

General	Study	Population	Exposure	Outcome	Results Stigmatization as outcome: Descriptive summary (qual- itative/ explora- tory studies)	Results Stigmatiza- tion as out- come: Quantitative (meta-analyti- cal) results (prevalence/ Incidence, Relative Risk, Odds Ratio)	Effect of stig- matization on health Outcome:	Results Effect of stig- matization on health: Relative risk (RR)/ Odds Ratio (OR)/ or descriptive summary	Strengths (+), weaknesses (-), confounding, other bias, over- or under- estimation of potential effects
# First Au- thor, Year	Search period: Inclusion crite- ria: Number of (all) included stud- ies in review: n= Number of studies on stigmatization due to COVID- 19 included: n= (total, co- hort, case-con- trol, cross-sec- tional)	Job de- scription: Inclusion criteria: Reference group:	<i>Refers to the circumstances when stigmati- zation was stud- ied (lockdown, social isolation)</i>	<i>Describe main topic of review</i> Form of stig- matization <i>Describe the form of stig- matization and how it was measured</i>	<i>Include a de- scriptive sum- mary of im- portant results if appropriate</i>	<i>Describe the prevalence/ in- cidence of stig- matization</i>	<i>Describe the health out- come and how it was meas- ured</i>	<i>Include (if pos- sible) the risk estimates for the effect of stigmatization on health out- come If there is no risk estimate, give a descrip- tive summary</i>	
#7183 Banerjee, 2020	Search period: till June 2020 Inclusion/ cri- teria: - sample sizes ≥10 participants - studied preva- lence/ surveys of psychological or psychosocial problems in South-Asian (World Psychi-	Job de- scription: HCWs and general pop- ulation Inclusion criteria: working in close prox- imity with in- fected pa- tients, aged 18–60 years	Not specified (during outbreak of COVID-19)	Psychosocial health and well-being Form of stig- matization Stigma and discrimination (not specified)	“Frontline work- ers reported guilt, stigma, anxiety, and poor sleep qual- ity, which were related to the lack of availabil- ity of adequate personal protec- tive equipment, increased work- load, and dis- crimination	-	Stress	“Stigma and discrimi- nation against the frontline workers were identified as important fac- tors contrib- uting to their stress.” See extraction of Chatterjee et al. 2020	+ Funding stated (none) + No conflict of interest declared

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	<p>atric Association Zone 16) countries, - investigated prevalence/ incidence of psychiatric disorders in general population/ frontline workers/ COVID-19 affected patients as a consequence of COVID-19 pandemic - used study population of adults age-ranged from ≥18 years, and - reported significant differences in the studied parameters</p> <p>Number of (all) included studies in review: n=13</p>	Reference group: n.a.			See extraction of #Chatterjee et al. 2020				

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	Number of studies on stigmatization due to COVID-19 included: n=1 (cross-sectional)								
#780 Cabarkapa, 2020	Search period: 2002 – 21 August 2020 Inclusion/ criteria: Original research, published in peer-reviewed journals, studies reporting mental health or psychological well-being in HCW -studies with a sample size of at least n=100 Number of (all) included studies in review: n=55	Job description: HCW Inclusion criteria: working in close proximity with infected patients Reference group: n.a.	Not specified (During severe viral outbreaks (i.e. COVID-19, SARS, MERS, Ebola, and Influenza H1N1))	Psychological impact related to working with patients with infectious viral diseases Form of stigmatization Stigma, not specified	"Stigma was a major factor" See extraction of #759 Juan et al. 2020	-	Depression	"Higher risk of depressive symptoms due to stigmatization" See extraction of #759 Juan et al. 2020	+ Funding stated (none) Unclear risk of bias: the authors declared no conflicts of interest regarding authorship or the publication, but one author received commercial funding

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	Number of studies on stigmatization due to COVID- 19 included: n=1 (cross-sec- tional)								
#7283 Cal- lus, 2020	Search period: 2000 until June 2020 Inclusion/ cri- teria: empirical quantitative and qualitative stud- ies in which re- laxation tech- niques of vari- ous types im- plemented on health care pro- viders caring for patients during severe corona- virus pandem- ics and articles that consider the implementa- tion of mental	Job de- scription: Health care providers In- clusion cri- teria: deal- ing with pa- tients in- fected with severe coro- navirus (SARS, MERS, and COVID-19) Reference group: n.a.	Stress reduction technique, model, or rec- ommendation (relaxation tech- niques of vari- ous types) for health care pro- viders dealing with patients in- fected with se- vere corona- virus (SARS, MERS, and COVID-19), best practices and interven- tions	Reduction of psychological distress (e.g., anxiety, de- pression, PTSD, burn- out) and men- tal health out- comes (addi- tionally, deliv- ery mecha- nisms of the identified inter- ventions, the instruments used to test their efficacy, the determi- nants of their effectiveness, and their im-	Study by Blake et al. 2020: - reports the de- velopment and evaluation of a digital package, which – amongst others – outlines the actions that team leaders can undertake to provide a guide to reduce social stigma	-	-	-	+ partial funding from a public source (Ricerca Corrente funding from the Italian Ministry of Health) + no conflict of interest declared

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	health care services considered to be pertinent, such as commentaries Number of (all) included studies in review: n=14 Number of studies on stigmatization due to COVID-19 included: n=1 (total) n=1 (intervention study)			pact on specific psychological variables) Form of stigmatization Stigma, not specified					
#7274 Joo 2021	Search period: until August 31 2020 Inclusion/ criteria: Qualitative studies on registered nurses caring for COVID-19 patients, published in English, peer-re-	Job description: registered nurses Inclusion criteria: caring for COVID-19 patients Reference group: n.a.	Caring for COVID-19 patients	Experiences/ barriers of nurses caring for COVID-19 patients stigmatization Stigma, not specified	Not reported in detail For details see #1033 Kackin et al. 2020 #7289 Sadati et al. 2021	-	-	-	+ Funding stated (none) + no conflict of interest declared

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	viewed, pub- lished/ or in publication be- tween January- August 2020 Number of (all) included stud- ies in review: n=9 Number of studies on stigmatization due to COVID- 19 included: n=2 (qualitative)								
#7278 Mul- ler, 2020	Search period: until May 11 2020 Inclusion/ cri- teria: any type of study (quanti- tative studies examining prev- alence of prob- lems and ef- fects of inter- ventions as well as qualitative studies examin- ing experi-	Job de- scription: healthcare workers Inclusion criteria: any type of healthcare worker dur- ing the COVID-19 pandemic Reference group: n.a.	- COVID-19 pandemic - interventions aimed at pre- venting or re- ducing negative mental health impacts	Mental health impact stigmatiza- tion Perceived stigma	“Healthcare workers also re- ported that they were stigma- tized, because they were poten- tial sources of infection” See extraction of #7285 Mohindra et al. 2020	-	-	-	+ no funding + no conflict of interest declared + study protocol available online

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	ences), no re- strictions re- lated to study design, method- ological quality, or language Number of (all) included stud- ies in review: n=59 Number of studies on stigmatization due to COVID- 19 included: n=1 (total) n=1 (cross-sec- tional)								
#7275 Rahman, 2021	Search period: December 2019 - July 2020 Inclusion/ cri- teria: empirical studies on hu- man rights vio- lations, social stigma and dis- criminatory behaviors against people of certain ethnic	Job de- scription: HCW Inclusion criteria: none Reference group: n.a.	COVID-19 pan- demic	Mental dis- tress and hu- man rights vio- lations (mobil- ity rights, quar- antine, and lockdown, shortage of supplies and equipment for HCWs, child rights, el- derly's rights,	Not reported Cross-sectional study: Abdel Wahed WY, Hefzy EM, Ah- med MI, Hamed NS. Assessment of Knowledge, Attitudes, and Perception of Health Care	-	Distress, stress and post-traumatic stress symp- toms	higher levels of stigmatiza- tion were as- sociated with higher levels of mental dis- tress, sugges- tions to deal with stigma are made	+ funding stated (none) + no conflict of interest declared -no quality as- sessment of studies

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	backgrounds, HCWs, and anyone perceived to have been in contact with the virus. Mental, social, and behavioral health outcomes of the violations according to DSM/ICD classifications diagnostic categories or as ascertained using psychometric instruments. Protocols and reports including guidelines by international agencies vetted by scientific and peer reviewers which address one of the primary outcomes were included.			and disproportionate impacts on minority rights and psychiatric patients. Form of stigmatization Stigma, not specified	Workers Regarding COVID-19, A Cross-Sectional Study from Egypt. J Community Health. 2020 Dec;45(6):1242-1251. doi: 10.1007/s10900-020-00882-0. PMID: 32638199; PMCID: PMC7340762 Was excluded by us for the reason that HCWs were asked for their opinion/concerns/fear what might happen if getting infected with COVID-19 Qualitative study: see extraction of #910				

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	Number of (all) included studies in review: n=24 Number of studies on stigmatization due to COVID-19 included: n=6 (total), working popula- tion: n=3 (cross-sectional n=1, qualitative: n=1, letter-to- the-editor: n=1)				Fawaz et al. 2020 Letter-to-the-editor ¹ : Chew et al. (2020). Psycho- logical and cop- ing responses to COVID-19 amongst resi- dents in training across ACGME-I accredited spe- cialties in Singa- pore. <i>Psychiatry Research</i> , 290, 113146 -> Same results as published in Chew et al. 2020 (# 2030), see extraction				

n.a. = not applicable, n.r. = not reported

¹ Letter-to-the-editors were excluded in our rapid scoping review. The same study was published in #2030 Chew et al. 2020