Watch your Language!

Reducing Stigma by Recognizing the Power of Language



Introductions

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Activity

- Open the envelope you received when you arrived.
- Do not show anyone else what is inside.
- Find a partner and place the label on their back.
- Get up and move around the room.
- Interact with each other the way society would treat a person with that label.



Objectives

- Illustrate the importance of language as it relates to stigma.
- Gain an understanding of the impact of stigma both from research and experience.
- Take away practical steps to reduce stigma in our communities.



Language

- Person First Language
 - Schizophrenic > Person with schizophrenia
 - He's bipolar → He has bipolar disorder
 - Alcoholic → She has an alcohol use disorder
- Other Stigmatizing Language
 - Committed suicide → died by suicide
- Labeling
 - She's crazy
 - He's "special"



Why Watch Your Language?

Aren't we just whitewashing the issue?

Does it really matter?

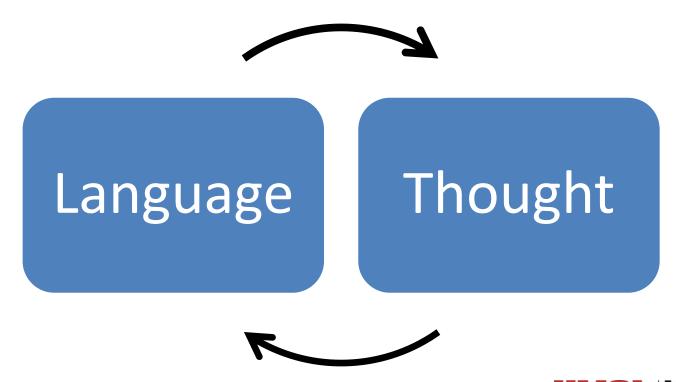
If my attitude is respectful, does my language make a difference?

In a stressful field, sometimes we need to use humor to unwind. We need to laugh about things that happened at work.



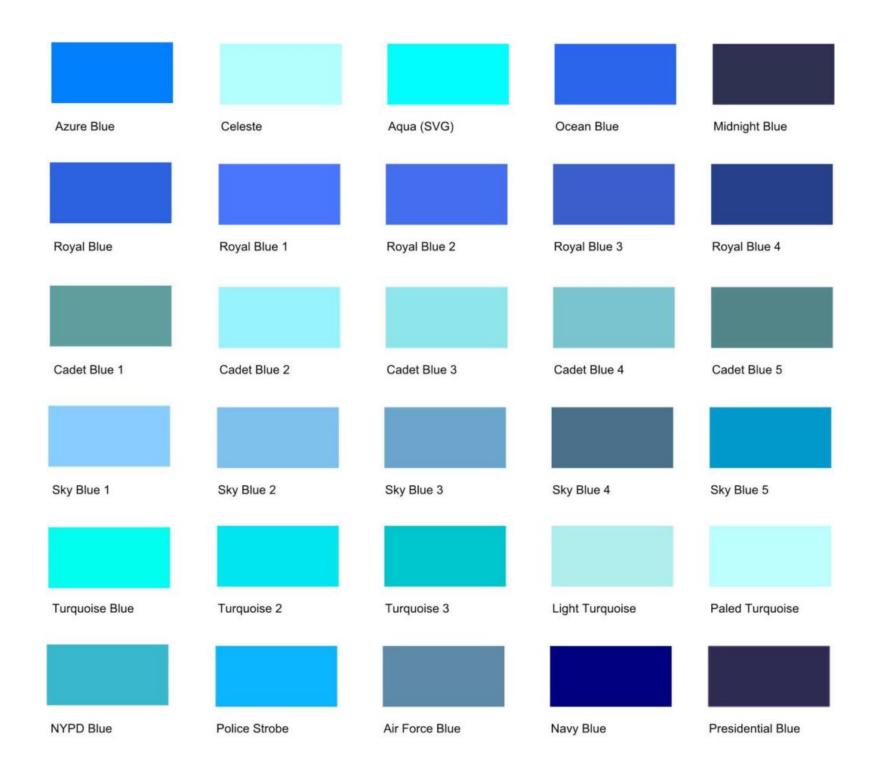
Does language effect thought?

Linguistic Relativity



P. Wolff & Holmes, 2011, Boroditsky, Schmidt & Phillips, 2003





How does language effect stigma?

Granello and Gibbs Study- 2016

Participants:

- Sample A:
 - 221 Undergraduate students
- Sample B:
 - 211 Adults in the community
- Sample C:
 - 269 professional counselors and counselors-in-training



Methods

- Community Attitudes Toward Mentally III (CAMI) selfreport survey
 - Questions regarding their beliefs about mental illness and people with mental illnesses
 - Authoritarianism
 - Benevolence
 - Social Restrictiveness
 - Community Mental Health Ideology
 - 5-point Likert scale of strongly disagree to strongly agree
 - Half of respondents received premodified language mentally ill person and the other half received postmodified (person-first) language— person with a mental illness



Differences in Pre and Postmodified Survey Participants of the CAMI

Population	Authoritarianism	Benevolence	Social Restrictiveness	Community Mental Health Ideology
Study A: Students	Premodified 1 Postmodified 1	~	Premodified 1 Postmodified 1	~
Study B: Community Adults	~	Postmodified↑ Premodified↓	~	Postmodified↑ Premodified↓
Study C: Professional Counselors and Counselors- in-Training	Premodified ↑ Postmodified ↓ Especially for professional counselors	~	Premodified ↑ Postmodified ↓	~ CI \ /I\ /I

Missouri Institute of Mental Health

^{~ =} no statistically significant difference

How does stigma effect people?

Public Stigma

- Stereotype- Negative belief about a group
- Prejudice- Agreement with belief and/or negative emotional reaction
- Discrimination- Behavior response to prejudice

Self-Stigma

- Stereotype- Negative belief about self
- Prejudice- Agreement with belief, negative emotional reaction
- Discrimination-Behavior response to prejudice



What can you do?

- Change your own language
- Talk about the language you choose and why you choose it
- Do a language presentation with colleagues
- Write your local newspaper
- Take Mental Health First Aid and tell a friend





Mental Health First Aid is the initial help offered to a person developing a mental health or substance use problem, or experiencing a mental health crisis. The first aid is given until appropriate treatment and support are received or until the crisis resolves.











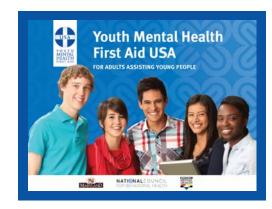


What Participants Learn

- Risk factors and warning signs of mental health and substance use problems
- Information on depression, anxiety, trauma, psychosis and substance use
- **\$\frac{1}{2}\$A 5-step action plan** to help someone who is developing a mental health problem or in crisis
- Available evidence-based professional, peer and self-help resources







Evidence

Mental Health First Aid....





References

- Boroditsky, L., Schmidt, L. A., & Phillips, W. (2003). Sex, syntax, and semantics. In D. Gentner & S. Goldin-Meadow (Eds.), Language in mind: Advances in the study of language and thought (pp. 61–79). Cambridge, MA: MIT Press.
- Corrigan, P. W., & Watson, A. C. (2002) Understanding the impact of stigma on people with mental illness. *World Psychiatry*, 1, 16-20.
- Granello, D. H., & Gibbs, T. A. (2016). The Power of Language and Labels: "The Mentally III" Versus "People With Mental Illnesses". Journal of Counseling & Development, 94(1), 31-40.
- Lannin, D. G., Vogel, D. L., Brenner, R. E., Abraham, W. T., & Heath, P. J. (2016).
 Does self-stigma reduce the probability of seeking mental health information?
 Journal of Counseling Psychology, 63(3), 351-358.
- Winawer, J., Witthoft, N., Frank, M. C., Wu, L., Wade, A. R., & Boroditsky, L. (2007). Russian blues reveal effects of language on color discrimination. *Proceedings of the National Academy of Sciences*, 104(19), 7780-7785.
- Wolff, P., & Holmes, K. J. (2011). Linguistic relativity. Wiley Interdisciplinary Reviews: Cognitive Science, 2, 253–265.



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