Perceived Stigma and Women’s Health Issues

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Outline

- Introduction
  - Stigma and perceived stigma
  - Psychosocial functioning and health
- Research Program
  - Study 1: Perceived stigma, anxiety, and self-esteem
  - Study 2: Perceived stigma, depression
  - Study 3: Perceived stigma, social support
- Conclusions
  - Clinical Implications
  - Future Directions

Conceptualization of Stigma

- “an attribute that is deeply discrediting” (pg. 13, Goffman, 1963)
  - Discrediting and discreditable stigma
- Prejudice
- Discrimination
### Refining Conceptualization of Stigma

- Stigma and stereotypes common knowledge that becomes personally relevant (Link, 2001)
- Public and self stigma (Corrigan, 2005)

### Prior Research

- Majority of research on stigma
  - Prejudice
  - Discrimination
- More recent efforts on impact of stigma on the stigmatized individual
  - Internalization of prejudice and discrimination

### Conceptualization of Perceived Stigma

- Self-related beliefs and perceptions of public (thoughts, feelings, behaviors of others)
- Shame, embarrassment, projection onto others (Mickelson, 2001)
  - Link with Fear of Social Rejection (Goffman, 1968)
- May apply to variety of experiences, identities, conditions

### Relevance for Psychosocial Functioning and Health

- Stigma
  - Prejudice and Discrimination (e.g., Williams, Neighbors, & Jackson, 2003)
    - Psychological distress
    - Physical health
- Perceived stigma...
  - Psychological symptoms
  - Social interactions and support
  - Help seeking
Current Research Program: Perceived Stigma as Under-Examined Mechanism

Study 1: Perceived stigma, anxiety, and self-esteem

Purpose:
- To test perceived stigma and control as mediators of common psychosocial outcomes associated with abuse

- 177 Low-Income Women with Abusi (past 6 mo)
  - Age: M=30.25, SD=9.10
  - Education: M=12.47, SD=2.02
  - Annual income: M=$9,818, SD=$7,842
  - Employment status: 65.5% unemployed at time of interview
  - Marital status: Married or Cohabiting=24.3%; Never married=46.3%; Separated/Divorced/Widowed=29.4%
  - Race: Caucasian=80.2%, African American=15.3%, Hispanic/other=4.6%

- Women’s abuse experiences and psychosocial outcomes
  - Anxiety
  - Self-esteem

- Perceived stigma may help to explain how abuse comes to link with outcomes
Study 1: Method
“Women’s Life Experiences and Social Relationships”

- Face-to-Face, Structured Interviews
  - Psychological, Physical, Sexual Abuse (modified CTS, Straus et al., 1996)
  - Perceived Abuse Stigma ($\alpha=.86$; modified, Mickelson, 2001), e.g., “I feel ashamed because I have experienced partner violence”
  - Perceived Control ($\alpha=.81$; Mastery; Pearlin et al., 1981), e.g., “there is really no way I can solve some of the problems I have”
  - Anxiety Symptoms ($\alpha=.95$; SCL-90; Derogatis, 1994), “have you felt nervous or shaky inside?”
  - Self-Esteem ($\alpha=.87$; Rosenberg, 1965), “I feel I am a person of worth, at least on an equal basis with others”

Study 1: Perceived stigma, anxiety, and self-esteem

<table>
<thead>
<tr>
<th>Perceived Stigma</th>
<th>Anxiety</th>
<th>Self-Esteem</th>
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<tbody>
<tr>
<td>Physical</td>
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<tr>
<td>Psychological</td>
<td>.51</td>
<td>.82</td>
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<tr>
<td>Perceived Control</td>
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<td>.42*</td>
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<td>Physical</td>
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<td>.42*</td>
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<tr>
<td>Symptoms</td>
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</tr>
</tbody>
</table>

$\chi^2(29) = 42.89, p=.05, CFI = .96, RMSEA = .05$

Study 2: Perceived stigma of poverty and depression

- Purpose:
  - To examine perceived stigma and depression, and to test mediators of the relation

- 210 Low-Income Women
  - Age: M=30.25, SD=9.10
  - Education: M=12.47, SD=2.02
  - Annual income: M=$9,818, SD=$7,842
  - Employment status: 65.5% unemployed at time of interview
  - Marital status: Married or Cohabiting=24.3%; Never married=46.3%; Separated/Divorced/Widowed=29.4%
  - Race: Caucasian=80.2%, African American=15.3%, Hispanic/other=4.6%
**Study 2: Method**

- **Face-to-Face, Structured Interviews**
  - Perceived Abuse Stigma (modified, Mickelson, 2001)
    - Internalized - e.g., “I feel odd or abnormal because of my financial situation”
    - Experienced - e.g., “I feel that others look down on me because of my financial situation”
  - Perceived Support Availability (Dunkel-Schetter et al., 1987)
    - Emotional, informational, instrumental
    - Various support sources (e.g., friends, family, professionals)
  - Fear of Rejection
    - Extent feared rejection of support requests in past six months
    - Various support sources (e.g., friends, family, professionals)
  - Self-Esteem (Rosenberg, 1965)
    - 10 items - e.g., “On the whole, I am satisfied with myself”
  - Depression (CES-D; Radloff, 1977)
    - 20 items reflecting depressive symptoms - e.g., “I felt depressed”

**Study 2: Perceived stigma of poverty and depression**

- Perceived stigma of poverty
  - Experienced stigma
  - Internalized stigma

- Perceived Support Availability
  - .18**

- Fear of rejection
  - .18*
  - .19**

- Self-esteem
  - -.50***
  - .54***

- Depression
  - .17**

-χ²(21) = 23.08, p = .15, CFI = .98, SRMR = .05, RMSEA = .04

(Mickelson & Williams, 2008)

**Study 3: Perceived abuse and social support seeking**

- **Stigma and Strained Relationships** (Goffman, 1963)
  - Non-disclosure of stigmatizing information (Derlega et al., 2002)
  - Unwillingness to seek social support (Williams & Mickelson, 2008)

**Study 3: Perceived abuse stigma and social support seeking**

- Presumed “Costs” of Support Seeking and Disclosure
  - Social rejection

- Alternative Support Processes (Barbee & Cunningham, 1995)
  - Interactive nature of support – network and seeker
    - Less conventional strategy – Indirect seeking
    - Network response dependent on strategy
    - Perceived stigma and avoiding social rejection
Study 3: Perceived abuse stigma and social support seeking

- The Paradox
  - Fear of Social Rejection Leads Stigmatized to Seek Support in Indirect Ways
  - Ironically, Indirect Seeking Leads to Unsupportive Network Response
  - Paradoxical Social Rejection
    - Seeking Behaviors Mediate Stigma - Network Response

Study 3: Method

"Women's Life Experiences and Social Relationships"

- Face-to-Face, Structured Interviews
  - Perceived Abuse Stigma ($\alpha=.86$; modified, Mickelson, 2001), e.g., "I feel odd or abnormal because I have experienced partner violence"
  - Support Seeking Behaviors (Barbee & Cunningham, 1995)
    - Direct ($\alpha=.79$), e.g., "Asked them for love or reassurance"
    - Indirect ($\alpha=.79$), e.g., "Came across as sad but didn't state why"
  - Network Support/Response (Mitchell & Hodson, 1983)
    - Supportive ($\alpha=.79$), e.g., "Reassured you or gave you affection"
    - Unsupportive ($\alpha=.73$), e.g., "Seemed uncomfortable", "Tried to change topic"

Study 3: Perceived abuse stigma: The paradox of indirect seeking

- Purpose:
  - To test support seeking as mediator of 'stigma-rejection'

- 177 Low-Income Women with Abuse (past 6 mo)
  - Age: $M=30.25$, $SD=9.10$
  - Education: $M=12.47$, $SD=2.02$
  - Annual income: $M=$9,818, $SD=$7,842
  - Employment status: 65.5% unemployed at time of interview
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Study 3
Perceived abuse stigma: The paradox of indirect seeking

![Diagram: Perceived Abuse Stigma Model]

More...
- Perceived stigma as a barrier to help seeking in context of mental health (e.g., Polaha & Williams)
- Perceived stigma associated with other health-related issues among women
  - Perceived Infertility Stigma (Williams & McCook)

Conclusions
- Cognitions about the self and perceived public (thoughts, feelings, behaviors of others)
  - Linked to experience, identity, condition
- Perceived stigma is an under-studied mechanism with links to psychosocial functioning and health
  - 3 Studies
    - Depression, anxiety, self-esteem, fear, support, seeking
  - Other Research
    - Mental health care seeking
    - Health issues such as infertility

Implications: So What? and So What Now?
- Perceived stigma in context of future research
  - Investigation into more contexts and populations
    - Health conditions or identities that may challenge societal norms or expectations of gender and sexuality
    - Women with polycystic ovaries
    - Men and women with illnesses
    - LGBT
  - Comparisons to identify similarities as well as nuance in perceived stigma and psychosocial functioning
**Implications: So What? and So What Now?**

- Perceived stigma in context of clinical practice
  - Individuals who perceive stigma may not disclose or seek help directly but rather more indirectly
    - Awareness that perceived stigma could impact interpersonal communication in clients
    - Direct screening or asking of questions about “taboo” topics

- Perceived stigma linked with psychological symptoms and social functioning
  - Address perceived stigma to reduce burden of psychological symptoms and perceived isolation
  - Seek to reduce stigma on multiple levels

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**How to Reduce Perceived Stigma** *(Corrigan & Calabrese, 2005)*

- Individual
  - Address maladaptive self-statements via cognitive therapy
  - Foster personal empowerment

- Societal
  - Self stigma may be “less likely to thrive when society as a whole refuses to nurture stereotypes, prejudice, and discrimination” (p. 251)

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**Challenging Public Stigma** *(Watson & Corrigan, 2005)*

- Changing societal attitudes
  - Protest
  - Education
  - Interpersonal contact
  - Targeted approach: specific behaviors and groups
Gratitude

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