

# Practical ways to address COVID-19 stigma and manage its effects

Guidance note 02, April 2020

Makerere University, Dep. Of Social Work and Social Administration



## What is stigma?

Generally, stigma can be understood as a deeply demeaning attribute that separates and creates an invisible wall between an individual and the rest of society. Stigma can be felt by an individual or groups of people or even nations. Stigmatized people tend to develop a sense of worthlessness, feel devalued, and less of human beings. Focusing attention on preventing the spread of COVID-19 is as important as managing the social, cultural and economic consequences of the virus and measures associated with its prevention.

## Manifestations of stigma during COVID-19:

In the case of COVID-19, stigma, at least in Uganda, has been witnessed in form of;

- \* Derogatory behaviors directed toward people who have COVID-19, those recovering and their families.
- \* Derogatory remarks and labels against families, friends and even general communities whose loved ones have COVID-19 or recovering from it.
- \* Associating the origin of COVID-19 to a particular community or race.
- \* Attacks on people who have COVID-19 and those who have travelled abroad and their families.
- \* Various forms of discrimination; labeling or name calling; shaming; stereotyping among others.
- \* Strained social relationships, reduced family cohesion, isolation and loss of support.

## Categories of people susceptible to stigmatization:

- \* Some sections of the population blame the virus on China. Consequently, Chinese and Ugandans who have had a travel history outside the country are seen as transmitters of the virus.
- \* Family members of those who have been under quarantine.
- \* Those who have tested positive to the virus.
- \* Those who show signs and symptoms of the virus e.g. cough and sneezing even if they have not tested positive.

- \* Health workers treating people who have COVID-19.
- \* Security agencies who are enforcing government guidelines.
- \* Other frontline workers on COVID-19 response.

## What happens when stigma is not addressed?

- \* Increased harassment of people who have a recent history of outside travel and use of mob violence.
- \* Direct attacks on people who show signs and symptoms of COVID-19.
- \* Direct attacks on people who have recently returned from Dubai, UAE and other countries.
- \* Direct attacks, social avoidance and rejection of families whose loved ones have COVID-19 or recovering from it.
- \* Non-compliance to general prevention guidelines or expected behavior.
- \* People who need to test may fear to come forward to test.
- \* People may perceive quarantine as a form of punishment.
- \* Those suffering COVID-19 related stigma may face mental and psychosocial problems, including suicidal feelings and attempted suicide.
- \* Denial of economic opportunities for recent travelers and people who have recovered from COVID-19.

## Practical measures to minimize COVID-19 related stigma:

- \* Be empathetic to all those who are affected, whether from within or outside of the country.
  - \* Treat people affected by COVID-19 without attribution of wrong doing.
  - \* People infected and affected by COVID-19 deserve our support, compassion and kindness.
  - \* Know that people infected and affected by COVID-19 are also citizens with rights.
  - \* Understand that each one of us and our loved ones is a candidate for COVID-19. As such we should be mindful of the patients, survivors and others directly or indirectly affected.
  - \* Show support and kindness by reaching out to those affected by COVID-19 using any possible means, while observing 'social' distancing. Reach them on phone, social media and other forms. Show them love, talk to them to give them strength and show them understanding.
  - \* Let us be mindful of the language we use; stop calling people names or labeling them like "COVID-19 case", "victim", "COVID-19 family" or "the diseased". Instead refer to them as "people who have COVID-19", "people being treated for COVID-19", or "persons recovering from COVID-19". Health workers and other frontline staff should not say they are 'hunting down' people believed to have come in contact with COVID-19 patients, they should instead use; 'tracing them.'
  - \* Avoid using language that vilifies the recent travelers particularly the returning residents.
  - \* Support people who have recovered from COVID-19 to go on with their lives; jobs etc.
- \* Encourage sharing stories of resilience and recovery by people who have recovered from COVID-19 as a means to foster hope.
  - \* Where possible, extend support to families that are directly affected by the prolonged absence of their loved ones due to uncertainties that "COVID-19" creates.
  - \* Do not reveal individual names of those who test positive for COVID-19 during press briefings.
  - \* Publicly condemn acts of stigma including incidents of mob justice directed towards people suspected to have Covid-19 or those that came into contact with those who test positive.
  - \* At the community level, professional social workers should lead the efforts of preparing communities and families to receive survivors of COVID-19; and receiving persons who have been under quarantine.
  - \* Deliberately run anti-stigma campaigns through the media and other fora.
  - \* We all have a role to play to stop COVID-19 related stigma.

## **Department of Social Work and Social Administration** *We build for the future*

Makerere University, P.O. Box 7062

**Tel:** 0414534114

**Website:** [swsa.mak.ac.ug](http://swsa.mak.ac.ug)

**e-mail:** [swsa@chuss.mak.ac.ug](mailto:swsa@chuss.mak.ac.ug)

[ewalakira@gmail.com](mailto:ewalakira@gmail.com)

[ewalakira@chuss.mak.ac.ug](mailto:ewalakira@chuss.mak.ac.ug)

[denmuhangi@gmail.com](mailto:denmuhangi@gmail.com)

[dmhangi@chuss.mak.ac.ug](mailto:dmhangi@chuss.mak.ac.ug)

[musinguzilaban16@gmail.com](mailto:musinguzilaban16@gmail.com)

**Tel:** 0772490330, 0772445198