







Investigating Self-Stigma and its Impact on the Career Life of People with Visual Impairment: A Qualitative Study

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Original Article

Abstract

Introduction: The present study aimed to investigate factors related to self-stigmatization and its role in the career life of individuals with disabilities. Considering the detrimental consequences of self-stigma on the performance and quality of career life of individuals with disabilities, as well as the lack of domestic research that specifically addresses the role of this phenomenon in the work environment, conducting this study is of high necessity.

Materials and Methods: This qualitative study was conducted using a phenomenological approach. The target population included all individuals with visual impairment in Tehran City, Iran, in 2024, from whom 12 blind members of the Bahman Cultural Center were selected through purposive sampling. Data were collected using semi-structured interviews and analyzed using the Colaizzi method.

Results: After analyzing the interviews through coding, 126 primary codes, 56 subcategories, and 5 main categories were identified. Accordingly, the factors influencing self-stigmatization in individuals with disabilities included: personality traits, workplace conditions, employment conditions, cultural and social factors, and government policies and laws.

Conclusion: Self-stigmatization in individuals with disabilities can be a significant cause of reduced job performance and lower occupational quality in this group.

Keywords: Social stigma; Self-concept; Career life; Persons with disabilities

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Introduction

Stigmatization, as a psychosocial phenomenon, is a process through which an individual or group faces negative judgment due to characteristics such as disability, race, or social status (1). Self-stigma is a significant form of this phenomenon wherein the individual internalizes society's negative stereotypes and develops a negative self-evaluation (2). This leads to decreased self-esteem and limitations in realizing one's potential (3, 4), negatively impacting social participation and employment (5, 6).

Individuals with disabilities are consistently exposed to self-stigma (7). In this population, the phenomenon manifests as limiting beliefs, feelings of shame, social avoidance, and reduced pursuit of goals (8, 9). The interaction of these factors with structural barriers creates a cycle of occupational limitations (10), despite contemporary policy emphases on social justice (6).

Employment, as one of the most crucial dimensions of social participation, holds double importance for this group; however, their employment rate is

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significantly lower than the societal average (11). Studies indicate that people with disabilities constitute approximately 1.2 percent of Iran's population, with an unemployment rate exceeding 63 percent (12). This situation stems from a lack of suitable job opportunities, the absence of appropriate work environments, overt or covert discrimination, and ineffective supportive policies (13). Furthermore, negative attitudes regarding the work abilities of these individuals can limit job opportunities and disrupt their work experience (14). In such conditions, self-stigma acts as an exacerbating factor (9). Indeed, the relationship between self-stigma and occupational status is bidirectional and complex; on one hand, self-stigma reduces occupational motivation and hinders the pursuit of opportunities, and on the other hand, workplace failures or discrimination can increase the level of self-stigma (15, 16).

Despite the importance of this issue and the consequences of self-stigma for individuals with disabilities, few studies in Iran have investigated social stigma and self-stigma. For instance, Farahmand and Azizinejad Fard (17) in a study concluded that identity stigma leads girls with physical-motor disabilities to experience their impaired bodies with humiliation, inferiority, and despair, making disability not their only problem. Satvat et al. (18) also stated in their research that societal stigmatization is one of the barriers to marriage for individuals with disabilities. Additionally, findings from the study by Ahmadnia et al. (19) indicated that societal stigmatization has led mothers of children with disabilities to adopt strategies such as avoiding situations, bribing their children, isolation, aggression, and even awareness-raising.

In international research, Qin et al. (20) demonstrated that a sense of belonging to the disability community and pride in a disability identity can prevent the internalization of stigma. Self-stigma was associated with decreased self-esteem and increased depression, but disability pride played a protective role against these outcomes. Also, Chui and Lai (15) in their study showed that meaningful work experience is associated with reduced self-stigma and increased life satisfaction. In fact, self-stigma acts as a mediating mechanism between work experience and life satisfaction. The results of the study by Silván-Ferrero et al. (21) also indicated that self-stigma has a significant negative impact on the psychological quality of life of individuals with physical disabilities. While resilience played an effective mediating role in reducing this effect, collective action did not have a significant impact.

A review of the literature shows that most domestic

studies have focused on external stigma, and the role of factors affecting self-stigma and its relationship with the quality of work life has been less investigated. Internationally, most studies have been cross-sectional and have less frequently addressed the interaction of factors influencing self-stigma and work experience. This is why, considering the importance of employment as a key factor for empowerment and social integration, any factor hindering its realization must be seriously investigated. Furthermore, in the current conditions of Iran, where labor market changes have become challenging, attention to this issue is of double importance. The lack of scientific and systematic interventions to reduce self-stigma and enhance the quality of work life for individuals with disabilities further reinforces the necessity for comprehensive research in this field. Therefore, to address the existing research gap, the present study aims to identify factors associated with self-stigma and explain its role in the work life of individuals with disabilities.

Given that most participants in the present study had higher education qualifications, this characteristic can be considered an influential factor on their attitudes, lived experiences, and how they confront the phenomenon of self-stigma. Consequently, this sample characteristic will be taken into account when interpreting the findings and generalizing the results.

Materials and Methods

This qualitative study employed a phenomenological approach to understand the lived experiences of individuals with disabilities regarding factors influencing the phenomenon of self-stigma and its role in their work life. The study population consisted of all individuals with visual impairments (including those with low vision and blindness) in Tehran in 2024. Using a purposive sampling method, 12 blind members of the Bahman Cultural Center were selected and enrolled in the study.

The sampling process continued until theoretical saturation was reached. After interviewing the twelfth participant, the new data repeated previous concepts, and no new themes or codes were identified. It is worth noting that the inclusion criteria for participants were: having blindness or severe visual impairment, being employed, and having at least two years of work experience. The data collection tool, consistent with the chosen strategy, was a semi-structured interview. A semi-structured or guided interview lies between the two extremes of structured and unstructured formats. In this method, similar questions are asked of all

interviewees, who are free to express their opinions as they wish.

Before conducting the interviews, the importance and objectives of the research were explained to the participants. After gaining their assurance and trust and ensuring their freedom to withdraw from the interview at any time while adhering to ethical principles, the interviews were conducted and recorded in a quiet and private setting using open-ended questions. The recorded materials were then carefully listened to and transcribed. Each participant was interviewed only once, with interview durations varying between 40 and 60 minutes. During and after the interview process, the researcher utilized two strategies: member checking and peer debriefing. In the member checking strategy, during the interview process, after each individual with a disability spoke, the researcher presented their overall understanding of their statements, and the interviewees would confirm or correct it. In the peer debriefing strategy, after analyzing the interviews, the researcher shared the obtained findings with the supervisor (Ph.D., Associate Professor of Counseling) and the advisor (Ph.D., Associate Professor of Counseling), who confirmed them.

After conducting the interviews and transcribing them, the researcher used Colaizzi's seven-step phenomenological analysis method to analyze the interview texts. Colaizzi's method is one of the analytical approaches used in phenomenological research. This method involves seven stages: 'familiarizing oneself with the data, identifying significant statements, formulating meanings, clustering themes, developing an exhaustive description, producing the fundamental structure, and seeking verification of the fundamental structure'. All audio files were transcribed verbatim, studied, and subjected to open coding by the researcher. Subsequently, themes and sub-themes were determined.

The credibility of the findings was confirmed by the interview participants, meaning each participant reviewed the final results and confirmed the consistency of the findings with their own experiences. In the present study, all ethical considerations, including informed consent, confidentiality of personal identity, privacy, and voluntary participation, were observed. All stages of the research were approved by the Research Ethics Committee of Allameh Tabataba'i University with the ethics code IR.ATU.REC.1402.090. The semi-structured interview guide containing the key research questions is presented in table 1.

To clarify the analysis process and enhance the credibility of the findings, an example of the data coding procedure is provided in table 2. This process demonstrates how raw interview statements (quotations) were transformed into initial codes, and then into subcategories and main categories.

As can be seen in table 2, each meaningful statement extracted from the interviews was first summarized as an initial code. Then, initial codes that were conceptually similar were grouped to form subcategories. Finally, these subcategories were classified under broader main categories. This iterative process continued until theoretical saturation was achieved and a coherent structure of the data was formed.

Results

Table 3 presents the demographic characteristics of the participants in this study.

Following the collection and coding of the interviews, concepts and categories surrounding the theme of self-stigma and its role in the professional lives of individuals with disabilities were derived. Through the first three stages of Colaizzi's method, the concepts inferred from the participant interviews were organized into 126 codes.

Table 1. Interview Questions

Row	Self-Stigma and Its Impact on the Professional Lives of Individuals with Disabilities
1	What conflicts did you experience when you were seeking a job?
2	What internal conflicts or thoughts did you have with yourself when you started working?
3	What were your work-related challenges?
4	Have you ever had internal conflicts at work because of your disability?
5	In those moments, what is the image you have of yourself?
6	What do you say to yourself in those moments? Have these conflicts affected your performance and attitude towards your work?
7	When you stigmatize or label yourself, does it affect how you perform your duties and assigned tasks? Does it make tasks easier or more difficult for you?
8	Do you think there is a connection between the labels you assign to yourself and your job satisfaction?
9	As you gained more work experience, did any change occur in the intensity or nature of these conflicts?
10	Did you adapt? How did you manage to find peace?

Table 2. Example of the Data Coding Process Using Colaizzi's Method: From Quotation to Category

Participant's Direct Quotation (Raw Data)	Initial code	Subcategory	Main category
"No matter how hard I tried to prove what I am capable of doing, it was difficult for me to prove it, and it was also hard for them to understand because their definition of the industry is that you should be able to hold a wrench; even if you are an industrialist, you should be able to work easily in an industrial environment."	Striving for self-validation / Efforts to prove oneself	Efforts to Prove Oneself	Personality Traits
"For example, when you enter the exam (interview), instead of looking at your expertise, they say, 'Sir, you are blind and cannot manage the classroom.'"	Focus on disability rather than competence	Failure to Consider Competencies	Employment Conditions
"For instance, if my colleagues treat me in a certain way, I don't argue with them, but I go and pour tea for myself. That is, my internal dialogue, psychologically, in this matter, is not such that I fall into crisis."	Inappropriate behavior of colleagues	Inappropriate Colleague Behavior	Workplace Conditions
"Unfortunately, there is no support from the government for us, and they don't provide this support in the workplace either. If there were laws, undoubtedly, they would also make conditions suitable."	Lack of government support	Lack of Government Support	Government Policies and Laws
"It gives a feeling of humiliation. For example, four people are sitting, and one says, 'Where am I sitting now?' This is very ugly. What difference does it make if you ask me what education I have, what I know, what I have learned? Does it matter how well I see you or not? Well, these things bother a person a bit."	Being belittled / Humiliation	Humiliation by Those Around	Cultural and Social Factors

Subsequently, an attempt was made to categorize the extracted codes into specific thematic groupings. Ultimately, this process resulted in 56 subcategories and 5 main categories, which are reported in table 4.

As evident from the findings in table 4, the factors affecting self-stigma in individuals with disabilities can be categorized into 5 main themes.

These 5 themes are: Personality Traits, Workplace Conditions, Employment Conditions, Cultural and Social Factors, and Government Policies and Laws. Figure 1 presents the conceptual model derived from this research.

To objectify and enrich the findings, direct quotations from participants (preserving anonymity) are provided for each of the identified main categories. These statements significantly contribute to a better

understanding of the depth and lived experience of the participants.

1. Main Category: Personality Traits

Explanation: This category encompasses a wide range of internalized emotions, beliefs, and psychological mechanisms that individuals employ in response to social stigma.

Sample Quotation: One participant, expressing a profound feeling of helplessness, said: "I just went and took that exam, well, I didn't pass anyway. Disappointment... It's like you're on a hill, constantly going up and down. And this process is almost normal in the lives of me, you, and people like us. Disappointment is so common that you see things here and there and get disappointed, then you get up again, become hopeful again, and it continues like this."

Table 3. Demographic Information of the Research Participants

Participant Code	Work Experience (Years)	Occupation	Education	Gender	Age (Years)
1	3	Special Education Teacher	Master's Degree	Female	28
2	2	Teacher	Bachelor's Degree	Female	25
3	6	Call Center Operator	Master's Degree	Female	36
4	12	Psychologist	Master's Degree	Female	50
5	25	Manufacturing	Bachelor's Degree	Female	55
6	9	Librarian	Ph.D.	Male	34
7	5	School Counselor	Bachelor's Degree	Male	32
8	8	Legal Expert, Municipality	Master's Degree	Male	34
9	24	Lawyer	Ph.D.	Male	52
10	18	Counseling Center Expert	Master's Degree	Male	55
11	16	Librarian	Master's Degree	Male	43
12	7	Teacher	Master's Degree	Male	35

Table 4. Main and Sub-Categories Related to Factors Influencing Self-Stigma

Core Phenomenon	Main Categories	Subcategories	
Factors Influencing Self-Stigma and Its Impact on the Professional Lives of Individuals with Disabilities	Personality Traits	Stress Generation	
		Self-Loathing	
		Self-Blame	
		Low Self-Efficacy	
		Rumination	
		Feeling of Hopelessness	
		Underestimating Oneself	
		Feeling of Helplessness and Incompetence	
		Lack of Self-Confidence	
		Discouragement	
		Lack of Motivation	
		Fatigue from Stigmatization	
		Striving for Self-Validation / Efforts to Prove Oneself	
		Feeling of Worthlessness	
		Necessity of Positive Thinking	
		Necessity of Patience	
		Necessity of Influencing Others	
		Self-Labeling as an illness	
		Necessity of Skill Enhancement	
		Low Morale	
		Feeling of Depression	
		Negativity	
		Fear of Others' Reactions	
		Acceptance of the Existing Situation	
		Workplace Conditions	Discrimination in the Workplace
			Job Dissatisfaction
			Inappropriate Colleague Behavior
			Poor Communication with Colleagues
			Need for Understanding the Work Environment
			Exploitation of Disability by Colleagues
			Disillusionment with the Job
			Decreased Job Performance / Efficiency
			Need for Adaptation to the Work Environment
			Inadequate Salary and Benefits
			Boredom at Work
	Humiliation by the Employer		
	Feeling of Job Insecurity		
	Negligence at Work		
	Unfavorable Employment Conditions		
	Employment Conditions	Comparison with Non-Disabled Individuals	
Failure to Consider Competencies			
Disregard for Expertise			
Exclusion from Most Jobs			
Lack of Public Awareness Campaigns / Lack of Cultural Development in Society			
Cultural and Social Factors	Creation of Limitations		
	Lack of Public Awareness		
	Need for Public Awareness through Education and Media		
	Judgment by Those Around		
	Psychological Pressure from Those Around		
	Negative Perception by Those Around		
	Humiliation by Those Around		
	Inappropriate Societal Attitudes		
	Social Withdrawal and Isolation		
	Lack of Government Support		
Government Policies and Laws	Need for Establishing a Specialized Committee		
	Lack of Hardware/Physical Facilities for People with Disabilities		

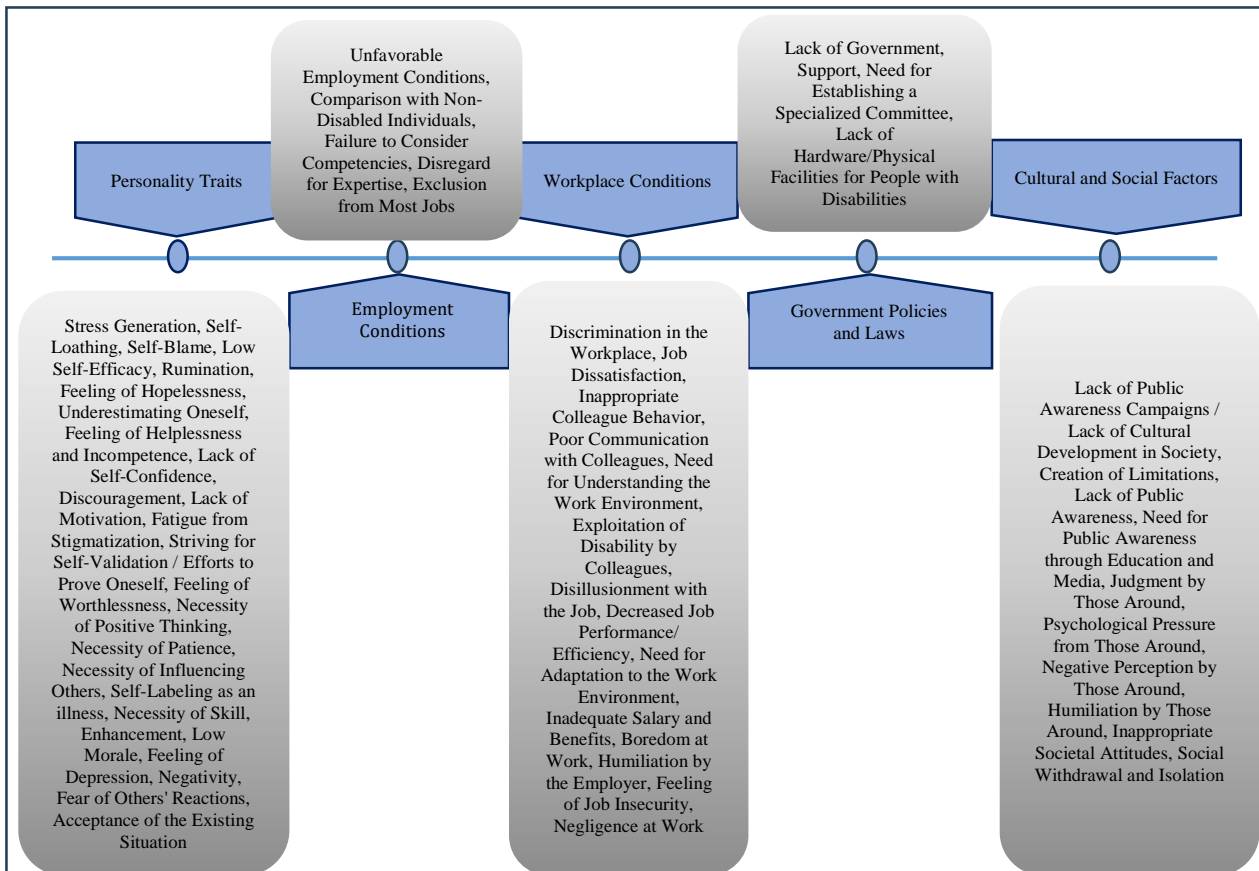


Figure 1. The Conceptual Model Designed Based on the Main and Sub-Categories

2. Main Category: Workplace Conditions

Explanation: This category includes the physical, social, and psychological conditions prevailing in the work environment that can either exacerbate or mitigate self-stigma.

Sample Quotation: One participant spoke about experiencing discrimination in the workplace: "In the work environment, even the employer discriminates. Salary and benefits are one thing, but their treatment of someone with a disability is different and contains a kind of humiliation."

3. Main Category: Employment Conditions

Explanation: This category focuses on the systematic barriers and inequities in the recruitment, selection, and hiring processes for individuals with disabilities.

Sample Quotation: One participant, with experience of being rejected in several job interviews, stated: "Because of our condition, wherever we went, they said we weren't suitable for the job, even though we could do that work, and this very issue upset our mental state."

4. Main Category: Cultural and Social Factors

Explanation: This category deals with societal norms, beliefs, stereotypical attitudes, and expectations that pave the way for labeling and its internalization.

Sample Quotation: One participant referred to societal attitudes: "I used to say they are right because they don't know my abilities, and I can't change everyone's attitude because I get tired. For example, if every day I have to go and tell someone what to do, that I am like this and that... I get tired of having to explain to everyone. Eventually, when I resigned myself, I selectively chose what is important. I, as a blind person, have a duty to change their attitude?!"

5. Main Category: Government Policies and Laws

Explanation: This category examines the role of policies, laws, and institutional support (or lack thereof) in confronting or exacerbating self-stigma.

Sample Quotation: One participant, pointing to weak law enforcement, said: "In my opinion, government support is low. There should be a specialized committee or an institution appointed by the government to identify the capabilities of individuals with disabilities and hire them for suitable jobs."

Discussion

The present study aimed to investigate the factors contributing to the emergence of self-stigma and its impact on the professional lives of individuals with disabilities. After collecting and coding the interviews, 126 initial codes, 56 subcategories, and 5 main categories were derived, which were: Personality Traits, Workplace Conditions, Employment Conditions, Cultural and Social Factors, and Government policies and Laws. The 'Personality Traits' category encompassed 24 subcategories, namely: stress generation, self-loathing, self-blame, low self-efficacy, rumination, feeling of hopelessness, underestimating oneself, feeling of helplessness and incompetence, lack of self-confidence, discouragement, lack of motivation, fatigue from being stigmatized, striving for self-validation, feeling of worthlessness, necessity of positive thinking, necessity of patience, necessity of influencing others, self-labeling as ill, necessity of skill enhancement, low morale, feeling of depression, negativity, fear of others' reactions, and acceptance of the existing situation.

The 'Workplace Conditions' category included 14 subcategories: discrimination in the workplace, job dissatisfaction, inappropriate colleague behavior, poor communication with colleagues, need for understanding the work environment, exploitation of disability by colleagues, disillusionment with the job, decreased job efficiency, need for adaptation to the work environment, inadequate salary and benefits, boredom at work, humiliation by the employer, feeling of job insecurity, and negligence at work. Another main category of this research was the 'Employment Conditions' for individuals with disabilities, which comprised 5 subcategories: unfavorable employment conditions, comparison with non-disabled individuals, failure to consider competencies, disregard for expertise, and exclusion from most jobs.

The influential 'Cultural and Social Factors', which included 10 subcategories, referred to items such as: lack of cultural development/public awareness campaigns in society, creation of limitations, lack of public awareness, need for raising public awareness through education and media, judgment by those around, psychological pressure from those around, negative perception by those around, humiliation by those around, inappropriate societal attitudes, and social withdrawal and isolation. Finally, the main category 'Government policies and Laws' referred to 3 subcategories: lack of government support, need for establishing a specialized committee, and lack of hardware/physical facilities for people with disabilities.

In explaining these findings, it can be said that

self-stigma, as one of the social phenomena faced by individuals with disabilities, can cause numerous problems in the work environment. The results of this study have shown that self-stigma in the professional lives of individuals with disabilities can stem from: discrimination in the workplace, job dissatisfaction, inappropriate colleague behavior, poor communication with colleagues, need for understanding the work environment, exploitation of disability by colleagues, inadequate salary and benefits, humiliation by the employer, feeling of job insecurity, negligence at work, unfavorable employment conditions, comparison with non-disabled individuals, failure to consider competencies, disregard for expertise, exclusion from most jobs, lack of cultural development in society, lack of public awareness, stress generation, and discouragement.

Furthermore, it can be stated that self-stigma and the accompanying psychological problems can subject the individual with a disability to a heavy psychological burden, which itself leads to a reduced quality of work life in this population. Numerous variables, such as anxiety stemming from humiliation by others, disillusionment with the job, lack of social support, unfavorable job status, and psycho-social problems, influence the perception of social stigma in individuals with disabilities. This indicates the existence of complex interactions between demographic, clinical, and psycho-social factors that play a role in the perception of self-stigma.

Indeed, individuals with disabilities experience reduced job efficiency due to various physical and psycho-social manifestations. Consequently, the common perception regarding disability is that it constitutes a limitation for these individuals (13). While disability has the capacity for resilience and adaptability, stigmatizing attitudes can form towards these individuals due to public perception or misconceptions about disability. Individuals with disabilities often perceive stigma related to their disability, which has significant effects on their motivation and career advancement (22). This is, although the perception of individuals with disabilities should be that disability is fundamentally preventable and controllable, because experiencing a lack of control over the disability triggers a strong negative reaction that affects the social and professional relationships of individuals with disabilities. Additionally, perceived stigma from society leads to increased depression, feelings of shame, low morale due to the disability, or guilt for not being able to do everything. All these factors can reinforce self-stigma in the individual and,

consequently, lead to decreased job efficiency in individuals with disabilities.

The findings of this study, including feelings of helplessness and incompetence, low self-efficacy, and self-blame, are consistent with Corrigan's model, which emphasizes that the internalization of social stigma leads to decreased self-esteem and social withdrawal. Specifically, the 'Personality Traits' category in the present study clearly demonstrates the stage of applying stereotypes to oneself in Corrigan's model.

Although this study was not specifically designed to examine the effect of gender, it was observed that female participants emphasized feelings of depression and rumination more, while males more frequently reported humiliation by the employer and job insecurity. These findings could pave the way for future studies aimed at gender comparison in the experience of self-stigma.

The current findings regarding discrimination in the workplace align with the results of Baker et al. (13), who showed that negative attitudes of employers are one of the main barriers to employment for individuals with disabilities. Also, while the study by Chui and Lai (15) emphasized the positive role of meaningful work in reducing self-stigma, the findings of this research indicated that inadequate salary and benefits and disillusionment with the job can exacerbate self-stigma even when employed. This difference might be due to the different cultural-economic context of Iran.

The findings of this study have important implications for policy and practice. Firstly, the Comprehensive Law on the Protection of the Rights of Persons with Disabilities (enacted in 2017) must be seriously implemented and monitored not only at the macro level but also at the organizational level within workplaces. Secondly, as the findings showed, the lack of cultural development in society is a key factor. Therefore, designing anti-stigma media campaigns and incorporating disability-related education into school curricula could be effective in changing societal attitudes. Thirdly, organizations can hold training workshops for managers and employees to foster more inclusive work environments.

Considering the demographic characteristics of the study sample, particularly the high level of education of most participants, it seems that the reported attitudes and experiences could be influenced by the awareness and cultural capital derived from education. For instance, individuals with higher education might possess more sophisticated coping strategies or a more critical attitude towards the social factors affecting self-stigma. This could partially explain the diversity in the reported experiences.

Limitations

This study faced several limitations. One limitation was the use of a non-random sampling method for selecting the study participants. Furthermore, this study was conducted solely on individuals with visual impairments (blindness and low vision); therefore, caution is necessary when generalizing the findings to other disability groups. Additionally, although sampling from a specific center (Bahman Cultural Center) helped in achieving a homogeneous sample, it might have introduced selection bias and limited the generalizability of the results. Another limitation of this study was the high level of education of most participants. While this facilitated access to rich and analyzable data, it might mean the findings are not fully generalizable to all individuals with visual impairments, especially those with lower levels of education or socio-economic status. Consequently, the results should be interpreted with caution, taking this characteristic into account.

Recommendations

It is recommended that future investigations consider the following items to help utilize the maximum professional potential of individuals with disabilities.

1. Suggestions for Future Research:

Development with a Quantitative Approach: It is suggested that future studies employ quantitative methods (survey research) using questionnaires based on the categories extracted in this study (such as a scale for measuring self-stigma in the workplace). This would allow the validation of the current qualitative findings in a larger sample and assess their generalizability.

Studying Other Groups: Conducting similar studies on other disability groups (e.g., individuals with physical-motor disabilities or hearing impairments) and comparing these groups could lead to a more comprehensive understanding of the phenomenon of self-stigma.

Impact of Interventions: Investigating the effect of educational interventions (such as workshops on enhancing self-efficacy and coping with stigma) on reducing self-stigma and improving the quality of work life for these individuals could be a subject for future study.

2. Practical and Policy Recommendations:

Cultural Development and Education: Given the prominent role of cultural and social factors identified in this study, public education and cultural development through national media and social networks are essential for changing societal attitudes and reducing stereotypes towards individuals with disabilities.

Psychological Empowerment: Holding regular

training workshops by non-governmental organizations (NGOs) and counseling centers aimed at strengthening coping skills, self-esteem, and self-efficacy in individuals with visual impairments is recommended.

Training Employers and Colleagues: Human resource units in organizations should arrange training workshops for employers, managers, and colleagues of individuals with disabilities to familiarize them with the challenges these individuals face and to create a more inclusive and non-discriminatory work environment.

Monitoring Law Enforcement: Supervisory bodies should seriously pursue and monitor the strict implementation of approved laws supporting the employment of individuals with disabilities (such as the Comprehensive Law on the Protection of the Rights of Persons with Disabilities) in both public and private organizations and companies.

Conclusion

The findings of this study, conducted on a specific group of individuals with visual impairments and a high level of education, indicate that self-stigma, as a multidimensional phenomenon influenced by individual (personality traits), organizational (workplace and employment conditions), and socio-cultural (societal attitudes and government policies) factors, significantly affects the professional lives of this group and can lead to decreased self-efficacy and impaired performance. Therefore, generalizing these findings to all individuals with disabilities should be done with considerable caution. Accordingly, educating employers and human resource managers to create inclusive and non-discriminatory work environments, alongside implementing training programs to enhance self-efficacy and stigma coping strategies among individuals with disabilities themselves, can be proposed as two key practical strategies for breaking the cycle of self-stigma.

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Authors' Contribution

Project design and Conceptualization: Erfan Rahimi
Attracting financial resources to carry out the Project: Erfan Rahimi

Project support scientific and executive services: Erfan Rahimi

Providing equipments and statistical sample: Erfan Rahimi, Somaye Kazemian

Data collection: Erfan Rahimi, Somaye Kazemian & Mahdi Zare Bahramabadi

Analysis and interpretation of the results: Erfan Rahimi, Somaye Kazemian & Mahdi Zare Bahramabadi

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Conflict of Interest

The authors did not have a conflict of interest.

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