

STIGMATIZATION IN THE COVID-19 PANDEMIC

INSIGHTS FROM HEALTHCARE WORKERS' EXPERIENCES



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INTRODUCTION

The rapid spread of the coronavirus led to significant uncertainty and fear worldwide, resulting in increased stigma, particularly affecting healthcare workers (HCWs) [1]. HCWs faced heightened workloads, often without adequate protective equipment, increasing their risk of infection [2, 3].

The stigmatization of HCWs during the COVID-19 pandemic is a significant challenge in crisis response efforts. HCWs were significantly more likely to face COVID-related stigma compared to the general population [4, 5], with an estimated prevalence of stigmatization around 30% [6].

This issue could become more pronounced when multiple forms of stigmatization intersect, including factors such as ethnicity, gender, profession, and age.

To reflect the complex nature of stigma and its impact on HCWs, this study utilizes the Health Stigma and Discrimination Framework (HSDf) [7, 8]. The HSDf describes the process of stigmatization globally and across different domains, providing a comprehensive lens through which to view the experiences of HCWs.

This study aims to explore the impact of stigma on HCWs' experiences, consequences, and coping mechanisms during the COVID-19 pandemic in Germany.

METHODS

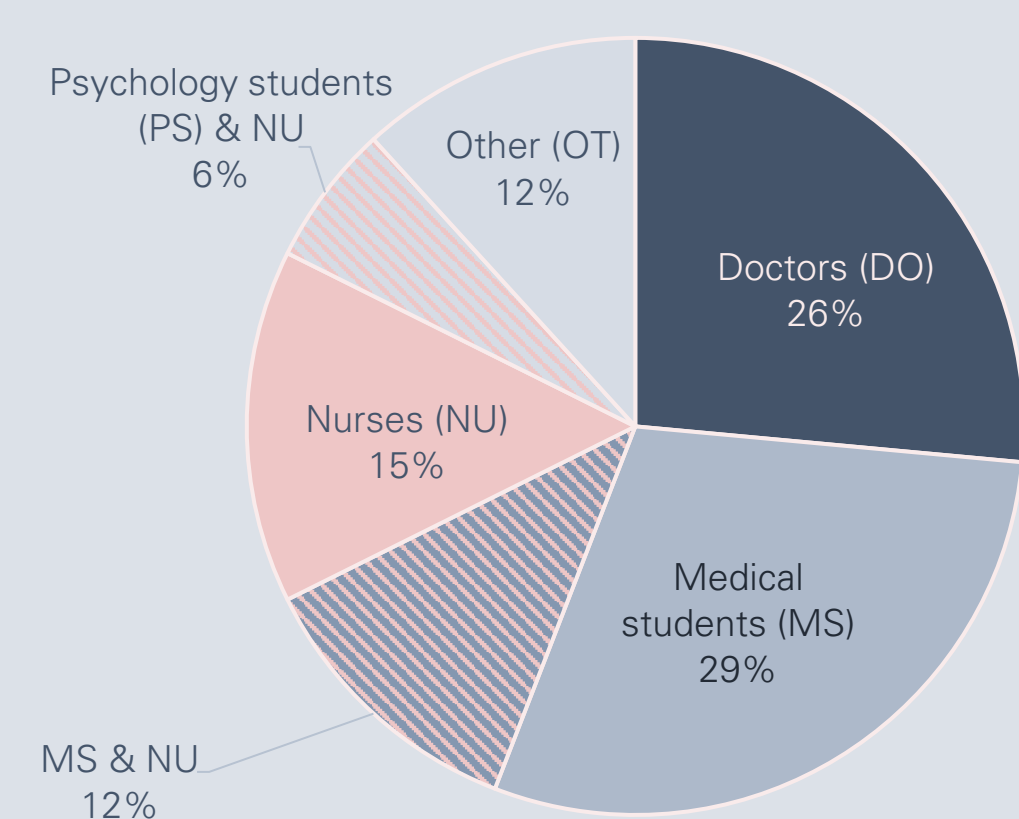
How did HCWs in Germany experience stigmatization, double stigma and intersectional aspects in the context of the COVID-19 pandemic?

Semi-structured interviews to explore the experiences of HCWs in this context. Data collection took place from February 2023 to January 2024. The interviews lasted 62 minutes on average, ranging between 20 and 90 minutes.

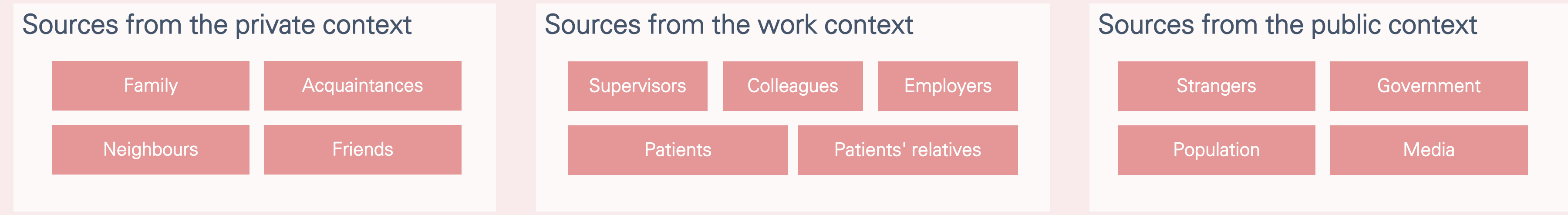
Qualitative content analysis [9] to identify sources of stigma, forms of COVID-related stigma, other forms of stigma, consequences of stigma and personal coping strategies from an intersectional perspective.

SAMPLE

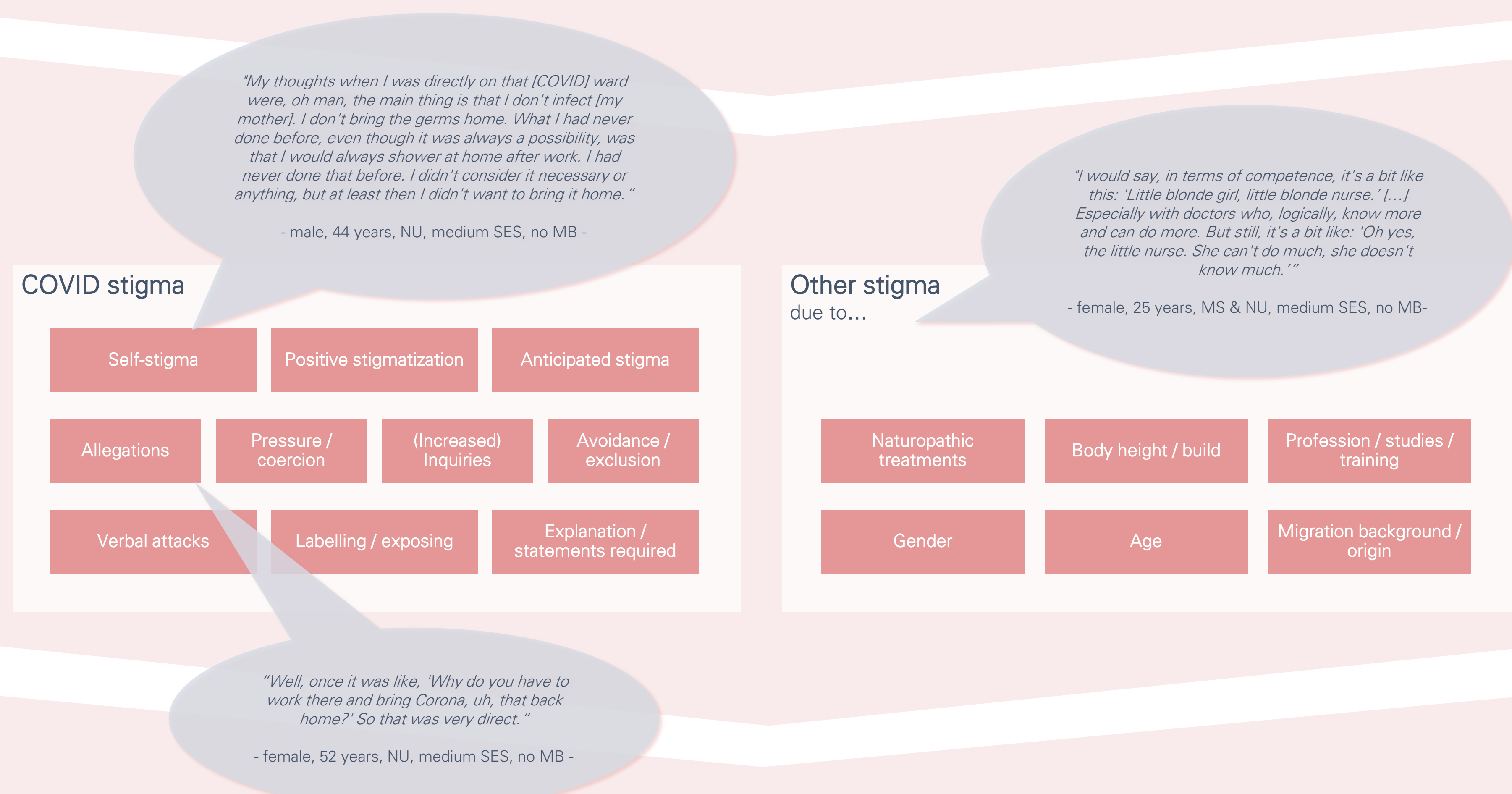
Sample	N = 34
Age	M = 34.09 years, SD = 12.31 years min = 19 years, max = 63 years
Gender	
Female	n = 24, 71 %
Male	n = 10, 29 %
Migration background (MB)	
Without MB	n = 30, 88 %
With MB	n = 4, 12 %
Socioeconomic status (SES) [10]	
Low SES	n = 8, 24 %
Medium SES	n = 17, 50 %
High SES	n = 9, 26 %
Occupational group	



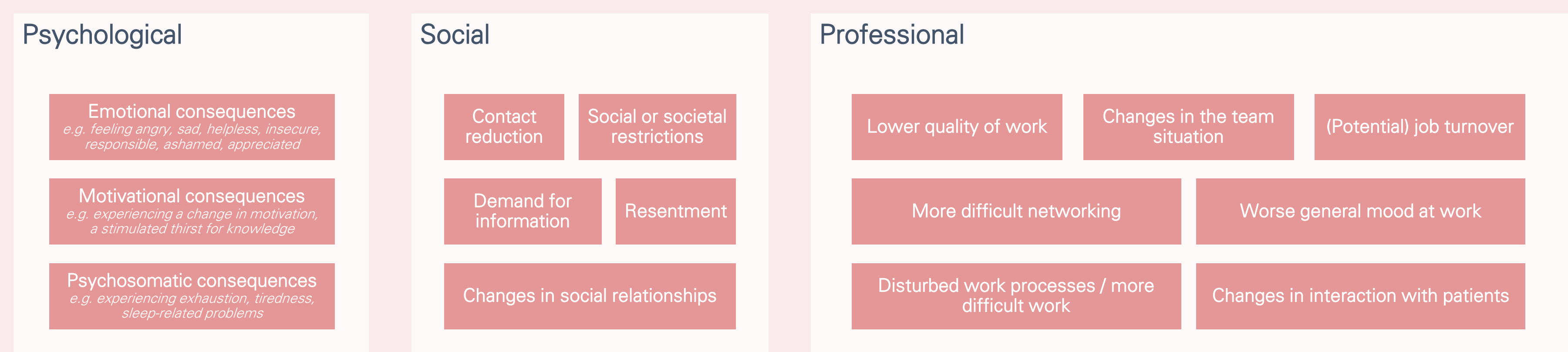
SOURCES OF STIGMA



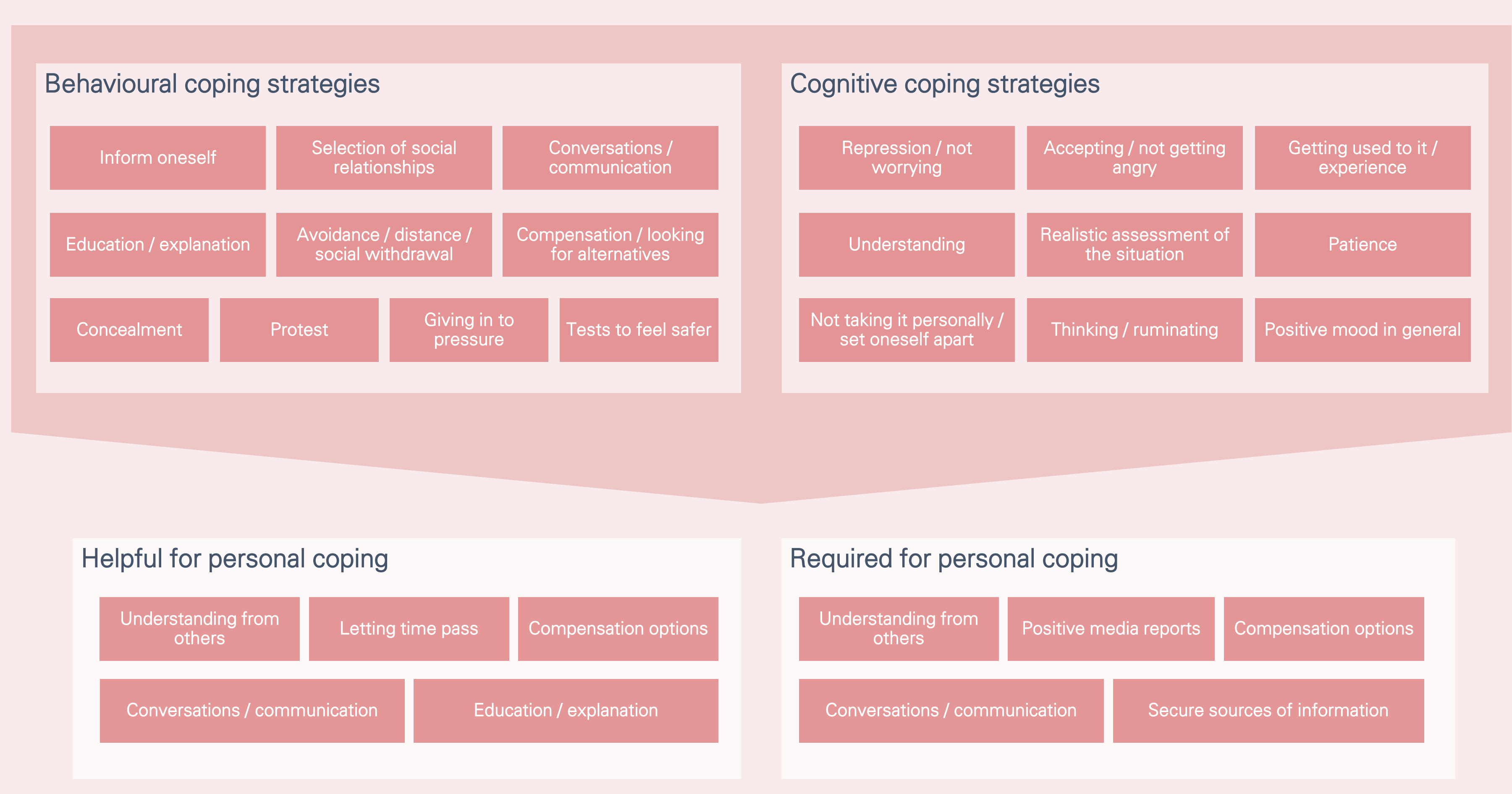
FORMS OF STIGMA



CONSEQUENCES OF STIGMA



PERSONAL COPING WITH STIGMA



CONCLUSIONS

The study investigated the impact of stigmatization on HCWs in Germany during the COVID-19 pandemic, highlighting several key implications for designing and implementing anti-stigma interventions:

- (1) Anti-stigma interventions during pandemics should consider diverse sources of stigma and the intersectionality affecting HCWs.
- (2) To be more targeted and effective, these interventions should be guided by the coping strategies required and successfully employed by HCWs.
- (3) Our study highlights the need for such interventions to support HCWs in addressing stigmatization in pandemic situations.

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