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# SELF-STIGMA

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Winter 2013

[www.sane.org](http://www.sane.org)



# Imagine a life without stigma. We did . . .

Many people living with mental illness say that stigma can affect them as badly as their symptoms. A major new report from SANE Australia examines the impact of stigma and what can be done about it.

'We will never truly have progress in mental health without tackling stigma,' says Jack Heath, CEO of SANE Australia. 'Our new report – *A Life without Stigma* – doesn't just take an in-depth look at stigma and its impact. The report also examines what countries around the world are doing to improve understanding of mental illness, identifies what really works, and makes concrete recommendations for what Australia needs to do.'

'I'm delighted that Barbara Hocking, my predecessor as Chief Executive of SANE until 2012, agreed to write this report for us,' says Jack. 'Barbara is respected internationally for her work in this area, and there is no person better qualified to do it. We are committed to advocating for the report's recommendations, especially to reduce the persistent stigma associated with schizophrenia and other psychotic illnesses.'

## ➤ A Life without Stigma

Copies of the report are being distributed with this issue of *SANE News* and are also available as a PDF from the *Research* area of the SANE website at [www.sane.org](http://www.sane.org).



## SANE Express

Have you signed up for *SANE Express* yet?

Our regular enewsletter gives you a snapshot of SANE Australia's work and other mental health-related topics in your inbox every month.

➤ Sign up from the front page of [www.sane.org](http://www.sane.org).



## Jack's diary

It's not every day you get an invitation to the White House in Washington DC . . .

On 3 June, President Obama held a meeting to discuss reducing stigma in the United States and improving access to mental health services. Attendees included mental health advocates and experts from across the United States, including people affected by mental illness and family carers. Invited due to his previous role as founder and CEO of youth mental health organisation, Inspire USA, Jack was able to share Australia's experience in early intervention programs and combating stigma through initiatives such as the Australian Government's Mindframe program, beyondblue, and the work of SANE Australia's Media Centre and StigmaWatch.



## Emergency services and mental illness

*SANE Research Bulletin 17*

What happens when there's a mental health crisis and you call 000? How well do emergency services respond? And what improvements are needed?

SANE Australia asked over 600 people affected by mental illness and carers these questions among many others. See what they said in our latest Research Bulletin, *Emergency services and mental illness*.

The Bulletin is available to download as a PDF from the *Research* area of the SANE website at [www.sane.org](http://www.sane.org).



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**A new report from  
often 'the most h  
And what can be**

## What is self-stigma?

Self-stigma happens when we accept other people's negative, inaccurate views about ourselves. We internalise their prejudice – leading to low self-esteem and self-efficacy.

When someone is affected by mental illness, their knowledge about it and their attitudes vary as they do among other people in the general community. Misunderstandings and negative attitudes towards mental illness can also be reinforced by the attitudes and behaviour they encounter.

It is one of the most tragic consequences of stigma, therefore, that many people affected by mental illness come to accept that they are less worthy of respect than others; that they have nothing to contribute to society, and that there is no hope of recovery or progress in their lives.

Self-stigma is related to the broader concept of 'stereotype threat' in social psychology, where anxiety about confirming a negative stereotype regarding oneself affects performance and behaviour. This has been shown to affect people on the basis of race, sex, and social class, and research also suggests an impact based on stereotypes about mental illness.

An Australian study\* has shown that people with schizophrenia rated more poorly on social skills when they believed they were identified as having a mental illness. Awareness of stigmatising beliefs made them anxious and actually perform worse – thus unfortunately reinforcing the prejudice they encounter.

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\* Henry, J et al 2010. Stereotype threat contributes to social difficulties in people with schizophrenia. *British Journal of Clinical Psychology*, 49, 31-41.

# SELF-STIGMA

in SANE Australia – *A Life without Stigma* – identifies self-stigma as a harmful form of stigma'. What does this mean? What harm does it do? What can be done to help . . ?

## What's the harm?

Self-stigma not only affects how people feel about themselves, it has an impact on their behaviour too, working against effective treatment, support, and recovery.

Accepting others' prejudiced beliefs about mental illness leads those affected by self-stigma to believe they are less worthy of respect and inclusion in society. This has a profoundly corroding effect on the sense of self, of *who you are*. When this occurs on top of symptoms and other difficulties in life, it's no surprise that it can have a severely negative impact on recovery.

Self-stigma contributes to social isolation and loneliness. Belief that the illness is a 'life sentence', with no hope of improvement or acceptance as part of the community, also leads to a sense of hopelessness. It seems pointless to seek improvement of life through rehabilitation, employment, attempts at socialising, or even something like giving up smoking, for example. If stigma from others is encountered, this only reinforces negative feelings about oneself, creating a vicious circle of stigma.

Self-stigma can affect people with a range of mental illnesses, and has a particularly harmful effect on people with schizophrenia and other psychotic conditions, because of the persistent negative beliefs about them in the general community. The self-stigma can then inhibit people from seeing a doctor for assessment and diagnosis, or from seeking help, thus increasing the harmful impact of the illness by increasing the duration of untreated symptoms.

## How can we help?

Reducing self-stigma is an essential part of any initiative to combat stigma against mental illness in the community, and so promote recovery as well as social inclusion.

Self-stigma cannot be tackled in isolation. To be effective, any activities need to be integrated with programs to reduce stigma generally. A report for the Mental Health Foundation of New Zealand, *Fighting Shadows* (2008) examined the issue of self-stigma in detail, concluding with eight recommendations to eliminate it:

- recognise the contribution of [people with] mental illness and foster leadership
- celebrate and accept difference
- affirm human rights
- encourage disclosure
- encourage recovery-oriented practices
- encourage empowerment
- support peer support services
- challenge attitudes and behaviour.

SANE's new *A Life without Stigma* report states that 'Australia now needs a national, long-term strategy and campaign to reduce the stigma and discrimination associated with mental illness, with a particular focus on psychotic illness.' Tackling self-stigma must be an integral part of that strategy.

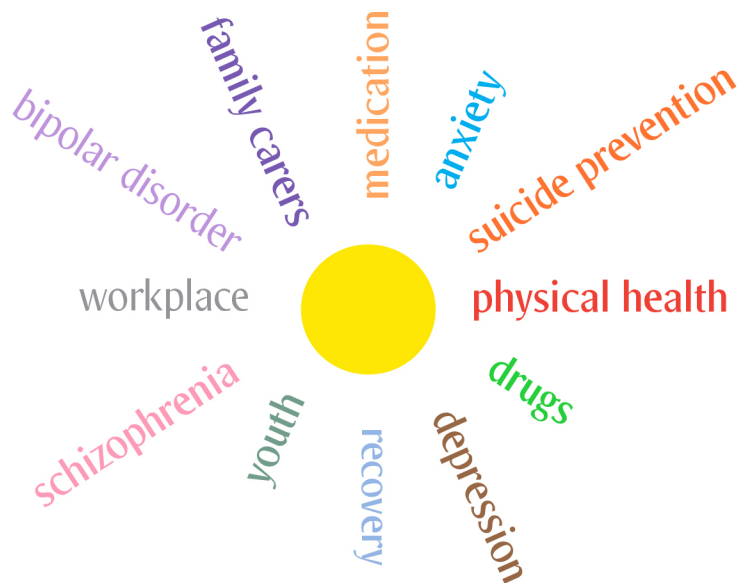
### ➤ Find out more

*A Life without Stigma* is available from the **Research** area of [www.sane.org](http://www.sane.org). The website also contains information about the work of the SANE Media Centre and StigmaWatch program to reduce stigma about mental illness and suicide.



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## The SANE Guides. Everything you need to know about mental illness, treatments, and recovery.



Available in ebooks and print editions, *SANE Guides* are easy-to-read handbooks especially for the everyday reader, explaining symptoms, treatments, support services, and – especially – what we can do to help ourselves when affected by mental illness. Written in partnership with people who have mental illness and family carers, as well as other experts, they are ideal for anyone who want to get to grips with the effects of mental illness, and start on the road to recovery.

### End of year sale

Every year, SANE Australia holds a special end of financial year sale.

The *SANE Guides* and all our other publications are available at a 20% discount – only available by using the special order form in this issue of *SANE News*. Running until 30 July 2013, the sale is a great way to stock up on these valuable resources.

	Copies	Cost\$
<b>SANE Guides</b>		
SANE Guide Set (save 10% on set of 16 SANE Guides)	\$216	
SANE Guide to Anxiety Disorders	\$15	
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You're not alone: A SANE Guide for Children (suitable for 6-12 year olds)	\$15	
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Depression DVD Kit (DVD 43 mins, and SANE Guide to Depression)	\$48	
Bipolar Disorder DVD Kit (DVD 40 mins, and SANE Guide to Bipolar Disorder)	\$48	
Schizophrenia DVD Kit (DVD 37 mins, and SANE Guide to Schizophrenia)	\$48	
Mental Illness and Bereavement Kit (DVD 23 mins, and SANE Bereavement Guidelines for health professionals)	\$48	
SANE SmokeFree Kit – Third, Revised Edition (Manual for mental health workers & SANE Guide to a SmokeFree Life)	\$48	

## Pamphlets

Something Is Not Quite Right: Getting help early for mental illness (Pack of 100)	\$25
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When Sadness Won't Go Away: Getting help early for depression (Pack of 100)	\$25
When Sadness Won't Go Away: Checklist Easy-language version (Pack of 100)	\$25
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## SANE Books of the Year

Understanding Troubled Minds, by Sidney Bloch	\$40
Flying with Paper Wings, by Sandy Jeffs	\$33
Back from the Brink Too, by Graeme Cowan	\$33
Understanding Depression, by Maria Prendergast	\$30
Tell Me I'm Here, by Anne Deveson	\$25
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