Dissecting the Stigma of Mental Illness

A Review of

On the Stigma of Mental Illness: Practical Strategies for Research and Social Change
by Patrick W. Corrigan (Ed.)
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Reviewed by

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With only a cursory look around, it is easy to identify many examples of the pernicious and ongoing stigma leveled at those who suffer mental illness. For many, of course, this identification does not require even a glance, as they are actively confronted with the myriad effects of ingrained, systemic stigmatization on a daily basis, ranging from subtle deviations from common courtesy when encountering a person with mental illness to the reified split between mind and body evidenced by the ongoing lack of mental health parity in many health insurance plans. This range of insidious effects of stigma is visited on those who suffer mental illness themselves and on those who care for these sufferers (e.g., family members, advocates, mental health professionals). This indisputable and troubling reality, which clearly pervades today’s culture, grants a significance and gravitas to Patrick W. Corrigan’s publication *On the Stigma of Mental Illness: Practical Strategies for Research and Social Change*.

This edited volume flows largely from the research produced by the 6-year-old Chicago Consortium for Stigma Research, a National Institute of Mental Health-funded group of about 25 researchers from seven Chicago-area universities. The multidisciplinary breadth of this collaborative group, which includes sociologists, clinical psychologists, social psychologists, anthropologists, lawyers, and public policy analysts, appears to be a well-suited match for the task of describing, explaining, predicting, and ultimately changing the multidimensional construct of mental illness stigma. The professional backgrounds and research agenda represented in the Chicago Consortium for Stigma Research also provide good clues as to which audiences will find the most value in this book. In particular, advocacy groups, social psychologists with interest in social–cognitive explanations for discrimination, public policy makers, public health researchers, and anyone who has an abiding interest in human and civil rights will find much in this book to inform them, challenge them, and perhaps inspire them to take action.

The volume is divided into four parts, with Part 1 providing an overview of the effects of stigma on those with mental illness and a chapter on research methods and issues in the study of stigma. The effects of stigma are catalogued quite thoroughly and effectively in this book, such as in the following illustration of the impact of structural stigma: “Inability to achieve parity in mental health insurance with general medical coverage may be an example of structural stigma related to mental illness” (p. 32). Certainly, a quick survey of mental health treatment providers, who seem to be in a perennial struggle to keep already thin resources from being further cut, would support this notion. As of this writing, 34 states have laws requiring some form of mental health parity; however, a significant subset of these require such parity only for an overly restrictive and artificial list of (usually) serious mental illnesses. In short, even though some encouraging progress has been
made against this form of structural stigma, these laws unfairly discriminate against adults with such diagnoses as dissociative identity disorder, anorexia nervosa, bulimia, posttraumatic stress syndrome, and substance abuse disorders and children suffering from serious emotional disturbances.

The chapter devoted to methods for studying stigma related to mental illness is well conceived and, it would seem, *de rigueur* for a text such as this. As this is not a research methods text, one would expect the treatment to be fairly general in tone, and that it is. But, interested readers will find very interesting adaptations of standard research methodologies (e.g., surveys, vignette studies) to the problems of stigma, as well as exploration of some that psychologists have often been less comfortable with, or conversant in, such as ethnography and linguistic analyses.

Part 2 of *On the Stigma of Mental Illness* describes a series of particularly strong social psychological studies that illustrate the relevant application of solid research. The experience of stigma is best understood from multiple vantage points, and this section lays out many fascinating perspectives. For example, self-stigma, understood as internalized stereotypical views of self, manifests responses ranging from withdrawal to self-derogation, to responses termed "the fundamental paradox of self-stigma" (p. 71) in which the person becomes "righteously angry at the mental health system... channeling these feelings into activities such as activism and mutual empowerment" (p. 72). Public stigma, exemplified by employment or housing discrimination toward those with mental illness or by hurtful media messages about sufferers, is characterized by discrimination or rejection by the public at large. The book's description of the often-dehumanizing effects of stigma from mental health professionals is bolstered by evidence from "consumer narratives" that "point out that in the course of doing 'good,' many professionals may hold pejorative attitudes toward consumers that are enacted in paternalistic and coercive treatment strategies" (p. 75). This assertion, though disconcerting, is predictable from social psychological theory not cited in the text. For example, in Kipnis's (1987) article titled "Psychology and Behavioral Technology," the author persuasively argued that the reflexive nature of power makes the treatment provider–consumer relationship fraught with danger of coercion and dehumanizing effects. A fuller discussion of the dynamics underlying stigmatization by mental health treatment providers, including the bigotry of low expectations, would have strengthened this section of the book.

Those interested in social psychological descriptions, explanations, and predictions of stigma are well served by this book, which includes excellent treatments of motivational approaches to understanding stigma such as the "just world" hypothesis and social identity theory, as well as social–cognitive approaches, including stereotype suppression, collective representation, and cognitive priming. The book seems to have all the right chapters, including one fully devoted to the issue of dangerousness and mental illness (a widely recognized cause of stigma). As can sometimes happen with an edited volume with many different contributors covering a thematic concept, there is a lot of repetition of some of the themes in the book (e.g., that persons with mental illness are perceived as dangerous, that mental health providers can also be perpetrators of stigma).

As can easily be discerned by its title, the chapter, "Senseless Crimes: Sin or Sickness? Implications for Mental Illness Stigma," deals with an inflammatory, sensational, and inherently fascinating subject. However, the chapter does not quite coalesce into a truly compelling and coherent treatment of the topic, and it is unclear just how much this treatment adds to the understanding of stigma. What might also have been dealt with here is the related topic of the perception by some in fundamentalist religious communities of mental illness as a reflection of the sufferer's sins. These attitudes represent a flagrant form of stigmatization of the mentally ill, and they persist even today, in the third millennium.

Part 3 provides a review of a range of theoretical and research-based methods that hold promise for changing stigma against mental illness, including a valuable discussion of lessons learned on coming out, self-stigma, and the role of the media in perpetuating (and profiting from) stigma. The book's treatment of strategies for changing stigma, which includes protest, education, and contact, is particularly valuable. It is important to note, and the text does, that personal and intergroup contact are well supported in their effectiveness for
ameliorating prejudice, yielding “consistently larger reductions in prejudice” (p. 285) than other methods. This discussion, along with that of “facilitating change in self-stigmatizing cognitive schemata” (p. 257), comes closest to the book title's promise of practical strategies for change.

The concluding chapter of Part 3 is a genuinely creative and laudatory discussion of the potential for changing stigma through media strategies, including notions not likely well known to many psychologists, such as cultural seeding and cause marketing. The latter “is a way for corporations to publicly advocate for causes that support their identity. Done well, these marketing campaigns create ‘good corporate citizens’” (p. 300). This approach has been in the media of late because of the recent rollout of a massive international campaign called “Red,” spearheaded by pop star Bono and a consortium of major international companies (e.g., Ralph Lauren, Nike). This cause marketing campaign, which features “Red” products sold by each company, is likely to raise both consciousness and major funding for AIDS relief in Africa and other parts of the world. Perhaps the mental health analogue to this campaign is not far behind.

The chapter also lays out a series of considerations for a “branding strategy to reduce the stigma of mental illness” (p. 309), including recommendations to “brand psychology as a reliable service,” “an organized and accountable service,” and “a symbol” (pp. 309–310). In this discussion appears the recommendation to “brand psychology practitioners as a personality... establish the personality characteristics of the mental health practitioner as an archetype on its own terms and, thus, as a personality image different from that of physicians” (p. 310). Although this recommendation might be understood as pursuing a proper and desirable outcome for marketers, it seems remarkably out of place to advocate the creation and perpetuation of such stereotypes (even positive ones) in a book on stigma.

Part 4 of On the Stigma of Mental Illness provides an inspirational and heartfelt conclusion wherein Corrigan appropriates Dr. Martin Luther King’s “I Have a Dream” imagery to suggest a world where stigma against mental illness no longer holds sway. It is fair to say that this book, which on the whole achieves its aims admirably, contributes much to the understanding of the forces both compelling and restraining movement toward that dream.

Reference