Linguistic reassurance as a tool for mitigating the effects of mental illness stigma:
A mixed methods study within Polish healthcare platforms

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Mental illness (MI) stigma occurs when the general population holds prejudicial views on people with psychological problems and discriminates against them. In effect, many individuals with MI feel anxious about stigmatising labels and become hesitant to get professional help (Corrigan et al. 2014). To resolve their concerns, they seek reassurance that a supportive social environment and stigma-free treatment are attainable. Due to such affordances of online settings as anonymity (DeAndrea 2015, and Park et al. 2018), they often use the Internet to obtain relevant information. Nevertheless, there is still little research on the discursive practices in online patient – mental health professional communication about stigmatisation (Brookes and Harvey 2016). Therefore, the aims of this two-stage study were (1) to explore how professionals linguistically construct reassurance on healthcare platforms to challenge stigma-related perceptions and (2) to assess the potential impact of such reassurance on its recipients, regarding satisfaction with the professional's communication style, stigma-related anxiety and treatment hesitancy.

In the qualitative part, 163 patients' queries and 552 professionals' responses explicitly related to MI stigma were extracted from two Polish healthcare platforms (abczdrowie.pl and znanylekarz.pl). Using a discursive psychology approach to discourse analysis (Potter and Wetherell 1987, and Lester and O'Reilly, 2021), the data were examined for the linguistic construction of reassurance. Subsequently, six pairs of similar exchanges were designed as stimuli for the quantitative part. In a single pair, one exchange included a purely informational, and the other both an informational and reassuring response to the same patient's query. Analogue patients' (n = 120) task was to read a randomly assigned exchange from each pair and to predict patient outcomes on a Likert scale.

Discourse analysis revealed that mental health professionals constructed reassurance through, inter alia, normalisation of MI, relating to third-party experiences as well as expressing moral indignation about stigmatisation. Moreover, multivariate ordinal logistic regression models showed that reassurance was associated with greater odds of satisfaction with the professional's communication style (OR = 6.51, df = 4, P ≤ 0.01), stigma-related anxiety alleviation (OR = 8.02, df = 4, P ≤ 0.01) and decreased treatment hesitancy (OR = 5.66, df = 4, P ≤ 0.01).

Results will be discussed concerning practice implications and directions for future studies. Additionally, the affordances of healthcare platforms, as compared to peer support communities, will be pointed out.

References

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