The word stigmatization has twice as many syllables and more than twice as many letters as stigma. In addition, using stigmatization leads to relatively more complicated phrases such as “the stigmatization of people with depression” (versus “the stigma of depression”). And stigma is far more commonly used by advocacy groups, researchers, and the media. So why have we at the RTC made the decision in our own writing to use the longer word with the more complicated constructions?

Our current thinking about this issue began with an angry email we received a few years ago. The writer was firmly opposed to the use of stigma in connection with mental health conditions, though he was not very specific about why or about what an acceptable alternative would be. My own first reaction was essentially to ignore his comments—why make a change on the basis of one complaint? There did not seem to be any broad-based movement objecting to the use of stigma and promoting an alternative.

As a writer and editor, however, it seemed that the least I could do was to check its definition. The dictionary says that stigma is a stain, mark, or brand of shame. With this definition in mind, it became easier to see why someone might object to a phrase like the stigma of depression. The phrase could be interpreted as saying that depression is a mark of shame. Even though this is clearly not what many people mean when they use stigma, the RTC eventually decided that our own policy would be to avoid the word. Instead, we use stigmatization, which is the act of casting shame onto others. We feel that this difference, though perhaps subtle, is an important one, and that using stigmatization is more consistent with our Center’s mission and values.

Putting together this issue raised the question for us once more, since most of the articles submitted for the issue used stigma. Ultimately, we decided not to ask our contributors to change their wording, and we were left wondering whether the distinction we were trying to make was meaningful to anyone besides ourselves.

We hope to gain some insight into this issue from our readers. If you have thoughts on stigma vs. stigmatization, go to the Featured Discussions page on our website (www.rtc.pdx.edu/FeaturedDiscussions/pgFD00main.php), where you can vote for your preference and leave comments. We look forward to hearing from you and we’ll let you know what we find out.

- Janet S. Walker, Editor