS stigma in developing countries

ICRW research: Five guidelines for AIDS stigma interventions in developing countries:

1. Create greater recognition about stigma
2. Provide in-depth knowledge about all aspects of HIV/AIDS
3. Provide safe spaces to discuss stigma related values and beliefs
4. Use language of the target population
5. Involve PLWA!
Current research

- Determinants of AIDS-related stigmatization in developing countries
- Fear of stigmatization as barrier for HIV testing
- Reflexive and reflective reactions to AIDS stigma
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