Influence of Stigmatizations Depression on the Well-being of Chinese High School Students: From Self-stigma and Stigma of Others

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Abstract. In recent years, the mental health problem of Chinese high school students has become increasingly prominent. Along with the increase in the diagnosis of depression, the stigma associated with it also has a significant impact on students' well-being. The objects of this study are Chinese high school students (15-19 years old) who are suffering from depression (regardless of degree) and suffering from self-stigma (personal stigma and perceived stigma) and stigma of others. Literature analysis is used in this paper. Most of the literature comes from the papers on "stigma" and "depression" in Google Scholar. There are three conclusions in this paper, which are: others' stigma can negatively affect the well-being of Chinese high school students suffering from depression; others' stigma will negatively affect the perceived stigma in self-stigma and thus affect the well-being of patients; the personal stigma in self-stigma will have a negative impact on the well-being of patients.

Keywords: Self-stigma, stigma of others, depression, well-being.

1. Introduction

According to the 2023 Blue Book of China's Mental Health, students' mental health problems are becoming more and more prominent, and the detection rate of depression in high school students is 40%. Among 15-19 agestudents, 53.91% of students were caused by academic pressure [1]. Meanwhile depression, which is a major type of mental illness, has a stigma detection rate of 27% to 43%. The stigma of depression is one of the sources of stress for patients, which not only affects the quality of life of patients, but also can lead to their reluctance to seek help and even suicidal behavior [2].

In this paper, the dimensions of measuring happiness are defined as whether they have positive emotions and optimism, whether they face up to depressive symptoms and actively seek treatment for depression, whether they have good social relationships, are full of hope for the future, and do not have self-harm, suicide and other behaviors.More positive emotions than negative ones, meeting personal needs, effective academic, social, and psychological functioning while pursuing worthy goals in school, and receiving support from internal and external factors [3].

2. Causes and Effects of Others' Stigma

2.1. Cultural Factor

Confucianism influences the whole Chinese society's view of depression and influences the perceived stigma of others of stigma and self-stigma. This is because Confucianism, established in the Western Han Dynasty, became the mainstream ideology of China and played a very important role in the cultural and psychological structure of the Han nation [4].

Influenced by Confucianism, Chinese people pay attention to social harmony and avoid emotional expression, and psychological problems are often manifested as physical symptoms. Mental illness is seen as a violation of morality and brings shame on the family. Family members may think that having a depressed person in the family is a shameful thing and will affect the family name. Such concerns about the family's reputation can create a sense of stigma among family members, who may

try to hide the patient's illness from outsiders. This process creates significant obstacles for patients seeking treatment for depression [5]. The ethics of Confucianism leads to the psychological problem of stigmatization.

In traditional Chinese culture, people often misunderstand and prejudice mental illness, thinking it is a sign of "weakness" or "abnormal". This perception contributes to society's rejection of people with mental illness as different from the rest of the world, which fuels the stigma [6].

The social status quo of misunderstanding and prejudice about depression creates social stigma and leads to perceived stigma. Stigma makes people with depression and their families feel discriminated against by the outside world, leading to a reluctance to seek help and conform. Worsening of illness, delayed disease, and even suicidal behavior [7].

2.2. Social Structure Factor

A "family-oriented" social structure in which the actions of individuals represent the entire family. The conduct, career, and reputation of the individual are not only personal matters but concern the expectations and honor of the whole family, and the interests of the individual are unconditionally subordinated to those of the family. If the individual acts in accordance with the expectations of the family, the family will be proud of him and share the credit and resources; On the other hand, if the individual fails or disobeys the expectations of the family, he will feel ashamed and be reluctant to confront his family, who may also be humiliated by him. Based on such a social structure, for the family members of the patient, they may fall into the self-blame of "not managing the child well, causing him to suffer from depression, and destroying the harmonious and stable environment of the family" [8].

In addition, face acquisition is related to the family. In the mianzi culture, ZhaiXuewei believes that "mianzi" is "the identity psychology and behavior displayed by an individual after impression decoration in order to cater to the image recognized by a certain social circle", and "mianzi" is the formed "sequence state of psychology and behavior in the mind of others", that is, the psychological state [9]. Personal mianzi involves not only individuals but also other stakeholders such as families, villages, etc. Therefore, when the patient and his family members are in the same family, when the family members think that the patient's mianzi is still missing, they will also think that their mianzi is also lost. Losing mianzi means that social activities and relationships may be affected. Plus, families with depressed patients do not cater to social expectations. In order to avoid discrimination and social exclusion and to make their families conform to social expectations, family members may choose to hide the patient's illness and develop a sense of stigma.

2.3. The Influence of Others' Stigma on Well-being

Stigma of others has a direct negative impact on the happiness of patients. In other words, the stigma of family members makes patients lose their optimistic attitude, give up seeking treatment from the outside world, and destroy the social relations (including but not limited to kinship, friendship, etc.) owned by patients.

Specifically, it acts on the psychological, social and life aspects of the patient to affect the patient's happiness.

Patients develop self-doubt and negative self-perceptions because of the stigma of family members. After the patient perceives a series of changes caused by the stigma of his family members because of his depression, he worries that he has become a "burden" of his family members, thereby reducing self-esteem and worsening self-worth, and even self-deprecation and disgust. Such negative emotions seriously affect patients' psychological status and happiness. In addition, in social situations, when patients observe a series of unusual performances such as family members avoiding talking about the reasons for their depression, the heart will produce pressure, fall into depression, and affect happiness.

At the social level, family stigma makes it difficult for patients to socialize. Because of the stigma of the family members, the family members prevent the patient from participating in words and actions. For example, "do not tell your classmates that you suffer from depression" or "can't attend

the classmate party", which leads to social isolation between patients and others, further promoting the social exclusion suffered by patients, or feeling loneliness and discrimination, which has a negative impact on happiness.

Family stigma also has a significant negative impact on patients' lives. Because of the role of family stigma and family misunderstandings about depression, family members may believe that depression does not need treatment and should not be treated. This greatly affects the possibility of patients actively seeking treatment, and reduces the attitude of patients actively seeking treatment, which leads to the aggravation of the disease, making depression further affect the happiness of patients [10].

3. Causes and Effects of Self-stigma

3.1. The Influence of Others' Stigma on Perceived Stigma to Well-being

The stigma of others affects the lives and psychological well-being of others, and thus affects the well-being of patients. According to Fu et al., the proportion of family members with stigma is higher than that of patients [11]. Some scholars showed that the stigma of family members was negatively correlated with the quality of life, which may be reflected in the tense family atmosphere and the unbalanced psychological state of family members in the process of taking care of patients, because the factors of patients suffering from depression affected the family relationship and thus affected the psychological status of family members [12]. In addition to some personalized factors, such as the cost of depression treatment has damage to the family income level, reduces the quality of life, and thus affects the psychological level of family members. Or the cultural degree of the family itself and the object of interpersonal communication is not high, and there may be discrimination against patients with similar mental illness in the social scope. Family members are worried that because their family members suffer from depression, they will be discriminated against and socially rejected by people around them and avoid social intercourse, which will affect their life and psychological level.

After having a negative psychological impact on the family members, the family members may put pressure on the patient in language and behavior while taking care of the patient. The pressure from family members means less social support and less ability to cope with social discrimination, thus generating stigma and attaching it to patients [13].

Studies have shown that the level of self-esteem is negatively correlated with the level of stigma, and the reduction of social support may affect the perceived stigma of patients, thus affecting the level of self-esteem and psychological level [14]. It is mainly manifested as unwillingness to communicate with people around and reduced social relations [15].

3.2. The Influence of Personal Stigma on Well-being

Self-stigma or personal stigma affects personal well-being. There are many reasons for personal stigma. Here are three of the most prominent reasons.

Reason 1: People who live alone have higher levels of stigma. The psychological state based on depressive symptoms, coupled with self-isolation and loneliness, makes it difficult to establish intimate social relationships with the outside world and obtain social support, which makes depression and stigma emotions unable to effectively alleviate. The patients studied in this paper are mostly high school students, belonging to the category of minors, and most of them live with their parents. Then, as a student who has lived alone as a minor, the family itself may have problems, such as parents divorced, and their own families, the patient as a "homeless" child is a pressure.

Reason 2: Literacy is negatively correlated with stigma. The patients in this study are high school students, which means that the most educated people in the population are high school graduates, and there is a lack of understanding of depression itself, and even discrimination and misunderstanding. In addition to parents, social interaction in daily life is the communication with classmates in school. In the social sphere, there may have been discrimination and misunderstanding of others' depression before. Therefore, after patients suffer from depression themselves, they are more worried that they

will be discriminated against by friends around them and lose good social relations, so as to hide their depression and avoid communication, thus affecting the psychological status of student patients.

Reason 3: The effect of depressive symptoms on school performance and thus on students' mental state. Academics have shown that having depression has a negative impact on students' academic performance. We only focus on students' scores in China, and its scores are compared to others, if their score is higher means that this student is better and has an opportunity to get into a better university [16]. Having a negative impact on academic performance due to symptoms of depression can exacerbate the stigma of depression and thus affect students' well-being under the pressure of an existing emphasis on academic performance.

With depression having such a large negative impact on the mental and physical health of high school students, the problem is exacerbated by the presence of depression stigma, which severely affects patients' daily lives, causing them to break down social relationships, decrease quality of life, and continue to decline in positive needs for help and situations filled with expectations and optimism about the future. More to cover up their depressive symptoms, expecting rejection [17].

Reason 4: Self-esteem and self-feeling exert pressure on oneself, which affects happiness. People with higher social status and self-esteem are more worried about themselves impaired self-esteem [18]. At the same time, higher self-esteem is more likely to lead to stigma [14]. According to Confucian theory, people have higher requirements for personal self-management and emotional control. Patients worry that because of some misunderstandings of depression such as "too pretentiousness", they may be considered to have failed to fulfill their self-management responsibilities, and then suffer discrimination and exclusion from others. Also, in the acute episode of depression, the sudden depression may make the patient trapped in the stereotype of "he is a psychopath" and appear stronger stigma.

4. Solution

Understand the patient's thoughts and difficulties, know what stigma they suffer from in every moment of their life, and how these stigmata make the patient feel. How can these feelings and thoughts be concretely implemented in the behavior of life? Help patients solve problems, reduce the stigma of depression as much as possible, reduce the psychological pressure of patients, and improve the happiness of patients. At the same time, let the relatives and friends around the patients, who are the proximal stressors in the minority group stress model, realize the seriousness of the problem and change their views on depression, which can provide more help and support for the patients, and further influence the remote stressors in the model, that is, the social stigma. Society may therefore establish new regulations and policies that pay more attention to the mental and health problems of this group.

5. Conclusion

Based on the ideology of Chinese society, social structure ("mianzi" society and "only scores" situation) and public opinion, there is the stigma of others and self-stigma (personal stigma and perceived stigma). (1) Others' stigma can negatively affect the happiness of Chinese high school students suffering from depression. (2) Others' stigmas will negatively affect the perceived stigma in self-stigma and thus affect the happiness of patients. (3) The personal stigma in self-stigma will have a negative impact on the happiness of patients.

The negative impact on the well-being of patients is manifested in the unwillingness to actively communicate with people around them, reduced social desire, and the expectation of being rejected by others. Trying to hide the symptoms of depression and delaying medical treatment can lead to worsening depression symptoms.

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