Letter to Editor

Stigma; A Major Challenge Amid the Covid-19 Pandemic

Dear Editor,

Upon the spread and turning into an epidemic of an infectious disease such as the Covid-19, people become very frightened and worried.[1] Among factors affecting the anxiety related to such outbreaks are patients' fears of social reactions and the stigma of being a carrier. Stigma indicates a negative behavior or attitude towards a specific person or condition.^[2,3] This is not the first time that having a disease turns to social stigma. This had been also observed during the epidemics of HIV, H1N1 influenza, swine flu, Ebola, as well as in the cases of epileptic and mental disorders, etc.[3,4] Also, these attitudes are not only limited to one country or even developing nations, but are also equally observed in developed countries. In addition, stigma can even be seen in homes. Generally, stigma is often more agonizing than other social discrimination forms.[3] The stigma related to a disease can be due to the lack of knowledge about the disease, fear of transmission, or fear of rejection by others so that symptomatic patients often hide their disease, eventually leading to stigmatization.[5] Stigma can make people feel isolated, anxious, angry, and even abandoned when their friends and other community members avoid them due to the fear of contracting the disease (e.g., Covid-19). Stigma can also destabilize social situations and deprive people of occupational and educational opportunities.^[1,4] A more frightening fact is that stigma affects people's health and well-being in many ways. The groups of people carrying stigma may often be deprived of the resources they need to care of themselves and their families during an epidemic. [1,6] Researches on past epidemics have shown that stigma compromises people's efforts for seeking diagnostic and therapeutic services, and these people are less likely to be tested or seek medical attention, which increases the risk of infection for them and others because of remaining undetected and untreated. One study reported the two dangerous clinical and public health consequences of stigma as: delay in referring symptomatic patients to health care centers (poor prognosis) and failure to identify infected individuals (rise in the rate of virus transmission to susceptible individuals).[1,6]

During the COVID-19 pandemic, infected patients are probably the most vulnerable group to the devastating effects of stigma on mental health. These people are at increased risk of psychological complications including depression, stress-related disorders, and sleep disorders.^[4] In addition, health care staff and patients' family members are construed as culprits due to their close contacts with patients and therefore are considered equal to the patients.^[2,7]

Based on the clinical experiences of a patient who was admitted to the intensive care unit with a diagnosis of Covid-19, he reiterated: "I am not afraid of death. I am

afraid that me being dead because of this disease put family in social isolation". "May disease may be known as a disgrace", he said crying, and continued: "A death like this is a stigma for me".

Some features of Covid-19 exaggerate the likelihood of stigmatization. For example, Covid-19 can have a relatively long window period (about 33 days). The Covid-19 diagnostic test delivers a relatively high false-negative rate. On the other hand, there are concerns that a small ratio of recovered patients may become positive again after discharge. In addition, a remarkable proportion of Covid-19 patients are asymptomatic carriers who can easily transmit the virus to others. All of these factors can exacerbate the fear and stigma of Covid-19 for patients, suspected cases, their close companions, workers of infectious centers, and other medical staff.^[2]

However, it should not be forgotten that replacing fear and rumors with actual facts and taking appropriate actions and providing mutual support to reduce the feel of stigma can be effective in order to fight the Covid-19 pandemic. [1] Some of the measures to meet this challenge include education, open and honest communications, using a non-discriminatory language, establishing groups to exchange information and create a common sense, and community-based rehabilitation, etc. These actions can significantly improve the knowledge, attitudes, and behaviors about the Covid-19 disease and reduce its social stigma. [1,4]

Many studies have noted that education is one of the most effective ways to fight stigma and eradicate harmful stereotypes.^[1] In fact, learning the specialized knowledge about the coronavirus (e.g., transmission rate, number of infected patients, mortality rate, seroprevalence in the community, and a map of people who have been in infected places in the past, etc.) can be considered as a cognitive-behavioral therapy and help to identify and change negative beliefs and interpretations about the disease and reduce the stigma and the disease spread.^[1,3,4]

In this study, we discussed the factors that generally contribute to stigmatization and also the measures that can be taken to reduce this factor. It should be noted that there is an urgent need to address stigmatization, which warrants a collective determination to hasten the victory in the battle with the Covid-19 pandemic.

Financial support and sponsorship

Nil.

Conflicts of interest

There are no conflicts of interest.

Letter to Editor

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Received: 15 Aug 20 Accepted: 10 Oct 20

Published: 18 Jun 21

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Access this article online	
Quick Response Code:	Website: www.ijpvmjournal.net/www.ijpm.ir
	DOI: 10.4103/ijpvm.IJPVM_474_20

How to cite this article: Mokhtari R, Golitaleb M. Stigma; A major challenge amid the Covid-19 pandemic. Int J Prev Med 2021;12:58.

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