

Overcoming stigma in mood and anxiety disorders

May 8 2014, by Rosie Hales

Now that Mental Health Awareness Week is well underway, researchers and activists across the country are collaborating on projects in the hopes of eliminating stigma and raising awareness of mental health issues.

One such project is *Overcoming Stigma in Mood and Anxiety Disorders* – a joint initiative between Queen's and Providence Care to tackle the self-stigma felt by many people with mood or [anxiety disorders](#).

As the next round of these workshops begin, Caroline Petznick , Overcoming Stigma's program facilitator and a masters student at Queen's, hopes to see as much success as she has with participants in previous workshops.

Rosie Hales, Communications Officer, sat down with Ms. Petznick to discuss stigma and how people like her are working to eliminate it.

Rosie Hales: Stigma is a term we hear used a lot, but what does it actually mean? And what does it mean to self-stigmatize?

Caroline Petznick: Stigma is a prejudice mostly caused by fear of the unknown. Mental illnesses are, for the most part, invisible. Due to this invisibility, there seems to be even more mystery around these [mental health](#) challenges and this tends to intensify the stigma.

Stigma – whether self or social – develops when people identify their mental illness as something they believe will hinder them in their lives and accepts that idea. In the Overcoming Stigma workshops, we ask people to separate the symptoms of a mental health disorder from the effects of stigma. For example, depression can lead to a lack of energy, but the sense of giving up that comes from self-stigmatizing can also drain a person's energy.

RH: How do these workshops help participants let go of their self-stigma?

CP: The facilitators in these workshops are all people who have been through an Overcoming Stigma workshop before and have then been trained to run the programs. These courses are so meaningful because they are made up of small groups of people at different stages of their mental health challenge: some have just been diagnosed and others have been working through a [mental illness](#) for over 30 years.

The first couple of workshops are a chance to build trust in the group, talk about stigma and different mood or anxiety disorders. We then talk about recovery as a journey. Identifying self-stigma is a real "aha!" moment for many of our participants.

RH: Is there anything you're especially looking forward to in this next step of the pilot project?

CP: I love being able to see the impact these workshops are having on the participants. One of the ways we've seen the impact is through the offshoot groups that have started. Overcoming Stigma participants have come to the end of their workshops and decided to continue meeting each week to continue to support one another and help each other through their different experiences.

RH: What's the most important thing participants can take away from the program?

CP: So many participants join the workshops feeling the guilt and shame that can come from having a [mental health disorder](#). The most important thing we emphasize is that it's not their fault. Mental illnesses are equal opportunity illnesses.

We know that at least 1 in 5 Canadians has a mental health issue – in Kingston that means about 25,000 people are affected. That said, 5 in 5 Canadians has mental health, meaning that mental health impacts us all. There are some great wide-scale projects happening right now to reduce [stigma](#), but we have to make sure that, as individuals, we are looking out for one another too.

Provided by Queen's University

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