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

Swarnakar R *et al*. COVID, stigma, disability, and public health

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**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.

**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 new-normal 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.

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**Footnotes**

**Conflict-of-interest statement:** Raktim Swarnakar and Shreya Santra declare no conflicts of interest for this letter.

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