World Journal of Clinical Infectious Diseases

World J Clin Infect Dis 2022 April 26; 12(1): 1-49



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Peer Reviewer of World Journal of Clinical Infectious Diseases, Sitanshu Barik, MBBS, DNB, MNAMS, MCh, FAGE, Assistant Professor, Department of Orthopedics, All India Institute of Medical Sciences, Deoghar 814142, India. sitanshubarik@gmail.com

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INDEXING/ABSTRACTING

The WJCID is now indexed in Reference Citation Analysis, China National Knowledge Infrastructure, China Science and Technology Journal Database, and Superstar Journals Database.

RESPONSIBLE EDITORS FOR THIS ISSUE

Production Editor: Yi-Xuan Cai; Production Department Director: Xiang Li; Editorial Office Director: Ya-Juan Ma.

NAME OF JOURNAL

World Journal of Clinical Infectious Diseases

ISSN 2220-3176 (online)

LAUNCH DATE

December 30, 2011

FREQUENCY

Continuous Publication

EDITORS-IN-CHIEF

Joao Mesquita, Caterina Sagnelli, Wei Wang, Haroon Ahmed

EDITORIAL BOARD MEMBERS

https://www.wignet.com/2220-3176/editorialboard.htm

PUBLICATION DATE

April 26, 2022

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World J Clin Infect Dis 2022 April 26; 12(1): 47-49

DOI: 10.5495/wjcid.v12.i1.47 ISSN 2220-3176 (online)

LETTER TO THE EDITOR

COVID-19, stigma, and people with disabilities: A mental health perspective

Raktim Swarnakar, Shreya Santra

Specialty type: Infectious diseases

Provenance and peer review:

Unsolicited article; Externally peer reviewed.

Peer-review model: Single blind

Peer-review report's scientific quality classification

Grade A (Excellent): 0 Grade B (Very good): B, B Grade C (Good): C, C Grade D (Fair): 0 Grade E (Poor): 0

P-Reviewer: Lin CY, Luo W, Wang

Received: October 2, 2021 Peer-review started: October 2,

2021

First decision: December 9, 2021 Revised: December 22, 2021 Accepted: February 15, 2022 Article in press: February 15, 2022 Published online: April 26, 2022



Raktim Swarnakar, Department of Physical Medicine and Rehabilitation, All India Institute of Medical Sciences, New Delhi 110029, Delhi, India

Shreya Santra, R. G. Kar Medical College and Hospital, Kolkata 700004, India

Corresponding author: Raktim Swarnakar, MBBS, MD, Senior Resident Doctor, Department of Physical Medicine and Rehabilitation, All India Institute of Medical Sciences, Ansari Nagar, New Delhi 110029, Delhi, India. raktimswarnakar@hotmail.com

Abstract

Discrimination is an age-old 'illness' irrespective of its context. Stigma is a common factor that has been associated with disability and coronavirus disease 2019. The public health impact of stigma on differently-abled people during this pandemic is not known and it is a poorly investigated and neglected area. It is important to address the current research need in the concerned area and its implications for public health policymaking and changes in practices that it requires. Together we can win the war against pandemics if we reduce the mental distancing in all perspectives.

Key Words: COVID-19; Stigma; Disability; Mental health; Public health

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Core Tip: Currently, coronavirus disease 2019 (COVID-19) is known to be associated with stigma. Previously, it was known that disability is also associated with stigma. The public health impact of stigma on differently-abled people during the COVID-19 pandemic is not known and is a poorly investigated area currently. This letter would like to address the current research need in the concerned area and this would have implications for public health policymaking and changes in practices that it needs.

Citation: Swarnakar R, Santra S. COVID-19, stigma, and people with disabilities: A mental health perspective. *World J Clin Infect Dis* 2022; 12(1): 47-49

URL: https://www.wjgnet.com/2220-3176/full/v12/i1/47.htm

DOI: https://dx.doi.org/10.5495/wjcid.v12.i1.47

TO THE EDITOR

"Viruses do not discriminate and neither should we"[1].

Globally, coronavirus disease 2019 (COVID-19) has become a public health emergency. In such crisis, rumors, misinformation, fear, and lack of proper public health awareness make fertile soil for the stigma to grow incessantly[2]. Unfortunately, from historical ages to the modern era, infectious diseases and disabilities are independently associated with the social stigma. COVID-19 has already made a negative impact on mental health and stigma has just aggravated it. It is well known that people with disabilities face discrimination and stigma in different spheres of life and such a pandemic situation resulted in greater difficulty in individuals with disabilities than the able-bodied population.

Stigma invariably leads to concealment of COVID-19 symptoms and delayed treatment, which leads to greater dissemination of severe acute respiratory syndrome coronavirus-2 (SARS-CoV-2) infection among the public. Many disabling conditions like people with spinal cord injury are particularly vulnerable to SARS-CoV-2 infection. People with disabilities already had physical barriers[3], but the pandemic has added mental and attitudinal barriers due to social stigma. In the context of pandemic crisis, such social stigma severely affects the mental health of people with disabilities. COVID-19 already has hampered social participation due to social distancing and has limited functional involvement due to home confinement and lockdown[4]. Moreover, vaccine inequity may also create further issues which need attention beforehand[5]. Furthermore, social stigma becomes an extra hindrance for better functionality and participation of these populations.

Social stigma in the context of mental health not only damages its victim but becomes also detrimental to the whole public health domain. Social stigma among individuals with disabilities during a pandemic can be prevented by: (1) Public health awareness program through proper information, education, and communication; (2) breaking the misconceptions about COVID-19; (3) considering people with disabilities as differently-abled; (4) improving provision of telerehabilitation emphasizing psychiatric telerehabilitation during the pandemic; (5) identifying barriers and planning to overcome them; and (6) online social-engagement, peer-group formation, and motivational sessions to boost morale and improve the mental well-being of individuals with special needs and disabilities.

Worldwide COVID-19 cases crossed 336 million, and the population with disability crossed one billion[6,7]. Putting this situation in the public and mental health perspective, COVID-19 has set a newnormal life whereas people with disabilities lead a new-normal life with different ability, and eradicating social stigma from this 'new-normal life' is each and everyone's responsibility.

We, healthcare professionals from every domain, should keep closer surveillance so that the physical distancing does not become a mental distancing.

What is the current understanding of this topic?

Currently, COVID-19 is known to be associated with stigma. Previously, it was known that disability is also associated with stigma.

What does this Letter-to-Editor add to the literature?

The public health impact of stigma on differently-abled people during the COVID-19 pandemic is not known and is a poorly investigated area currently.

What are the implications for mental health practice?

This letter would address the current research need in the concerned area and this would have implications for public health policymaking and changes in practices that it needs.

FOOTNOTES

Author contributions: Swarnakar R contributed to conception and design; Swarnakar R and Santra S contributed to literature search and writing.

 $\textbf{Conflict-of-interest statement:} \ Raktim\ Swarnakar\ and\ Shreya\ Santra\ declare\ no\ conflicts\ of\ interest\ for\ this\ letter.$

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Country/Territory of origin: India

ORCID number: Raktim Swarnakar 0000-0002-7221-2825; Shreya Santra 0000-0002-6754-2694.



S-Editor: Wang LL L-Editor: Wang TQ P-Editor: Wang LL

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