Guidance to reduce COVID-19 stigma on Health workers and families
How stigma happens and What the impacts are

<table>
<thead>
<tr>
<th>How stigma manifest in behaviours</th>
<th>Consequences</th>
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<td><strong>Blaming and Shaming:</strong> questioning the etiology of pandemic, conspiracy theory, undesirable behaviors of a particular group of people (e.g. eating bats/live animals)</td>
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| **Indifferent, apathy, exclusion:** intentionally accepted the unjust situations (e.g. isolate and exclude persons recovered from COVID-19, ignore death of COVID-19 among the homeless, or indifferent toward infection of COVID-19 among marginalized groups prisoners, prostitutes, homosexual, etc.) | - Fear, feeling abandoned, angry, hurt  
- Hopelessness, anxiety, depression  
- Isolation, disassociation, alienation, suicide |
| **Refuse to be associate with and rejection:** discrimination (e.g. refused to have the person obtain services, use the same space, or public transportation) | **Community/societal level** |
| **Denial access:** access to job, education, health services, or housing (evacuation of the person from their residents, or remove from schools) | - Social segregation & sanction  
- Violence/crime against the victim  
- Dehumanization & violate human rights  
- Protest, community resistant,  
- Political / economic sanctions |
| **Verbal attack, threatening, harassment, naming, and insult:** ethnocentric, prejudice, degrading comments or look at, cat calling, yelling | **Impact on COVID-19 control** |
| **Victimization and Violence:** physical attack | - Avoid contact tracing, hidden from surveillance  
- Escape/avoid medical care/treatment  
- Non-conformity to social measures  
- Putting people to be more at risks with inability to access services  
* Impact on health workers will further weaken health system and ability to control the pandemic |

**Consideration on how to reduce stigma**

- **Share the Facts** about COVID-19 transmission, update situation across the world, level of risks and threats based on scientifically proven and data driven evidences e.g. from MOH, CDC, or WHO guidance
- **Mitigate ‘misinformation’ and ‘disinformation’** that promote malicious acts, aggression, discrimination, and stigma toward people of different backgrounds and circumstances which are to be identified in local context
- **Enforce zero tolerance** to stigmatization and discrimination against humanities.
− Conduct “Hero” Campaign honouring caretakers and health care workers who may be stigmatized. Thank them for their work and share positive messages on local and mainstream medias including relevant social media

− Share voices of people whose jobs take care of others and protect others showing support to them for doing essential services to communities (including migrant workers, truck/bus/taxi drivers, street cleaners, grocery store, delivery service persons, police officers, community volunteers and others as it may apply to your settings)

− Engage affected communities from the beginning in ALL response measures—to build trust, ensure suitability and effectiveness, and to avoid indirect or unintended harms and ensure the frequent sharing of information.

− Reach out to people who may feel stigmatized or suffer from consequence of stigma (e.g. lost their resident due to forced evacuation, denied access to welfare services or other services, refused to participate in community functions, or denied access to information on COVID-19, testing, or treatment, or safe burials, etc…). Listen to their stories and create supportive environment for all people to understand and support people who suffer from consequence of stigma

− Provide psychosocial support to those who have been stigmatized especially children, youth, and elderly who may be fallen into depression, anxiety and suicide.

− Engage with community volunteers from communities that may be marginalized or affected by stigmatization to support stigma reduction in communities.

− Promote Social Solidarity “everyone is in this together” and “no one is safe unless we all are safe”, respect human diversity and human rights to ensure that no one is leaving behind. Giving attention to vulnerable population in COVID-19 (this includes the elderly, those with pre-existing diseases, prisoners, refugees, and displaced persons.) will save everyone.
## Guidance to reduce stigma on Patients recovered from COVID-19

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## Consideration on how to reduce stigma

- **Share the Facts** about COVID-19 transmission, update situation across the world, level of risks and threats based on scientifically proven and data driven evidences e.g. from MOH, CDC, or WHO guidance
- **Address the misinformation, rumors**, and fake-news or conspiracy theory that single out or blame particular groups of people.
- **Build Trust** with local medias and communities with transparent & timely response to their concerns
- **Communicate clearly with empathy** that persons suffered from COVID-19 are victims of the corona virus, not the cause
of illness in others. Using the word “spreader” or “infected” others to the public communication imply ‘intention’ to harm others and this should be avoided.

- **Engage with influencers** such as religious leaders, opinion leaders, activists, etc... to prepare them to be sensitive to how people perceive, blame and stigmatize “the others” out of fear and misinformation. Provide them with correct information and fact to reduce stigma.

- **Reach out to people who may feel stigmatized or suffer from consequences of stigma** (e.g. lost their resident due to force evacuation, deny access to welfare services or other services, refused to participate in community functions, or deny access to information on COVID-19, testing, or treatment, or safe burials, etc...). Listen to their stories and create supportive environment for all people to understand and support them.

- **Share stories and voices of the people** who are stigmatized living among the people to tell their perceived threats, concerns, worried, and fears just like the rest of the population.

- **Provide psychosocial support** to those who have been stigmatized especially children, youth, and elderly who may be fallen into depression, anxiety and suicide.

- **Ensure access to free or affordable** screening, testing, care, treatment and essential services for the most vulnerable and hard to reach, especially people who may be stigmatized and those who disbelieve in sincerity of governments or society to assist them.

- **Engage with community volunteers** from communities that may be marginalized or affected by stigmatization to support stigma reduction in communities.

- **Create safe environment for people who may be stigmatized to express their opinions**

- **Promote Social Solidarity** “everyone is in this together” and “no one is safe unless we all are safe”, respect human diversity and human rights to ensure that no one is leaving behind. Giving attention to vulnerable population in COVID-
19 (this includes the elderly, those with pre-existing diseases, prisoners, refugees, and displaced persons.) will save everyone.

- **Promote the importance of prevention**, lifesaving actions, early screening and treatment

## Guidance to reduce stigma on People using Masks & Practice social/physical Distancing

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- **Promote the importance of prevention**, lifesaving actions, early screening and treatment

- **Decriminalized individuals and communities who could not comply to the public health restrictions but provide necessities removing barriers**. Restrictions to protect public health must be of limited duration, proportionate, necessary and evidence-based and renewable, and put in place exceptions where necessary for vulnerable groups and to ameliorate the consequences of such restrictions. **Individuals should not be criminalized** for breaching restrictions under difficult circumstances they live in. Provisions to remove barriers (social welfare, aids for sanitization, masks, e.g.) should be arranged for people.