

Effects of the Age, Education, and Mental Illness Experience on Depressive Disorder Stigmatization

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Abstract : Motivation: The stigma of mental illness has been studied in many disciplines, including social psychology, counseling psychology, sociology, psychiatry, public health care, and related areas, because individuals labeled as 'mentally ill' are often deprived of their rights and their life opportunities. To understand the factors that deepen the stigma of mental illness, it is important to understand the influencing factors of the stigma. Problem statement: Depression is a common disorder in adults, but the incidence of help-seeking is low. Researchers have believed that this poor help-seeking behavior is related to the stigma of mental illness, which results from low mental health literacy. However, it is uncertain that increasing mental health literacy decreases mental health stigmatization. Furthermore, even though decreasing stigmatization is important, the stigma of mental illness is still a stable and long-lasting phenomenon. Thus, factors other than knowledge about mental disorders have the power to maintain the stigma. Investigating the influencing factors that facilitate the stigma of psychiatric disease could help lower the social stigmatization. Approach: Face-to-face interviews were conducted with a multi-clustering sample. A total of 700 Korean participants (38% male), ranging in age from 18 to 78 (M(SD)age= 48.5(15.7)) answered demographical questions, Korean version of Link's Perceived Devaluation and Discrimination (PDD) scale for the assessment of social stigmatization against depression, and the Korean version of the WHO-Composite International Diagnostic Interview for the assessment of mental disorders. Multiple-regression was conducted to find the predicting factors of social stigmatization against depression. Ages, sex, years of education, income, living location, and experience of mental illness were used as the predictors. Results: Predictors accounted for 14% of the variance in the stigma of depressive disorders ($F(6, 693) = 20.27, p < .001$). Among those, only age, years of education, and experience of mental illness significantly predicted social stigmatization against depression. The standardized regression coefficient of age had a negative association with stigmatization ($\beta = -.20, p < .001$), but years of education ($\beta = .20, p < .001$) and experience of mental illness ($\beta = .08, p < .05$) positively predicted depression stigmatization. Conclusions: The present study clearly demonstrates the association between personal factors and depressive disorder stigmatization. Younger age, more education, and self-stigma appeared to increase the stigmatization. Young, highly educated, and mentally ill people tend to reject patients with depressive disorder as friends, teachers, or babysitters; they also tend to think that those patients have lower intelligence and abilities. These results suggest the possibility that people from a high social class, or highly educated people, who have the power to make decisions, help maintain the social stigma against mental illness patients. To increase the awareness that people from high social classes have more stigmatization against depressive disorders will help decrease the biased attitudes against mentally ill patients.

Keywords : depressive disorder stigmatization, age, education, self-stigma

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