Sociologist, Erving Goffman, has described social stigma as a socially discrediting attribute, behaviour, or reputation. He believes that persons with stigmatised conditions shift on the social construct from “normal” to “discreditable”.

According to the Oxford dictionary, a stigma is a mark of disgrace associated with a particular circumstance, quality, or person. Regardless of the definition one chooses, the common conclusion that can be drawn is that stigmas can essentially attach an undesirable yet misguided label to individuals who are stigmatised.

Generally, stigmas can be seen to exist in situations that deviate from societal norms. Groups that are often stigmatised are those who have physical disabilities, certain illnesses, are of a different ethnic or religious background than the dominant culture, or individuals whose sexual orientation sway from what is considered to be socially acceptable.

Although many of the negative connotations that stigmas attach to individuals can be proven to be untrue and actually cause more harm to a person, many people globally are still victims of some sort of stigma. People who suffer from mental illness constitute a great portion of the people who are still stigmatised today.

What causes a stigma to be developed in the first place? Why is it that only certain groups receive them? What criteria exist for a person to be marginalised in this way? Initially, my belief was that stigmas form as a result of a mixture of misinformation and deviation from socially accepted norms.

Commonly, when people hear the term mentally ill, they assume the person is ‘crazy’ or just a ‘lunatic’ as a result of misinformation and the general stigma that has been placed on mental illness. However, I have realised over time that factors other than ignorance come into play. Religion has been a major issue in my society that I noted from both personal experience, as well as from interviews conducted with individuals who suffer from, or have a loved one suffering from a mental illness.

Living in Trinidad and Tobago, one is introduced to a multitude of races/ethnicities, cultures, and religions, which all coexist in one melting pot of culture. There are a number of

submitted by a reader from Trinidad and Tobago

Religion culture stigma

feature
religions and religious sects present, and generally, religious ideologies have set the tone in the shaping of the values and morals of the society. Thus, religion has played a role in moulding the mindset of a large portion of the population, including beliefs about mental illness. Where the issue of mental health and mental health stigmas are concerned, the patients who come from a religious background are often the ones who fail to receive proper medical care and treatment.

The major reason why individuals from a religious background fail to be treated for their mental illness is because the parents or other family members enforce the idea that the mental illness does not actually exist. The religious radicals tend to dismiss the scientific evidence and claim the cause of the problems are due to demonic possession or dark spiritual rites such as ‘Obeah’ (religious practices based on folk magic/sorcery) as a result of the individual straying from their religion, thus letting the devil inside of them. Therapy, along with prescribed medication, are seen as totally unnecessary. If the individual who suffers not only fails to receive the necessary help, but is also placed in an uncomfortable situation where their family pressures them with religion, and also faults them for making themselves feel that way.

The idea that if we pray more our depression will disappear, and all that needs to be done is to simply pray and be happy, is a common thought that sufferers hear regularly from family. In some cases, they are taken to a place of worship to be prayed for by their religious leader so they can be cured. Families may become stricter when enforcing religion. In extreme cases, the parent or guardian may resort to more drastic measures by trying to “beat the devil out” of their child. It is an unfortunate reality that a number of mental illness sufferers are faced with in Trinidad and Tobago, and perhaps other parts of the world where similar ideologies may exist.

Although there are institutions in place for treating mental health patients, there are issues within these very institutions which further complicate the elimination of the stigma. The Guardian TT newspaper published an article on March 25th 2015, Putting some context to mental health in T&T, listed weaknesses in our mental health system. They stated a lack of awareness campaigns, need for collaboration between the health sector and mental-health team, lack of resources, and the absence of a research culture. Directly related to treatment, there is only one mental health hospital in Trinidad and Tobago – the St. Anne’s Psychiatric Hospital.

Additionally, faults exist in the outpatient facilities, with a major one being the dismissal of patients seeking emergency treatment because they don’t have an appointment for that day, as though suicidal thoughts or other worrisome issues can be put on hold for an appointment at least one month later. It only makes matters worse that the national suicide hotline is on the verge of shutting down within a year due to lack of funding.

This shows a disregard of the severity of mental illness in this nation from the institutions in charge. If problems exist within the organisations responsible for tending to mental health in the country, then little hope can be seen in curbing the mental health stigma in Trinidad and Tobago.

Indeed, more awareness should be brought to the general public, to both inform and break the stigmas that exist. To tell the public that being mentally ill does not equate to being a raging lunatic (or the words “crazy” and “mad” which are frequently used in this society to describe such individuals), and to allow those descriptions to fade away.

To end the belief that spirituality is directly related to the development of mental health issues. Yes, spirituality can become a coping mechanism for some, but it is neither a cause nor cure for the very real illnesses which exist. They need to let people know it’s okay if they or a loved one have been diagnosed with a mental illness, because with proper care and treatment, they could learn to cope and lead a stable lifestyle. Also, they should offer family counselling. This will help family units cope as a whole, better understand the illness and the necessary and available treatment for the patient.

Hopefully, positive changes can be made over time to improve the status of mental health treatment in Trinidad and Tobago. Ideally, this will be in all other nations that may face similar issues, and to one day end the stigma for all.

References:

Editor: In Issue 3, we published a personal account of mental health by a Trinidad and Tobago resident. This article was submitted in response to that. The author asked to remain anonymous due to the feeling of stigma in a small community. We fully support the request for anonymity and express our thanks for the submission.