

Even when help is just a click away, stigma is still a roadblock

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Stigma is a major barrier preventing people with mental health issues from getting the help they need. Even in a private and anonymous setting online, someone with greater self-stigma is less likely to take that first step to get information about mental health concerns and counseling, according to a new Iowa State University study.

Daniel Lannin, lead author, psychology graduate student and clinical intern at ISU's Student Counseling Service, says self-stigma is a powerful obstacle to overcome. The study was designed specifically to measure how participants responded when given the opportunity to learn more online about [mental health](#) concerns and university counseling services. Of the 370 college students who participated in the study, only 8.7 percent clicked the link for mental health [information](#) and 9 percent sought counseling information. However, those numbers dropped to 2.2 percent and 3.5 percent respectively, among people with high self-stigma.

"It's not just the fear of seeing a counselor or therapist," Lannin said. "It's actually when people are sitting at home or on their phone. That stigma prevents them from even learning more information about depression or about counseling."

The results, published in the *Journal of Counseling Psychology*, illustrate the need for better stigma interventions, he said. Lannin is developing and testing different online interventions, but it's difficult because such efforts are often rejected.

"A lot of people with higher levels of stigma won't even entertain the possibility of a stigma intervention because they see the intervention as going to therapy to be more open to therapy," Lannin said. "It's like telling someone who doesn't like vegetables to eat some broccoli to get over it."

Lannin knows that interventions work. In a previous study, he found participants were more open to receiving help-seeking information after writing a brief essay about a personal value. He says the challenge is designing the intervention so it's not threatening to a person with greater stigma.

College is a time when mental illness is often diagnosed

One in five people struggle with [mental illness](#), and many don't get help, Lannin said. Those who do wait an average of 11 years, before finally seeking treatment. Lannin says distressed students in the study were more likely to click the link for information (8.5 percent probability for those with high self-stigma, compared to 17.1 percent for those with low self-stigma). Distress is like the gas pedal and stigma the brake, he said. Unfortunately, by the time someone reaches a high level of distress, he or she is often struggling to function.

"Identifying distressed students can be difficult because distress affects people in different ways. The main thing we notice is impairment in functioning across multiple spheres. They struggle with school work or with family relationships and friendships. If it gets bad enough, they might struggle with hygiene or start strongly contemplating suicide," Lannin said. "It's not just that they feel bad; it's that functionally they're impaired."

According to the National Alliance on Mental Illness, three-quarters of all chronic mental illness begins by age 24. Lannin says for many young adults this is a time of transition - going to college, working full-time and moving away from home - adding to the reasons they may not seek help. This is another consideration when designing interventions and educational information, Lannin said.

In the paper, Lannin and his colleagues suggested adding brief self-affirmation activities to websites frequented by at-risk populations, as well as links to additional mental health and treatment information. Self-affirmation interventions could also be incorporated into outreach events organized by university counseling centers.

David Vogel, a professor of psychology at Iowa State; Todd Abraham, a lecturer in psychology; and Rachel Brenner and Patrick J. Heath, both graduate students in psychology, all contributed to this research.

Provided by Iowa State University

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