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Editorial: Anti-stigma communication in the 21st century: theory, research, and applications

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Editorial on the Research Topic

[Anti-stigma communication in the 21st century: theory, research, and applications](#)

1 Introduction

Stigmas are created, spread, amplified, or reduced through communication (cf. [Meisenbach, 2010](#); [Smith, 2007](#)). Many people are affected by structural, public, or self-stigmatization because of their gender, race, age, disability, health status, sexual orientation, socioeconomic status, etc. Attempts to mitigate stigmatization through interpersonal, mediated, or mass communication remain challenging and yield inconsistent results. Moreover, findings regarding successful or unsuccessful communication approaches are difficult to compare among studies in the context of health communication as well as across other related fields of research. This is due to the fact that substantial differences exist in the literature regarding theoretical conceptualizations (cf. [Link and Phelan, 2001](#)), operationalization and measurement approaches (cf. [Bresnahan and Zhuang, 2015](#)), as well as communication-based intervention strategies (cf. [Stutterheim et al., 2023](#)). Meanwhile, international organizations call for urgent and quick solutions to mitigate stigmatization, resulting in rushed and often insufficient initiatives with limited impact and incongruent results.

The current Research Topic of Health Communication aims to address these issues by encouraging innovative research from the field of health communication and related disciplines targeting critical topics (e.g., people with mental illness or disability, social norms, moral values, victims of tragedy, and structural discrimination). Our goal is to enhance the understanding and the comparability of the theoretical foundations, mechanisms, measurement approaches, data analysis strategies, and implications related to anti-stigma communication, as well as the mediated construction, spreading, and negotiation of stigma. We hence offer six studies including four original research articles, one brief research report, and one systematic review that contribute to how anti-stigma communication is being addressed, conceptualized, implemented, and evaluated in recent years.

2 Overview of studies

In her systematic review, [Kunze](#) surveyed 79 publications to understand how media contributes to both stigmatization and destigmatization of various groups. Her goal is to develop a framework for effective destigmatization strategies in media and communication, highlighting the importance of these efforts in achieving societal equality. The main results of her systematic review consist of a definition of destigmatization as a communication-based process which helps clarify the scope and nature of destigmatization efforts and the identification of four main factors at media level that influence this destigmatization process (contact, education, language, and framing). In this regard, media can both contribute to and help reduce stigma, depending on how it portrays stigmatized groups. Her findings provide a good basis for future research to adapt and expand destigmatization strategies across various stigmatized groups and settings and concludes that most of the destigmatization efforts require more than one media-centered intervention that combine different factors and focus.

Within this (de)stigmatization process, [Ort and Sukalla](#) asked whether stigma scales used to investigate negative stereotypes might have negative and stigmatizing tendencies toward the affected group under investigation. In their preregistered meta-research study with 805 participants, they examined the possible detrimental effects of stigma scale exposure of two different topics: weight loss surgery and pre-exposure prophylaxis (PrEP). Their results showed that exposure to stigma scales might have a mild effect in accessing negative stereotypes (with special focus on the PrEP case), and that this effect is moderated by previous knowledge on these research topics. Consequently, their research showed that it is crucial to consider the wider practical implications for anti-stigma communication, particularly regarding the use of negative stereotypes in interventions such as public health campaigns or when evaluating those campaigns.

[Hastall et al.](#) examined how media portrayals of college students with disabilities influence public stigma-related attitudes and behaviors. In a study of 767 German university students, participants read manipulated newspaper articles highlighting various disability aspects before completing a questionnaire. Results showed complex interactions between disability characteristics and audience reactions, potentially leading to “accidental stigmatization”. Mental impairments evoked more negative responses than physical ones, while non-heterosexual portrayals received less sympathy. Multiple stigmatized traits increased discrimination. This research uniquely compares several conditions simultaneously, revealing how subtle details in media depictions impact stigma formation and intersecting marginalized identities. The findings emphasize the need for careful media representation to prevent unintended bias reinforcement, contributing significantly to stigma research by demonstrating the nuanced effects of exemplar characteristics on public perceptions.

Similar to [Hastall et al.](#)'s study using news articles, [Brown et al.](#) investigated how social media posts influence public perceptions of health issues. Their research explored stigma on Twitter across various conditions, finding about one-third of messages contained potentially stigmatizing content, while over one-fifth featured anti-stigma sentiments. Differences emerged between conditions: HIV/AIDS tweets showed highest prevalence of stigmatizing labels,

eating disorder posts emphasized physicality, and substance abuse messages focused on societal dangers. Manually coded stigmatizing tweets demonstrated more negative sentiment and higher toxicity scores. The study contributes to stigma research by comparing multiple conditions simultaneously, addressing limitations of previous isolated approaches. These findings could inform future health communication strategies by illustrating nuanced stigma manifestations of medical conditions on social media platforms.

[Freytag et al.](#) explored how depression is framed cognitively as well as associated with respondents' specific affective reactions and their accessibility to mental health communication. The findings from the representative survey conducted among the German adult population point to four distinct cognitive depression frames, reflecting different features of stigmatization and ascribed responsibility. The authors conclude that stigmatizing frames are related to respondents' lower receptivity of mental health information. As a consequence, the role of cognitive frames needs to be considered more closely for the implementation of mental health communication approaches.

Finally, [Rook and Holmes'](#) preregistered experiment addressed the linguistic framing of fatness in a news article with a 2 × 2 factorial design. The issue was either described as affirming or negating fatness as a disease as well as “fat-rights” claims. As a result, only participants who were aware of the persuasive nature of the articles indicated either more negative attitudes after reading a disease-affirming article or more positive attitudes after reading a disease-affirming, but also fat-rights affirming article. These findings provide valuable insights for the understanding of linguistic frames and the persuasive power of anti-stigma communication efforts.

3 Conclusion

In conclusion, all six contributions shed light on the current scope of anti-stigma communication theory, research, and application in the 21st century. While there is an increasing understanding of promising destigmatizing communication approaches, various old and new challenges emerge that deserve close attention in future research.

Author contributions

AR: Conceptualization, Writing – original draft, Writing – review & editing. AK: Conceptualization, Writing – original draft, Writing – review & editing. SV: Conceptualization, Writing – original draft, Writing – review & editing.

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Conflict of interest

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