

Multilevel approach to coping with stigmas identified

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Socially stigmatized groups have poorer health than non-stigmatized groups, but a team of researchers believes that more emphasis on two-way and multidisciplinary interventions will have a greater and more successful impact on relieving many health issues.

"We took an interdisciplinary approach to understanding how to reduce [health disparities](#) due to the effects of [social stigma](#), including stigmas based on race, sexual orientation and chronic illness," said Jonathan Cook, assistant professor of psychology, Penn State.

Stigma results when a negative stereotype becomes attached to a particular characteristic in societal consciousness. People with this specific characteristic come to be seen as lower in status than others and therefore separate. Once separate, these groups become a target for discrimination. Stigma can affect interactions, the availability of resources and the way people think and feel, leading to social exclusion—which is associated with an increased risk of mortality.

Cook and colleagues found that many current coping mechanisms are focused at the individual and group level or at the structural level, but rarely both. At the individual and group level, intervention is often focused on providing education and intergroup contact for members of non-stigmatized groups and helping to bolster coping strategies for members of stigmatized groups. Interventions at the structural level are focused on changing laws and portrayal in popular media.

Stronger interdisciplinary collaboration can help fight against stigma by looking at the issue from multiple angles. In turn, the researchers explain, there would be a reciprocal effect moving from individual to structural and back.

"We found that people don't often look at outcomes across disciplines, and people haven't done much longitudinal work in this area," said Cook. "It's important to look at intervention outcomes over longer periods of time to better understand how change takes place."

The researchers are four of the founding members of a larger group, the Structural Stigma and Population Health Working Group at Columbia University, and report their results in the current special issue of *Social Science and Medicine*.

Educational approaches can be effective at reducing some stigmas, including mental illness and HIV/AIDS. For instance, six months after providing HIV testing, education and counseling to residents of Zambia a decrease in stigmatizing attitudes was found there.

Legislative interventions have been shown to improve the health of stigmatized groups. For example, in the 1960s and '70s, following the Civil Rights Act, a dramatic drop occurred in the rate at which African Americans died—particularly in the Southern states. The researchers note that this drop can be linked to the enactment of the legislation.

"Interventions can take place at multiple points in the system. It may be most effective to simultaneously focus on change at the individual level and larger societal level," said Cook. "Change can be implemented from the bottom up more often, even while efforts at structural change from the top down are still occurring."

Also working on this research was Valerie Purdie-Vaughns, assistant

professor of psychology, Columbia University; Ilan H. Meyer, public policy senior scholar, The Williams Institute, UCLA School of Law; and Justin T.A. Busch, graduate student in psychology, University of Texas at Austin.

Provided by Pennsylvania State University

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