Combating Stigma for Patients With Bipolar Disorder

A Resource for Providers

Frameworks resources are intended for educational purposes only and are intended for healthcare professionals and/or payer representatives. They are not intended as, nor are they a substitute for, medical care, advice, or professional diagnosis. Healthcare professionals should use independent medical judgment when considering Frameworks educational resources. Those seeking medical advice should consult with a healthcare professional. Frameworks resources are not intended as reimbursement or legal advice. Users should seek independent, qualified professional advice to ensure their organization is in compliance with the complex legal and regulatory requirements governing healthcare services, and that treatment decisions are made consistent with the applicable standards of care. Frameworks is sponsored by Otsuka Pharmaceutical Development & Commercialization, Inc.
The Role of Stigma in Care

Patients with mental illness, such as those who have bipolar disorder, can experience stigma that may negatively impact their care. While working to manage the symptoms of their disease, patients who experience stigma are also faced with combating stereotypes and misconceptions associated with their illness. Unfortunately, the healthcare system is one of the key environments in which patients with mental illness may experience stigma and discrimination.

Bipolar I, marked by extreme manic episodes, has a lifetime prevalence of 2.1% and a 12-month prevalence of 1.5%. This equates to approximately 4.9 million and 3.7 million adult Americans, respectively, who are affected.

Patients with bipolar disorder may feel stigmatized for their disorder. Although there are not many studies which focus specifically on stigma and patients with bipolar disorder, there is substantial research related to stigma and mental illnesses. This resource is based upon this knowledge and belief that patients with bipolar disorder may be subject to the same types of stigma as those patients with other mental illnesses.

This resource aims to assist providers in understanding the types of stigma, consequences of stigma, strategies to combat stigma, and collaborating with the patient in light of stigma.

The Importance of Combating Stigma

Stigma has been identified as one of the primary barriers to accessing care and to receiving equitable quality of care. It is frequently cited as a barrier to mental healthcare and is associated with reduced treatment seeking.

For people with mental illness, stigma can lead to:

- Greater internalization of stigmatizing beliefs and self-silence
- Inadequate access to proper treatment
- Less treatment compliance
- Breakdown of the therapeutic relationship
- Greater avoidance of healthcare services
Combating Stigma as a Provider

One of the most promising strategies for combating stigma seems to be contact with a patient with mental illness characterized by equal status, cooperation, common goals, and support by authorities. However, despite having this contact, the healthcare system is still an environment where providers may manifest stigmatizing attitudes and behaviors. Healthcare providers typically see patients with mental illness when they are most unwell, which may give providers a biased view of the patient and his or her chance of recovery. Moreover, some providers may feel uncomfortable with their abilities to assess certain patients with mental illness and then communicate effectively with those patients about their care.²

Strategies that providers can employ include:

Enhance communication with patients, as well as between providers.²

Engage in skill-based training to learn what to do to help; for example, the “what to do to help” approach which has been used as part of some anti-stigma programs.²

Be sensitive to your internalized beliefs about individuals with mental illness. Focus on the individual and not just the disease and do not endorse stereotypes about people with mental illness.⁸

Portray people realistically. Patients with bipolar disorder experience periods without symptoms. Avoid depicting the illness and the patient’s symptomology as always being in an acute episode, and instead, describe their entire life and the cycles of their condition.⁹

Ask other professionals and leaders to help combat stigma. More voices leads to more awareness.⁸

Tell your own story. If you happen to have a story of recovery, share it.⁸

Additionally, as a provider, you are in a unique position to help individuals with mental illness find their voice to speak out about mental illness and discrimination. The credibility you have as a professional in the mental health field can go a long way in promoting individual storytelling in public.⁸

The Substance Abuse and Mental Health Services Administration offers a guide for developing a local, regional, or statewide initiative to combat stigma.¹⁰
Collaborating With the Patient

One of the results of stigma is the societal belief that patients with mental illness should be feared and, therefore, excluded and may be seen as needing to be cared for and incapable of making their own decisions.¹

Avoid labels
Encourage patients to recognize that they are more than their illness and, therefore, a “patient with bipolar,” not “I am bipolar.”¹¹

Choose your words thoughtfully
Many negative terms associated with mental health conditions (“crazy,” “psycho”) have become part of the common vernacular but can cause someone to feel stigmatized.⁹

Emphasize supports
As stigma may result in reduced access of care, encourage patients to seek support groups and not to isolate themselves. Speaking with others who have bipolar disorder may help patients to better understand and gain greater control over their illness. Patients engaged in peer support programs have been shown to be more likely to use behavioral health services of all kinds.¹² Groups such as the National Alliance on Mental Illness and the Depression and Bipolar Support Alliance offer local and Internet supports.¹³,¹⁴

Underscore autonomy
Stigma contributes to the belief that patients with mental illness are unable to make their own decisions.¹ This may be especially present when a patient is acutely ill. Providers can encourage autonomy by offering a psychiatric advanced directive, which outlines a patient’s wishes when they are unable to do so himself or herself.¹⁵

Encourage appropriate self-disclosure
Self-disclosure of mental illness has been shown to result in positive outcomes related to help-seeking and feelings of inclusion.¹² When clinically indicated and justified, and when the patient believes it will help, it may be beneficial for individuals to disclose their illness to loved ones, friends, and coworkers.
Understanding Stigma

Stigma falls into four categories

**Public stigma** is based on the endorsement of a stereotype of mental illness by the general population. For example, the idea that a patient with mental illness is dangerous or unreliable may result in a landlord not offering housing to them.⁸

**Self-stigma** is the result of the patient internalizing the discriminatory beliefs and then acting based on the internal belief. For example, if a patient believes a stereotype which suggests that people with mental illness are unreliable, they may believe that they are unable to keep up with the demands of a job because of their mental illness.⁸

**Label avoidance** refers to a third type of stigma, which prevents patients from seeking care. In an attempt to avoid being labeled, patients may not seek behavioral health services.⁸

**Structural stigma** refers to societal norms and institutional practices which may limit the opportunities and resources available to a stigmatized patient.¹⁶ For example, in various government jurisdictions, individuals with serious mental illness have been discriminated against by regulations limiting their voting rights, their ability to hold public office, parental custody, housing, and employment.¹² This type of stigma may also be visible in a lack of integrated care services, or a lack of appropriate referrals to behavioral health providers.¹⁷

As a provider, it is important to recognize that a patient may be experiencing different types of stigma and that the stigma may be impacting care.