

Well@Work Podcast Episode 7: Stigma

Welcome to the Well@Work podcast from the University of Kentucky Center on Trauma and Children. This podcast is being brought to you by a grant from SAMHSA to the Department of Behavioral Health. On this episode of the podcast, Dr Scott LaJoie discusses stigma and gives us some tips on how to avoid stigmatizing people affected by COVID-19.

Hello, I'm Dr Scott LaJoie, a behavioral scientist and professor in the School of Public Health at the University of Louisville. Thank you for listening to this Well@Work podcast, it is our hope you will find information that helps you adapt to the demands and stressors brought on by the COVID-19 pandemic. Today's discussion is about stigma. In the context of health, stigma is the association between a person or group of people who share certain characteristics and a specific disease. With each infectious disease outbreak, it is inevitable that stigma will raise its ugly head. In 2009, the H1N1 outbreak was initially labeled the "swine flu," pig farmers around the world were targeted. When H1N1 struck Mexico particularly hard, many Americans became frightened by Mexicans and particularly Mexican migrant farm workers. With Ebola, stigma against all people from the African continent resulted in a backlash against refugees. In the current pandemic, Asians, and particularly Chinese, have experienced a significant rise in attacks stemming from the belief that Asians cause the pandemic and are likely to be infected. Stigma can be very harmful, resulting in people being labeled, stereotyped, bullied, discriminated against, or losing status because of a perceived link with the disease. In the current pandemic, there have been innumerable reports of people who appear Asian being shunned and isolated, many have been attacked both verbally and physically. Stigma-based fear has led to economic damages for Asian businesses; for example, many people in the US are refusing to eat Chinese food out of fear of concerns of COVID-19.

But why do we use stigma? It turns out we are hardwired to want to avoid people who might make us sick, we look for characteristics that help us decide if someone is healthy, healthy or not. If you see someone who has just vomited, your natural instinct is to step back to avoid touching that person so you don't contract whatever is making them ill. Valerie Earnshaw, a social psychologist at the University of Delaware who studies stigma in health, links stigma to a cognitive bias called the "Just-World Fallacy." "The Just-World Fallacy," she wrote in a recent Harvard Business Review article "reflects the observation that people believe good things happen to good people and bad things happen to bad people." When something bad happens, we assume they deserved it. We blame them for their misfortune: you have COVID-19 because you didn't wash your hands well enough. Stigma is a heuristic that we use to create separation between us and others when we perceive the others put us at work, at risk. Unfortunately, stigma and stigmatizing language is really harmful and counterproductive. In the context of health, people of a stigmatized group are less likely to get tested, to tell anyone that they are sick, to avoid seeking health care, or engage in healthy behaviors like mask wearing or self-quarantining. Consequently, the person experiencing stigma is at a greater risk of becoming sick and inadvertently causing others to become sick. In one report by the World Health Organization, a study participant in Iraq vocalized the consequences of stigma, "Stigma in some areas is cultural or grounded in social beliefs around the shame of getting a communicable disease. I think a lot of people don't





understand that we are all vulnerable to COVID-19; acquiring the disease can happen to anyone and we need to focus on raising awareness and educating ourselves on preventive medicine measures, the top of which is social distancing and hand hygiene. There's no shame in going into quarantine or staying away from family and friends if you're sick." he said. Stigma doesn't just affect people who are associated with the origins of the disease, if someone is stereotyped as a potential source of infection they can be the target of stigma. Here is a list of people who have reported experiencing stigma: people who have recovered from COVID-19; people who are getting tested for COVID-19; people who wear masks or people who don't wear masks; scientists and medical researchers; people who are vulnerable, including the elderly and the immunocompromised; people who have a health condition that makes them cough, like people with asthma or allergies; people who are experiencing anxiety or fear of going out; and health care workers who may or may not be treating persons with COVID-19. So basically, during a disease outbreak, almost anyone can become a target of stigma.

What can be done? Words matter. Here are some practical tips for avoiding stigmatizing others with your words. Tip number one: separate the person from having an identity defined by COVID-19. It is COVID-19, not the Wuhan virus or the Chinese virus. COVID-19 stands for the new Coronavirus that emerged in 2019, it is named specifically so as to not associate the virus with a place or people. Tip number two: use person-first language. Instead of talking about COVID patients or COVID victims, refer to them as people who are being treated for COVID, people who have COVID or people who have recovered from COVID, people who died from complications of COVID. People are suspected to have COVID, they are not suspected cases. People contract the disease, not people spreading or transmitting the virus to others.

Tip number three: share scientific information, not rumors. Avoid using words meant to create fear like "deadly" or "plague" or "apocalypse." Focus on the positive, emphasize prevention and treatment. Talk about the collective solidarity such as "we are all in this together." And for healthcare workers, it is crucial to maintain privacy and confidentiality of people getting tested, seeking care, or identifying or being identified during contact tracing.

Tip 4: play your part in ending the infodemic. As healthcare professionals, we must also, we must act to end the infodemic as diligently as we act to end the pandemic. We should call out people who are spreading misinformation. We need to be allies of those who are experiencing stigma. And we need to monitor our own words and actions so that they don't discriminate or alienate certain groups of people; this includes our words in real life and on social media. For more information on stigma, the World Health Organization and the Centers for Disease Control and Prevention are great places to start. The Johns Hopkins University Center for Communication Practices has resource guides for communicating about COVID-19. Thank you for your attention and we hope you found this information helpful. Please look for additional podcasts by us on healthy coping during a pandemic and remember stay well at work.

Thank you for listening to this episode of the podcast, follow the link in the video description for more resources on our Well@Work website. And of course, stay tuned for more episodes on topics that will keep you well at work.

