

Center for Communication, Health, and the Public Good

Newsletter

Director's Message

Welcome to the second issue of our newsletter! As a hub for intellectual activity across all fields that address health and the public good, the Center continues to grow in exciting ways. Since becoming Director in Spring 2023 we've added eight affiliated faculty, hosted three events, updated our website, and developed two new initiatives to focus our future efforts: stigma and community empowerment and resilience.

This issue of the newsletter focuses on stigma. The perpetuation and reinforcement of stigma poses one of the biggest challenges to our health and wellbeing. In this issue you can read our mini-forum to see how stigma impacts faculty research, check out our faculty publications on stigma, and read more about what you can do to reduce interpersonal stigma.

As Director I continue to think about the future of the Center and how to bring our students and faculty together to address some of these issues and more. So if you have ideas for events, projects, grants, screenings, speakers, community events, creative endeavors or any other visionary pursuits, please reach out. I'm here to make it happen!

Dr. Katrina Pariera

Upcoming Events:

**CCHPG Networking
Lunch for all core and
affiliated faculty.
Wednesday, Nov 8th
11:30am-1:30pm
Faculty Staff Club,
Room A**

**Health Narratives
Student Showcase.
Co-sponsored with
HCSO.
April 2024,
(Date TBD).
See flyer on last page.**



SDSU

College of
Professional
Studies and
Fine Arts

Mini-Forum: The Role of Stigma in Our Research

A forum is an opportunity for scholars to share their diverse perspectives on an important topic. For this mini-forum, faculty were asked to respond to the question “How does stigma play a role in your research?” Their responses show how faculty think about and address the roots of stigma, how it is a barrier to health, and how we can cope with enacted stigma.

Heather Canary:

I began exploring stigma through research during my doctoral studies. As an organizational communication scholar who was also interested in family communication about disability, I began studying the intersection of educational, health, and family systems. It was an unusual approach for an emerging communication scholar back in the early 2000's. However, my own struggles as a mother of one child who was in special education and one child who was gifted motivated me to conduct studies that gave voice to people who, like me, were overwhelmed by bureaucratic systems, social expectations, diagnostic jargon, and the need to try to have as “normal” of a life as possible. Over the years, my studies have evolved to include a variety of organizational, health, disability, and family issues, such as family health history communication, disclosure about Down syndrome, pediatric traumatic brain injury, and genetics communication. There is much yet to be understood about the development, maintenance, and impact of stigma on our life journeys. Communication scholars are well-situated to take on such important work.

Katrina Pariera:

As someone who primarily researches the ways we talk about sex, reducing stigma is what motivates my work. Stigma hinders communication. It's a looming shadow cast by shame. For instance, we know it's important that sexual partners know each other's STI status, but STIs are highly stigmatized. They are discussed with disdain or treated as a punchline. This stigma is a formidable obstacle to talking openly about STIs. To disclose is to risk being ostracized, shamed, or even physically harmed. From early in the AIDS crisis communication experts have urged people to talk to their partners openly and honestly about sex, but stigma is and remains a palpable barrier to this communication. Fortunately, in my research I have found that even one conversation can have a ripple effect at eroding stigma. It's especially important for those in positions less burdened by stigma (in other words, those for whom the risks are minimal) to speak out, humanize, and normalize. Even seemingly small acts can make a big impact in dismantling the barriers of silence and judgment that surround sex and every other stigmatized issue.

Rebecca de Souza:

In my work, I focus on stigma formations with political roots and implications. For example, in my book *Feeding the Other*, I conceptualize the notion of “neoliberal stigma”. Neoliberalism is a political-economic theory that argues that human well-being is best served by business, free markets, and minimal government intervention. So, neoliberal stigma is when this abstract political economic theory penetrates our daily lives and deepest thoughts and feelings. In this mindset, the breadth and diversity of human life, living, work, and productivity are reduced to economic productivity. Those who are economically successful are valued, while those who are seen as not contributing to markets are devalued. In the end, neoliberal stigma contributes to and reinforces the stigma of hunger, poverty, race, and disability to name a few.

Yea-Wen Chen:

Dr. Chen shares how stigma fits into her work in this abstract: Ji and Chen (2023) examined Chinese international students' lived experiences of being stigmatized during the early onset of the COVID-19 pandemic in the United States. To understand their dual-marginalization due to Othered Chinese-ness (e.g., racialized immigrant Others and foreigner Asians) and presumed contagiousness (e.g., suspected, diseased, and infectious), we adopt co-cultural theory to centralize their experiences of coping with COVID-related stigmatization. Semi-structured interviews and thematic analysis demonstrate how Chinese students heightened their sensitivity to ambiguous yet hostile stigmatization and how they often opted for non-assertive, non-confrontational, and threat-avoiding coping strategies. We reflect on how current health and racism crises further marginalize immigrant Others in general and Chinese immigrants in particular. We conclude with discussing theoretical application of co-cultural theory to understand stigmatizing and stigmatized health communication.

Wayne Beach:

In Erving Goffman's now classic book *Stigma* (1963), he begins by describing that the Greeks created the term "to refer to bodily signs designed to expose something unusual and bad about the moral status...a blemished person, ritually polluted, to be avoided, especially in public places." (p.1). My research makes clear that cancer can be and often is a very stigmatizing disease. But people often assume, and wrongly so, that a cancer diagnosis is equivalent to a death sentence – despite overall survival rates of nearly 70%. We emphasize hope over despair and life over death. National audience reactions to two professional films that have translated my cancer research for the public good – *When Cancer Calls...* and *A Journey Through Breast Cancer* – confirm the fundamental importance of quality communication when managing illness and disease. Both are now available on over 275 regional Public Broadcasting System (PBS) stations. If interested, you can access and view these films through these links: <https://www.pbs.org/video/when-cancer-calls-jwcfcc/>
<https://www.pbs.org/video/a-journey-through-breast-cancer-yba46m/>

Rachael Record:

Encouraging people to make healthy choices is hard, and stigma makes those efforts harder. My research tests persuasive messaging strategies to promote tobacco prevention behaviors, encouraging individuals to not use or be around tobacco products. Tobacco use is a highly stigmatized behavior due to its well-established harm to human health. On one hand, stigmatization sets social norms to discourage tobacco use. But on the other hand, it overlooks the addictive nature of nicotine, punishing users for their addiction and triggering feelings of shame or guilt. For some individuals, the stigma around tobacco use looms over their decision-making. Like a devil on their shoulder saying, "why bother, people are already judging you," stigma is an additional barrier that must be considered and addressed in public health communication campaigns and interventions. Through reducing perceptions of stigma, people can feel more open and willing to engage in healthy prevention behaviors.



In May the Center hosted a successful film screening of *Target Zero*, directed by affiliated faculty Mary Posatko. Faculty, staff, and students came together to learn about and discuss the stigma around living with HIV and the need for compassionate care for treating and preventing it.

Pictured here: Katrina Pariera, Brie Pham, Mary Posatko, Andy Huizar, Katya Azzam, Josh Dreyer

Some Faculty Scholarship Related to Stigma

de Souza, R. (2023). Communication, carcerality, and neoliberal stigma: The case of hunger and food assistance in the United States. *Journal of Applied Communication Research*, 51(3), 225–242. <https://doi.org/10.1080/00909882.2022.2079954>

Ji, Y., & Chen, Y.-W. (2023). “Spat on and Coughed at”: Co-cultural understanding of Chinese international students’ experiences with stigmatization during the COVID-19 pandemic. *Health Communication*, 38(9), 1964-1972. <https://doi.org/10.1080/10410236.2022.2045069>

Dykstra-Devette, T. A. (2018). Resettlement rhetoric: Challenging neoliberalism in refugee empowerment initiatives. *The Southern Communication Journal*, 83(3), 179–191. <https://doi.org/10.1080/1041794X.2018.1437925>

Stigma exists at the individual, interpersonal and structural level. Here are some evidence-based suggestions for reducing stigma at the interpersonal level:

- Respond to misperceptions or negative comments by sharing facts and experiences.
- Be deliberate about language and terminology – remind people that words do matter.
- Give and get peer support. The people closest to us can be our biggest sources of empowerment.
- Educate yourself on health, resources, and the lived experiences of people around you.
- Go out of your way to be inclusive.

Sourced from: Dept of Mental Health and Substance Abuse Services, NIMH, Stigma and Health journal, National Alliance on Mental Illness, Centre for Addiction and Mental Health

Faculty Affiliate Spotlight



Dr. Lacie Barber

Department of Psychology, SDSU

Dr. Barber is an internationally recognized leader in research on work-life balance and sleep issues surrounding information and communication technologies. She also oversees the Occupational Health and Stress Laboratory. Her work on workplace telepressure has shaped both academic and popular news discussions about how the felt need to respond immediately to work emails and texts immediately can be detrimental to work recovery and feelings of burnout.



Dr. Eyal Oren

School of Public Health, SDSU

Dr. Oren is a core investigator at the Institute for Behavioral and Community Health and trained as an infectious disease, respiratory, and social epidemiologist in numerous projects relating to respiratory health, including COVID-19, TB, flu, tobacco exposure, and asthma. Dr. Oren has worked on the effective adoption of interventions in the community, and at the interface of infectious etiologies and chronic disease outcomes, particularly cancers.



Our School of Communication students have been busy spreading the word about the Center! Pictured here are Brie Pham, Joshua Dreyer, and Noelle Bunce at an HCSO (Health Communication Student Organization) tabling event, letting everyone know about the School, student organization, and Center.

Thank you!

Thank you for reading our newsletter! To learn more about the CCHPG, visit our [website](#).


If you have an announcement or event you would like featured in this newsletter, please email our graduate research assistant, Brie Pham at bpham2@sdsu.edu.

Looking for a way to boost your resume or CV with minimal effort?

Have you worked on a research paper or project that explores health narratives or examines the intersection of health and communication?

Share your research, scholarship, and creative activities and be featured in the April 2024...

HEALTH NARRATIVES STUDENT SHOWCASE



Presented by Health Communication Student Organization and Center for Communication, Health, and the Public Good

We welcome projects from all stages.

Submissions are due 12/22!

Each participant will receive an official SDSU certificate of participation, and the top three submissions will be awarded additional prizes!

Scan the QR code to fill out our interest form:



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