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# Introduction to the Special Issue on Stigma in Mental Health

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Title: Introduction to the Special Issue on the Stigma in Mental Health

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Our field's awareness of stigma and its consequences has grown considerably in recent years, but our ability to effectively decrease stigma remains limited. One only needs to turn on the news after a tragic mass shooting to hear ubiquitous sentiments that the perpetrators were driven by mental illness, and broad calls to ensure that those with mental illness never have access to a gun. Words like "dangerous," "crazy," and "deranged" begin to be used interchangeably with "mentally ill," feeding the stereotypes and misinformation that research demonstrates have only grown, not decreased, over time (see Parcesepe & Cabassa, 2013, for a review). Certainly, many mass shooters have mental illnesses, but this does not make the converse true. That is, the vast majority of individuals with mental illnesses are not dangerous (Knoll & Annas, 2016). These misperceptions of individuals with mental illness are associated with a host of negative outcomes including more severe impairment, lower quality of life, and lower rates of treatment seeking (Hinshaw, 2009). As a field, we have long demonstrated a commitment to providing science-based information to counter these and other similarly stigmatizing beliefs and attitudes to the public (e.g., American Psychological Association, 2018), but more can be done both to advocate for individuals with mental disorders and to develop effective interventions to decrease stigma.

In addition to addressing the general problem of the stigma of having a mental disorder, there are a number of groups that are particularly highly stigmatized. Often, such groups face pronounced barriers to accessing and engaging in treatment. Promisingly, our field's understanding of the unique challenges faced by racial and ethnic minorities, sexual and gender minorities,

immigrants, individuals with disabilities, and individuals living in poverty continues to expand. However, awareness of the difficulties individuals belonging to these groups face is necessary but not sufficient for addressing them. We must develop interventions that meet the needs of these specific populations and ensure equal access to high quality, culturally sensitive care.

In this special issue, we present a diverse group of articles including commentary, reviews, and empirical work that addresses stigma in mental health and its treatment, both broadly and among specific highly stigmatized groups. This collection of work includes clinical recommendations, novel paradigms for societal attitude change, and interventions aimed at decreasing stigma. This is a vast problem that cognitive and behavioral clinicians and researchers alike should be paying attention to and seeking to address in their work. We thank the authors for their meaningful contributions and hope the ABCT membership will find this special issue to be informative and thought provoking.

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