

Appendix 2 – Summary of drivers and facilitators of stigma

Impairment /health condition	Study ID	Study design	Country	Study population	Drivers	Facilitators	Risk of bias
Various (unspecified)	From the day they are born: a qualitative study exploring violence against children with disabilities in West Africa (Njelesani, 2018)	Qualitative	West Africa – Guinea, Niger, Sierra Leone and Togo	419 children with and without disabilities (10+ years), community members (including teachers and parents), and disability stakeholders		Religion and supernatural beliefs Associations of disability with sins/wrongdoing	Low
	Outside the circle: A research initiative by Plan International into the rights of children with disabilities to education and protection in West Africa Dak (Plan International, 2013)	Qualitative	West Africa – Guinea, Niger, Sierra Leone and Togo	1,027 participants, including children with disabilities (630), community stakeholders (280), government officials (117)	Lack of understanding and misconceptions about impairments	Religion and supernatural beliefs Associations of disability with sins/wrongdoing Inaccessible services	High

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	Violence against Children with Disabilities in Africa: field studies from Cameroon, Ethiopia, Senegal, Uganda and Zambia (African Child Policy Forum, 2010)	Mixed methods	Cameroon, Ethiopia, Senegal, Uganda, and Zambia	Survey: 956 young people with disabilities aged 18-24 FGDs: 'Numerous' with relevant stakeholders, including government officials, disability professionals, public servants and representatives from local Disabled Persons Organisations (DPOs)	Drivers of violence against children with disabilities: <ul style="list-style-type: none"> • Children with disabilities live with discrimination and are not considered like other children (Senegal) • Shame, poverty and negative cultural beliefs increase the vulnerability of children with disabilities to violence, especially from care-givers (Uganda) • Violence against children with disabilities is not out of 		Medium

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					<p>meanness but poverty and lack of understanding (Senegal)</p> <ul style="list-style-type: none"> • Most of the violence perpetrated against children with disabilities begins in the home because of the traditional belief that a child being born with a disability is the result of punishment by God for a family member's wrongdoing (Ethiopia); • Psychological violence against children with 		

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					<p>disabilities happens because the family believes that the child will always be a burden and never be productive in his or her own right (Ethiopia);</p> <ul style="list-style-type: none"> • Children with disabilities are often not registered at birth, so there are fewer formal support mechanisms available to them, and the lack of official statistics reflect a lack of institutional concern about disabilities (Ethiopia) • Disabled children are 		

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					<p>vulnerable to sexual abuse and paedophiles for two reasons: men of a certain age believe that sexual relations with children with disabilities brings good luck, and some take pleasure from their vulnerable physical and psychological situation (Senegal)</p> <ul style="list-style-type: none"> • Poor service delivery on the part of the police and a tendency for children with disabilities not to be believed when they report that 		

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					<p>violence blocks their equal inclusion in society (Ethiopia)</p> <p>Reinforced stigmas regarding children with disabilities:</p> <ul style="list-style-type: none"> • Punishment assists the growth and obedience of disabled children who are otherwise difficult (Ethiopia) • Sometimes, when caregivers segregate their disabled children from society and their peers, it is to “protect them” from 		

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					external abuse (Ethiopia) • Intellectual disabilities are “worse” than physical or sensory disabilities, and children with intellectual disabilities are “problem makers” (Ethiopia)		
Various (Washington Group Short Set (WGSS))	Knowledge, attitudes and practices in eye health and disability in Sierra Leone (Sightsavers, 2014)	Mixed methods	Sierra Leone	1,099 community members aged 18+ years from four districts	Lack of understanding of conditions Associations with supernatural factors and witchcraft		High
Various (physical, hearing, intellectual)	The abuse of children with disabilities in the Northwest region of Cameroon (The Cameroon Baptist	Qualitative (Participatory action research)	Cameroon (Northwest)	50 children and young people with disabilities aged 6-25 years, who experienced abuse; parents, carers, teachers		Religion and supernatural beliefs Associations of disability with sins/wrongdoing	Medium

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	Convention Health Services, 2019)			and other stakeholders		Gender norms prioritising men over women Poverty Lack of accountability and law enforcement	
Various (albinism, hearing, physical, intellectual)	Can anything good come out of this mouth? Female experiences of disability in Malawi (Braathen, 2008)	Qualitative	Malawi	23 women with disabilities	Lack of understanding of the condition	Religion and supernatural beliefs Associations of disability with a curse Gender norms prioritising men over women Poor socio-economic conditions	High
Albinism	Albinism in Malawi: knowledge and beliefs from an African setting (Braathen, 2006)	Qualitative	Malawi	25 people: children with disabilities (11), their mothers (11), siblings (2) and one community leader	Not knowing people with disabilities “Othering” people with disabilities Lack of understanding or misconceptions	Religion and supernatural beliefs Social norms	High

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					about impairment Associations of disabilities with wrongdoings		
	Albinism, stigma, subjectivity and global-local discourses in Tanzania (Brocco, 2016)	Qualitative (ethnographic)	Tanzania	8 people with albinism	Not knowing person/family history Lack of understanding of the condition	Associations with a curse or God punishment Poverty Inaccessible services	High
Cerebral palsy	Understanding the lives of caregivers of children with cerebral palsy (Zuurmond, 2015)	Mixed methods	Bangladesh	135 caregivers of children with cerebral palsy and 150 caregivers of children without disabilities	Lack of understanding or misconceptions about impairment	Religion and supernatural beliefs Associations of disability with bad spirits	Low
Epilepsy	Perception of epilepsy among the urban secondary school children of Bareilly district (Joshi, 2012)	Survey	India (Bareilly district)	798 secondary school children (14-16-year-olds)	Lack of understanding or misconceptions about impairment		Low

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	Knowledge, attitudes and practice among patients of epilepsy attending tertiary hospital in Delhi, India and review of Indian studies (Gourie-Devi, 2010)	Survey	India (Delhi)	120 people with epilepsy	Lack of understanding or misconceptions about impairment	Religion and supernatural beliefs	High
	Perceptions, social life, treatment and education gap of Tanzanian children with epilepsy: A community-based study (Mushi, 2012)	Qualitative	Tanzania	38 caregivers/child pairs	Lack of understanding of the condition	Inaccessible services Inadequate health care services	High
HIV/AIDS	HIV/AIDS-related stigma and discrimination: A study of health care providers in Bangladesh (Ahsan Ullah, 2011)	Qualitative	Bangladesh (Dhaka City)	41 participants, including HIV-positive patients (17), general health staff (10), doctors (8), and nurses (6)	Fear of being 'infected'	Religion and supernatural beliefs Associations with immoral behaviour and wrongdoing Cultural and social norms	High

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	HIV-related stigma and social capital in South Africa (Chiu, 2008)	Survey	South Africa	619 community members age 18+ years		Social capital and trust in the community	Medium
	'Dying twice' –a multi-level model of the roots of AIDS stigma in two South African communities. (Campbell, 2007)	Qualitative	South Africa	Community residents including people living with HIV, carers, community health volunteers, local leaders, NGO staff	Fear of being 'infected' Lack of understanding or misconceptions about impairment	Religion and supernatural beliefs Associations with sins and wrongdoing Availability of information and services Opportunities for empowerment through a social dialogue about HIV/AIDS Cultural norms about sexuality Poverty	High
	Religion and HIV in Tanzania: influence of religious beliefs on HIV stigma, disclosure, and	Survey	Tanzania	438 attendees of three churches (Protestant, Catholic, Lutheran)	Misconceptions about HIV/AIDS Not knowing people with the	Religion and supernatural beliefs Social and cultural norms about sexuality	High

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	treatment attitudes (Zou, 2009)				condition or family history		
	Examining the actions of faith-based organizations and their influence on HIV/AIDS-related stigma: a case study of Uganda (Otolok-Tanga, 2007)	Qualitative	Uganda	30 key informants, including senior government officials, researchers, health service providers, national AIDS programme officers, representatives from NGOs, FBOs, pharmaceutical industry	Lack of understanding or misconceptions about impairment Association with sins and wrongdoings	Cultural norms about sexuality, morality and death Religion and supernatural beliefs	Medium

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HIV/AIDS	Association between stigma, depression and quality of life of people living with HIV/AIDS (PLHA) in South India – a community based cross sectional study (Charles, 2012)	Survey	India	400 people living with HIV	Associated: Education, marital status, occupation, income Not associated: Gender	Associated: Access to ART centres Low social support (compared to high) Not associated: Access to drop-in centres Comprehensive continuum of HIV care Member of any association Medium social support (compared to high)	Medium

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Leprosy	Health-related stigma related to leprosy: What can be learned from nurses in Ghana? (Bergman, 2017)	Qualitative	Ghana	4 nurses working with leprosy patients	Fear of being 'infected' Lack of understanding or misconceptions about impairment	Religion and supernatural beliefs Associations with a curse from God Poor socio-economic status of patients	High
	Community stigma and desired social distance towards people affected by leprosy in Chandauli district, India, Ballering, 2019)	Survey	India (Chandauli district)	371 community members	Lack of understanding or misconceptions about impairment		Low
Mental health conditions	Strengthening mental health system governance in six low- and middle-income countries in Africa and	Qualitative	Ethiopia, India, Nepal, Nigeria, South Africa, and Uganda	141 participants, including policy makers, district managers, mental health care providers		Lack of accountability and poor implementation of legislator ad policies	Low

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	South Asia: challenges, needs and potential strategies (Petersen, 2017)					Lack of mechanisms for inclusion of people with mental health in mental health decision-making and planning	
	Psychiatric stigma and discrimination in South Africa: perspectives from key stakeholders (Egbe, 2014)	Qualitative	South Africa	77 adults aged 18 + years, including nurses (10), lay counsellors (20), auxiliary social workers (2); mental health service users (45) (conditions unspecified)	Fear of dangerous or unpredictable behaviour Lack of understanding or misconceptions about impairment	Religion and supernatural beliefs Associations of mental illnesses with witchcraft or ancestors' sins Lack of medication and rehabilitative services at the community level	High
	They love me but they don't understand me: Family support and stigmatisation of mental health service users in Gujarat, India (Mahomed, 2019)	Qualitative	India (Gujarat)	17 users of mental health services (residential patients) (conditions unspecified)	Lack of understanding or misconceptions about impairment	Poverty and financial constraints of families of people with disabilities	Medium

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	Stakeholder perceptions of mental health stigma and poverty in Uganda (Ssebunnya, 2009)	Qualitative	Uganda	106 mental health stakeholders, including policy makers, programme managers, health service providers, education officers, school inspectors, media, NGOs, support organisations, academics, religious leaders, service users (conditions unspecified)		Religion and supernatural beliefs Associations with evil spirits and bad deeds Poverty Inadequate financing of mental health services	Medium
	Experiences and effects of psychiatric stigma: Monologues of the stigmatizers and the stigmatized in an African setting (Egbe, 2015)	Qualitative	South Africa	77 participants, including mental health providers (32) and service users (45) (conditions: depression, maternal depression, schizophrenia, and bipolar disorder)	“Othering” people with disabilities Fears of dangerous and unpredictable behaviours Lack of understanding of impairment		Medium

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	Attitudes towards mental illness in Malawi: a cross-sectional survey (Crabb, 2012)	Survey	Malawi	210 patients and carers attending tertiary hospital	Lack of understanding or misconceptions about impairment	Religion and supernatural beliefs Associations with evil spirits and punishment of God Poverty	High
	Training needs and perspectives of community health workers in relation to integrating child mental health care into primary health care in a rural setting in sub-Saharan Africa: a mixed methods study (Tilahun, 2017)	Mixed methods	Ethiopia	104 health extension workers (working with children with mental health conditions)	Lack of understanding or misconceptions about impairment	Lack of adequate mental health services at the community level Poverty and financial constraints of families of people with disabilities	Medium
	Stigmatization of severe mental illness in India: Against the simple industrialization	Survey	India (rural and urban)	291 rural and urban community members	Lack of understanding or misconceptions about impairment		High

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	hypothesis (Jadhav, 2007)						
	Stigmatization of people with mental illness among inhabitants of a rural community in Northern Nigeria' (Adu, 2011)	Survey	Nigeria (northern)	325 adults 18+ in a rural community	Lack of understanding or misconceptions about impairment		High
	Public stigma against family members of people with mental illness: findings from the Gilgel Gibe Field Research Center (Girma, 2014)	Survey	Ethiopia (Southwest)	845 urban and rural community members	Lack of understanding or misconceptions about impairment	Religion and supernatural beliefs	Low
	"I cry every day and night, I have my son tied in chains": physical restraint of people with schizophrenia in community settings in	Qualitative	Ethiopia	50 participants, including people with schizophrenia (4), caregivers (17), community leaders (7), CBR workers (22)	Fear of dangerous and unpredictable behaviours "Othering" people with disability	Poor socio-economic circumstances Lack of quality treatment services	Medium

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	Ethiopia (Asher 2017)						
	Stigma and explanatory models among people with schizophrenia and their relatives in Vellore, South India (Charles, 2007)	Survey	India	100 adult outpatients with diagnosed schizophrenia and their 100 relatives	<p>Patient stigma score: Male gender Total family stigma score</p> <p>NOT associated: Age Being employed</p> <p>Relatives' stigma score: Male gender</p> <p>Not associated: Employment</p>	<p>Patient stigma score: Beliefs about illness (karma and evil spirits) visiting the temple or other place of worship for cure NOT associated: Rural residence Family monthly income Belief that illness is a punishment from God/black magic Beliefs around how illness should be treated</p> <p>Relatives' stigma score: Rural residence Belief that illness is due to karma</p>	Medium

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						<p>NOT associated:</p> <p>Family income</p> <p>Belief that illness is disease</p> <p>Beliefs about punishment from God/evil spirits/black magic</p> <p>Belief illness should be treated/cured in a specific way</p>	
Developmental disorders	Stigma, explanatory models and unmet needs of caregivers of children with developmental disorders in a low income African country: a cross-sectional facility-based survey (Tilahun, 2016)	Survey	Ethiopia	102 caregivers of children with intellectual disabilities (68) and autism (34)	Lack of understanding or misconceptions about impairment	Religion and supernatural beliefs Association with sins or evil spirit	Medium
Post-stroke impairments	Stroke-related stigma among West Africans:	Survey	Ghana	200 stroke survivors	Not knowing people/ family		High

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	Patterns and predictors (Sarfo, 2017)				history of stroke		