

Abstract

Background: Stigma related to mental illness is a well-recognised problem. However, most studies focus on schizophrenia but few on bipolar affective disorder. The relationship between self-stigma and functioning in patients with bipolar affective disorder has not been investigated until recently. With no study focusing on the stigma in patients with bipolar affective disorder in Hong Kong, the present study aims to investigate the relationship between self-stigma, stigma coping and social functioning in patients with bipolar affective disorder.

Methods: This was a cross-sectional study carried out in a local out-patient clinic. A randomised sample of 115 patients with the ICD-10 diagnosis of bipolar affective disorder, in remission, was recruited. Correlations between self-stigma, coping and social functioning were investigated. The relationships between other clinical variables and self-stigma were also examined. Regression analysis was used to identify the predictors of social functioning.

Results: Self-stigma was significantly associated with dysfunctional coping strategies (secrecy and withdrawal) and worse social functioning. Only secrecy type of coping showed positive correlation with worse social functioning. Residual depressive symptoms and poor social support were related to high self-stigma and

poor social functioning. Social functioning was predicted only by self-esteem

decrement caused by stigma and mood symptoms ($p < .001$).

Conclusion: This study demonstrated that self-stigma was related to dysfunctional coping strategies and worsening of social functioning. Development of stigma-reduction programs for patients with bipolar affective disorder is necessary.