

Destigmatizing and Normalizing

Background

Although mental health stigma has been decreasing over time, it still remains and continues to have an impact on people struggling with their mental health.⁹ Stigma can affect one's ability or willingness to acknowledge mental health challenges, discuss mental health, and seek help. Stigma is complex and influenced by many factors. Although it persists across all ages, research suggests that stigma related to mental health has decreased over time and across generations.^{10, 11} This is consistent with what we have heard from local providers from youth-

serving organizations and among some youth.¹² One youth group we spoke with noted their inability to speak to their parents/caregivers about their mental health because their parents/caregivers were "brought up different." Stigma also varies by gender. For example, interviewees noted stigma manifests differently among boys/men than among girls/women. This finding aligns with research that men often experience greater stigma about mental health than women and are less likely to seek help.¹³

"I feel like students are much more willing to just come right out and say these are my struggles."

-Faculty member, Western Massachusetts Higher Education Institution, Department of Social Work

The Role of Media

Media contributes to stigma related to mental health. For example, portrayals of people with mental health conditions as violent or dangerous negatively influence public perception of mental health conditions.¹⁴ Media also has the potential to help reduce stigma. Its coverage of well-known public figures' struggles with mental health conditions (such as Simone Biles, Selena Gomez, Lil Nas X, Pete Davidson, and many others) helps to normalize the discussion of mental health. Social media similarly can contribute to stigma, or it can reduce it. Similar to the media, it can perpetuate stereotypes, or conversely it can provide a space where people struggling with mental health conditions can engage with others who are struggling.

Cultural and Religious Differences

Consistent with interview findings, research shows that cultural differences also impact how stigma may manifest.¹⁵ Key informant interviews with regional behavioral health providers who serve the Black and Latine community discussed stigma in these communities. Although we

highlight Black and Latine communities as populations of focus for the Roadmap, it is important to recognize that **stigma exists across all cultures.**

Several key informants noted that the history of slavery and the ongoing impacts of structural and interpersonal racism in our country have caused Black communities to be cautious about sharing information to protect themselves in a society of White-dominant cultural systems that often penalize Black people. Consistent with research findings, key informants commented on the use of more informal mental health support mechanisms often found in the Black community, such as saying to "go to family" or "pray about it" instead of seeking professional support.¹⁶ In the Latine community, providers described the stigma that may occur with examples such as "you are weak" or "you need to pray on it."

Religion and faith have been described as one of the most preferred ways of coping with mental health in the Black community. Studies have found that religion can have a positive impact on mental health through community support and healthy forms of coping, yet it can also have a damaging impact through misinformation,

miscommunication, and negative forms of dealing with mental health conditions.¹⁷ While some of the service providers and community organization representatives we spoke to stated that it feels safe to talk about mental health with their faith community and leaders, others stated that the stigma was still there. In particular, it was noted that it felt unsafe for young people who were questioning their "I don't know that we've moved clearly past the point of destigmatization, and without moving past that point, I think you always have folks that are going to come to the table guarded, with inaccurate information, and or representing those who are closest to the power and not necessarily closest to the pain.... I still feel like we have a lot of work to do around education and education that is culturally responsible."

- Springfield School Committee member

sexuality or gender identity. Thus, Black trans or nonbinary youth who are at elevated risk for mental health conditions may face additional challenges accessing support.

Given the importance of faith in these communities and many others, partnerships with the faith-based community to address stigma and to provide education are important in efforts to normalize discussing and supporting mental health.

Reducing Stigma

Sharing Lived Experiences

Research has shown that when people who have lived with a mental health condition share their stories ("contact interventions"), it can help address public stigma. This type of intervention is more successful if the storyteller is similar to the targeted audience.^{18,19} Contact interventions are particularly effective when paired with education and information about mental health, such as in mental health literacy efforts. The framing and focus of messages that are part of contact-based education programs are important. Studies have found that some programs for young people have caused harm by reinforcing and solidifying negative stereotypes. The most successful interventions focused on stories of hope and recovery. In addition, training the person sharing their story was identified as critical. Research identified peer training and preparing the storyteller to be psychologically prepared to share their story, engage the audience, handle questions, and promote discussion as important components.^{20,21}

Media Campaigns

Evaluation of the effectiveness of media campaigns has had mixed results. Some large-scale interventions that combined media campaigns with education and contact interventions were found to be effective. *One-time* education sessions or exposure to positive communications were not found to be effective. Ongoing engagement is needed.²² Recognizing the role of media in perpetuating mental health stigma and its potential to help reduce stigma, the Surgeon General and other experts provided guidance for engaging the media to help normalize discussing and supporting mental health (see <u>recommendations</u> section below).^{23, 24}

Local Efforts

Through our research, we learned that there are some promising efforts in our region that center youth in the design and implementation of mental health education and destigmatization activities. Several programs, communications efforts, and multipronged approaches are being implemented to address stigma in our region. Following are a few examples:

- I Am More than My Mood: a youth-centered communications campaign created by Beat the Odds (BTO) and the Springfield Youth Mental Health Coalition. It includes posters in schools and elsewhere that direct people to resources to support mental health. It is part of a multipronged initiative that includes education and community engagement.
- Man Cave Monday: a program at the Impact Center in Springfield that serves young adults. Youth voice is incorporated into the design of activities and services. The program aims to address stigma among young men.
- Break the Stigma: The Gándara Center created this media campaign to reduce the stigma of substance use and opioid use disorders. PSAs have played on English and Spanish television, radio, billboards, and social media. The campaign centers around four messages: Mental Health Is Health, Substance Use Disorder Is a Disease, Narcan Saves Lives, and Recovery Is Possible.

Recommendations

- Center youth and parent/caregiver voice in the design and implementation of strategies to destigmatize and normalize mental health.
- Provide more multipronged strategies to destigmatize mental health that include the following:^{25, 26, 27}
 - Education about mental health being as important to one's overall well-being as physical health; this can happen among schools, parents/caregivers, youth, healthcare, and faith-based communities.
 - People with lived experience sharing their stories ("contact interventions"):
 - Stories should include hope and recovery,
 - Have people who are similar to the target audience share their stories,
 - Training of storytellers is important.
 - Frequent, ongoing communications about key education points and repeated engagement with key audiences over time are needed to see stigma reduction.
- Partner with Media:
 - Share information with local media about normalizing mental health and work with them to help reduce negative media portrayals of mental health issues. See the Surgeon General Advisory on Protecting Youth Mental Health for strategies.²⁸
 - Partner in efforts to normalize mental health and to publicize the campaigns in the region.
- Partner with faith-based organizations:
 - Provide information about mental health and mental health stigma, and work together to engage and educate the communities they serve.
- Keep equity in mind!
 - Acknowledge and address how oppression and racism impact mental health stigma in our society.



I Am More Than My Mood

Out of a need to reduce generational stigma around mental health and to spread awareness about the impacts of stress, anxiety, and depression, the Springfield Youth Mental Health Coalition (YMHC) decided to create an <u>awareness campaign</u> for youth and families in the Greater Springfield area. To ensure the receptivity of the campaign, they included their Beat the Odds (BTO) youth advisors and community every step of the way. In 2021, YMHC formed a multisector communications committee to help inform the campaign. In the fall of 2022, YMHC hired the marketing firm Axiom Blue to develop the mental health awareness communications campaign. The campaign launched in February 2023. It consists of social media content, posters, postcards, banners, and billboards—all directing people back to <u>MoreThanMyMood.org</u> to access mental health resources for youth and adults.

The Springfield Youth Mental Health Coalition has received funding from the Massachusetts Department of Public Health Office of Problem Gambling Services, Davis Foundation, Trinity Health of New England, Whitcomb Foundation, Women's Fund of Western Massachusetts, and City of Springfield.