HEALTH MENTAL

Mental Health and Stigma Post COVID-19

UNITED MENTAL HEALTH PROMOTERS

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LOS ANGELES COUNTY
DEPARTMENT OF MENTAL HEALTH
hope. recovery. wellbeing.

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What's our Intention?

1. What is mental health?

2. What is stigma?

3. Where does the narratives maintaining stigma of mental health come from?

4. What can we do to reduce and, ultimately, eliminate stigma of mental health in our communities?

What is mental health?

- "A state of complete physical, mental and social well-being, and not just the absence of diseases or illnesses."

- "It is related to the promotion of well-being, the prevention of mental disorders and the treatment/rehabilitation of people."

Mental Health
provides us with the ability to live in physical, mental and spiritual balance.

Activity:
"Do I Agree or Disagree"

Answer if you agree or disagree with the 7 statements:

❑ I am afraid of people with mental disorders

❑ Only adults can suffer from mental disorders

❑ People suffer from mental disorders because they have done something wrong

❑ I am very comfortable talking about mental health disorders with other people

❑ If the person does not think about their mental disorders, it disappears

❑ If someone is depressed, you should NOT ask them if they have suicidal thoughts

❑ Mental disorders can be treated

Common Narratives vs. Reality on Mental Health

Common Narratives	Reality
❏ Once people show mental problems, they never recover.	❏ Research studies show that most people with mental disorders get better and many make a full recovery.

National Alliance on Mental Illness (NAMI)

Common Narratives vs. Reality on Mental Health

Common Narratives	Reality
❏ There is no hope for people with "mental problems".	❏ There are more treatments, strategies, and community support for people with mental health disorders than ever before.

National Alliance on Mental Illness (NAMI)

Common Narratives vs. Reality on Mental Health

Common Narratives	Reality
❑ Mental disorders cannot affect me.	❑ Mental disorders are very common affecting many families. They do not discriminate–they can affect anyone.

National Alliance on Mental Illness (NAMI)

Common Narratives vs. Reality on Mental Health

Common Narratives	Reality
❏ Mental disorders appear because of weakness of character.	❏ Mental disorders are the product of the interaction of biological, psychological and social factors.

National Alliance on Mental Illness (NAMI)

Common Narratives vs. Reality on Mental Health

Common Narratives
❑ I can't do anything for someone with a mental health condition.

Reality
❑ We can do much more than we think.

National Alliance on Mental Illness (NAMI)

What is stigma?

Stigma refers to:

Attitudes and Beliefs that:

1. Motivate people to fear.

2. Reject or avoid the person who acts or is seen as "different."

3. Label the person because they have a diagnosis of a mental disorder.

"Eliminating Stigma and Discrimination Against Persons with Mental Health Disabilities: A Project of the California Mental Health Services Act."

What comes to your mind when you hear the phrase: "mental health conditions?"

- Crazy
- Weak
- Disabled
- Someone out of control

Which emotions and behaviors come with these thoughts?

- Shame
- Impotence
- **Silence**

La Ropa Sucia Se Lava Casa
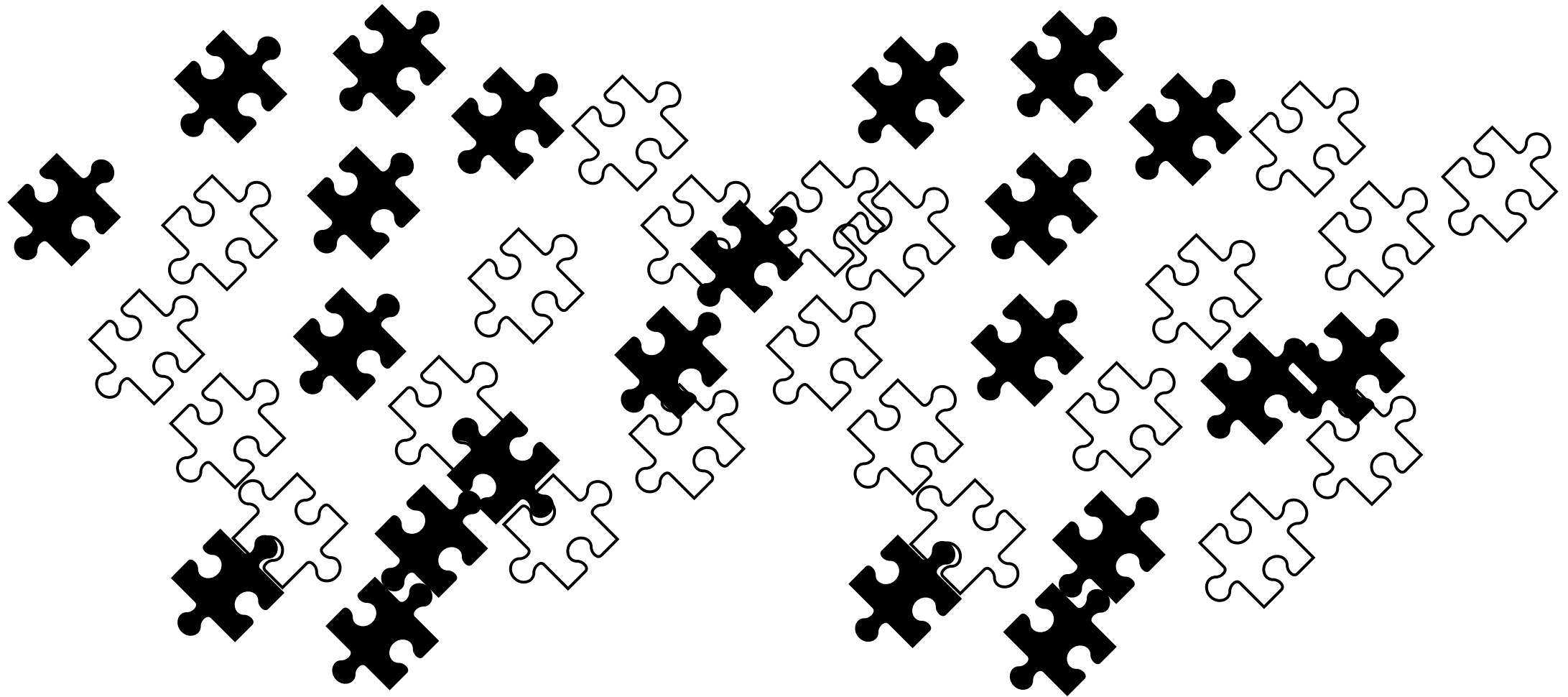
"Don't air your dirty laundry in public"

What is stigma by association?

Stigma by Association

The belief or attitudes that the family is to blame, and responsible, for mental health conditions.
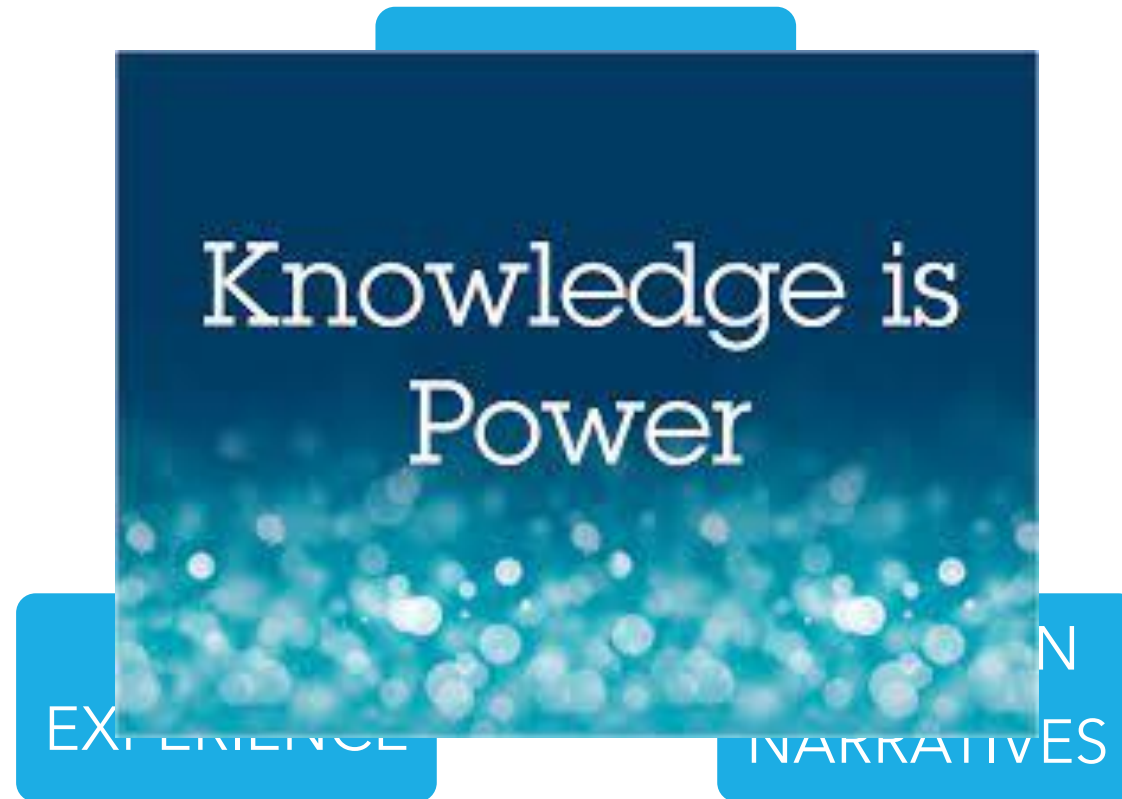
Where does the narratives maintaining stigma of mental health come from?

What are the pieces of our history?

Why is it important to go back and reflect on history?

EXPERIENCE

NARRATIVES

Knowledge is Power

Before the COVID-19 Pandemic

The National Alliance for Mental Illness (NAMI) estimated that about 1 in 17 Americans suffers from a serious mental condition, affecting one in five families.

How is our mental health now with the COVID-19 pandemic?

Let's talk numbers

U.S. in late June of 2020, adults reported:

31% - symptoms of anxiety or depression

13% - having started or increased substance use

26% - stress-related symptoms

11% - serious thoughts of suicide in the past 30 days

Let's talk context

Survey showed that risk factors for reporting anxiety symptoms or suicidal ideation included:

1. Food insufficiency
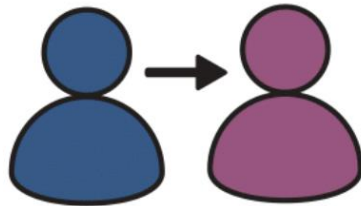2. Financial concerns
3. Loneliness/isolation

https://www.nimh.nih.gov/about/director/messages/2021/one-year-in-covid-19-and-mental-health

https://www.cdc.gov/spanish/

Mental health in times of COVID-19
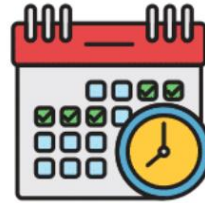
Your concerns are valid

There are many reasons why you might be concerned about COVID-19. Some of the most common concerns are:

Getting sick

Transmitting the virus to others, especially to high-risk population

Adjusting to a new reality during uncertain times

Taking care and helping family

Worry about the health of friends and family

Financial Stress

Not being able to gather with friends and family like before

shortage of certain common supplies

Let's continue to talk about context: The Historical Epoch of COVID-19

Structural Racism

Cultural racism (stereotypes,, prejudices)

Discrimination

Communities of color are disproportionately affected, directly and indirectly, by COVID-19

Access to healthy environments

Access to medical care

Access to opportunities

Essential jobs

https://www.cdc.gov/coronavirus/2019-ncov/community/health-equity/race-ethnicity.html

Mental Health in times of COVID-19: The Past, Present, and Future Meet

1. Complex Trauma (Violence, War, Immigration, Hate Crimes, Genocide)

2. Suicide (ideation, plan, attempt)

3. Domestic Violence

4. Financial abuse

5. Conflict in the family, in the community

6. Grief and Loss: Family, and community we lost due to COVID-19

7. Changes in our mental health due to COVID-19 (the virus vs. the physical distancing mandates)

Stigma
+
Mental Health in times
of COVID-19

= Pressure Cooker

"We want to be seen, heard, valued and not judged."

Stigma is maintained in our words

➤ "That person is crazy."

➤ "That person is demented."

➤ "That person is disabled."

➤ "That person is being punished by God for something they
   did."

➤ **What other thoughts come to mind?**

Resilience is also maintained in our words

- Knowledge is power.

- My history/story is important.

- My story is valid.

- My story has power and purpose.

- My history/story is similar to other stories from my community.

- I am not alone—nor alone on this path—so we can all move forward.

MENTAL HEALTH IS HEALTH.

lapiztola
South Central L.A.

lapiztola Strong Like a MADRE
•
•
Una Madre no tiene fronteras, siempre firme siempre fuerte, siempre encontrando la forma de volar...

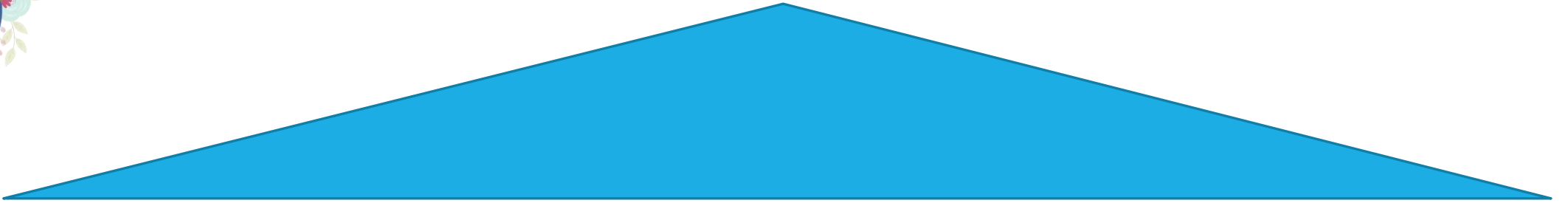# Resilience is also maintained in our practices
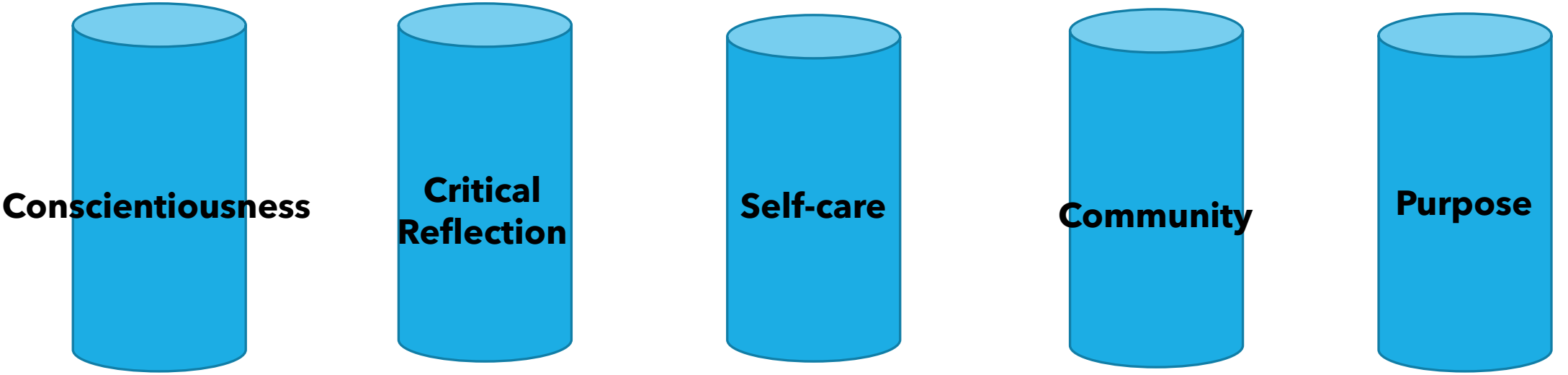
Eliminating Stigma and Promoting Resilience

Stigma does not allow us to access our power, our strengths. We need our own narratives of power and strength.

Let's change our narratives!

Five Pillars of Resilience

Conscientiousness

Critical Reflection

Self-care

Community

Purpose

We can break the stigma.

What can we do to elimiate stigma?

❑ Being here today to learn about stigma and mental health.

❑ Continue the dialogue with other people about what you learned today about the connections between history, our lived experiences, and common narratives.

❑ Stop before using a label (for example, "You are crazy"), when referring to or describing someone with mental health issues.

❑ Being intentional with our words (or our silence), and actions

LEARN HOW TO BE...

stigma*free*

3 Steps

Live It!
Learn about mental health by educating yourself and others.

Share It!
Share StigmaFree on social media, strive to listen, tell your own story and see the person not the illness.

Show It!
Take action on mental health issues, raise awareness and make a difference.

www.nami.org/stigma*free*

Los Angeles County Department of Mental Health

24/7 Hotline (800) 854-7771

For additional information…

Additonal Resources

1. **Videos:**

https://www.youtube.com/watch?v=uaLFPazqlNM

https://www.youtube.com/watch?v=s3FL9uhTH_s

https://www.youtube.com/watch?v=1P6EqxYhROg

https://www.youtube.com/watch?v=l4V31iXtrWo

2. **Articles:**

https://greatergood.berkeley.edu/article/item/five_science_backed_strategies_to_build_resilience

https://www.nami.org/Get-Involved/Pledge-to-Be-StigmaFree

3. **Radio (podcasts):**

https://www.thegoodtrade.com/features/mental-health-podcasts

References

1. https://www.nimh.nih.gov/about/director/messages/2021/one-year-in-covid-19-and-mental-health

2. https://www.cdc.gov/coronavirus/2019-ncov/community/health-equity/race-ethnicity.html

3. https://www.apa.org/topics/resilience

4. Ungar, Michael. "1. Putting Resilience Theory into Action: Five Principles for Intervention". *Resilience in Action*, Toronto: University of Toronto Press, 2018, pp. 17-36. https://doi.org/10.3138/9781442688995-003

Stigma and Discrimination Reduction (SDR) Survey

SDR Program Questionnaire (English)

Stigma and Discrimination Reduction Program Participant Questionnaire

To help us improve, please tell us what you think!

- **SDR is anonymous and voluntary**

- **Please click on the link in the chat box and fill in:**

  <u>**Program:**</u>
  "Mental Health and Stigma during COVID-19"
  (4th on dropdown list)

  <u>**Presenters:**</u>
  My name is …

  <u>**Date:**</u>
  Today is …

All other questions are optional. Feel free to skip any questions you do not wish to answer.