



STIGMA TOOLKIT

*Thinking about stigma - promoting
inclusive practice across Fife*

Making
it Work
for Families 

Citizens
Advice &
Rights
Fife 



 the
POVERTY
ALLIANCE



Fife
Gingerbread

 First

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Introduction

“When working with families in need, we believe it is not only important to support them and help to improve their lives, but also to ensure their voices are heard. Listening and acting on the stories of families allows us to highlight social inequalities and injustices, advocate, and challenge for better outcomes for all”

Making it Work team leader

This toolkit was developed as an aid to support thinking and challenging stigma at a local level to help improve outcomes for families. It was designed as part of a project by Making it Work for Families (MIWFF). This is a partnership project that brings together staff from Fife Gingerbread, Clued Up, Citizens Advice & Rights Fife and Fife Intensive Rehabilitation & Substance Use Team.

The project works collaboratively to offer a whole family support approach that includes parental support, youth work, family learning, groups, money advice, and community rehabilitation.

The MIWFF project team, facilitated by the Poverty Alliance, explored issues they encountered within their daily work and reflected that many of the households they were working with reported experiencing stigma. The project was able to identify different forms of stigma encountered by households and across communities in Fife and wanted to help challenge this as part of their work.

By using systems thinking, they identified that developing training materials would assist practitioners in communities across Fife in understanding and challenging stigma and the inequalities associated with it.

This toolkit is designed to start conversations and more importantly action around tackling stigma that communities and individuals face. By focusing on local change, we hope to contribute to broader social change and equality for all.

What is this toolkit designed to do?

This toolkit is designed to support practitioners in their daily work to understand and think about:

- the issues, harms, and injustice that stigma presents for people,
- how they can consider stigma to help support more inclusive practice, and

- how they could challenge and tackle stigma and ensure people are treated with respect and dignity.

Stigma is often a hidden issue and by bringing attention to experiences of stigma, this toolkit can help practitioners to challenge and address some of the issues faced by families.

Who is this toolkit for?

This is an introductory level toolkit, for those with little or no knowledge of stigma. It offers a delivery format of interactive tools and reflection to help support learning.

It is best suited for:

- Practitioners working with families who may encounter stigma including those in education, health and social care, housing, police, social work, and services providing money advice and other advice services.
- Those who want to build their knowledge and understanding of stigma for practice and policy making.

Why is tackling stigma important?

Stigma is a complex social issue; the way that individuals and groups experience stigma have far reaching impacts on their lives. Stigma can be experienced in several different ways and when stigma is acted upon it becomes discrimination.

People may experience stigma in visible and invisible ways based on their background, ethnicity, gender, socioeconomic status, household structure and many other factors and characteristics. Some groups are more at risk of different forms of stigma than others due to gender and ethnicity or other protected characteristic.

How does Stigma impact on individuals and communities?

When people experience stigma, they can experience a range of emotions such as shame, anger, embarrassment, and many other harms including impacts on their health and wellbeing.

Stigma is experienced in diverse ways and is driven and shaped and reinforced by power (for example those who control money and resources) and wider inequalities in society. By considering those broader inequalities and power structures and the experiences of stigma, we can challenge and work to promote a fairer and just society.

As service providers and practitioners, our interactions, behaviours, cultures, systems and structures, policies and design of our services are important. Recognizing and addressing stigma is vital to achieving better outcomes for everyone. Through addressing stigma, public services can:

1. Ensure equality of access
2. Provide a compassionate approach to families and
3. Reduce the social harms of stigma for individuals and communities.

How do I use this toolkit?

This toolkit can be used in two ways:

1. a self-directed approach and has links to external audio and visual resources, reflective activities as well as collaborative activities to help share learning. We suggest you work through this toolkit in a chronological order to help build your understanding of stigma and how to tackle it. This toolkit should take a few hours to complete.
2. Contacting Stevan Sutherland from the Making it Work For Families Project to arrange an in-person training session from the project team.
Email Stevan Sutherland stevan@cluedup-project.org.uk

Learning outcomes from this toolkit:

- Developing an understanding of stigma and how it has been experienced in Fife and as reported by families.
- Understanding of the influences that contribute to stigma and how stigma is reinforced and reproduced.
- Build an understanding of your unconscious bias and how this may lead to stigma.
- Recognise where stigma may present in your workplace and role.
- Identify actions for promoting inclusive practice in tackling stigma in your workplace and role.

'Understanding Stigma' - an overview

What is stigma?

"Stigma is a corrosive social force. It is the mechanism by which individuals and communities throughout history have been systematically dehumanised, scapegoated, oppressed, and made to feel shame"

(Tyler, 2020)¹

Stigma can often seem a complex and messy issue to understand and think about. Stigma takes different forms both open and hidden, has a range of impacts and results in individuals and or communities being viewed in a negative and dehumanising way against others in society.

Stigma is complex, multi-dimensional and can be perpetuated and experienced through language, cultures, policies, institutions, and systems². Stigma can often be hidden or be more open and distinct groups or populations can face different risk or forms of stigma. Power and inequality in society relates to stigma and how it is experienced. To see how stigma operates and is reinforced we need to consider the following areas³:

Structural

this could be in the way we experience laws, policies, institutions, systems, or through media such as television and print

Public

public attitudes- the views that we experience from those around us, like family, friends, neighbours, or those who hold positions of power for example politicians, and those operating and delivering services

Personal

how we perceive stigma, experiences of discrimination, self-stigmatised because of experiencing stigma i.e., how we can internalise or stigmatise within ourselves

¹ Tyler, I (2020) The ancient penal history of stigma

<https://stigmamachine.com/2020/01/20/the-ancient-penal-history-of-stigma/>

² Mclean, A (2023) 'An enquiry into Poverty Related Stigma' Poverty Alliance : Glasgow
[Report-of-the-inquiry-into-stigma-CPG-on-Poverty.pdf \(povertyalliance.org\)](https://povertyalliance.org/report-of-the-inquiry-into-stigma-cpg-on-poverty.pdf)

³³ Inglis G, McHardy F, Sosu E, McAteer J, Biggs H. Health inequality implications from a qualitative study of experiences of poverty stigma in Scotland. Soc Sci Med. 2019;232:43-49. doi:10.1016/j.socscimed.2019.04.033

How does stigma impact?

Within our development of this toolkit, we spoke to families about their experiences of stigma. These conversations helped us to understand the hidden harms and impacts that resulted from experiences of stigma:

- Families reported to us that experiences of stigma can result in:
- Families not engaging in services or it to taking longer and requiring more intensive engagement to build relationships with practitioners and services offering support.
- Stigma resulted in feelings of mistrust, where people were less likely to share or disclose needs for support, thereby increasing vulnerability and limiting opportunities for early intervention.
- Families reported emotional harm at both an individual and collective level across communities in terms of health and wellbeing including mental health harm.
- As result of experiencing stigma families reported increased marginalization, disconnection, and isolation as both individuals and within communities.

Families across our engagement work reported experiencing different and often interlinked forms of stigma. This took a range of forms including phrases or attitudes from services to experiences in the wider community.

To avoid long term harm, there was a clear message from our engagement on the need to tackle stigma. When we allow for stigma and discrimination to go unchallenged, we are allowing for people's rights to be violated. There are often power imbalances and other inequalities that are reinforced, created, and reproduced by the stigma individuals and communities experience⁴.

Who experiences stigma?

When thinking about stigma, we need to consider the different protected characteristics of the Equality Act. The Equality Act (2010) prohibits discrimination (whether direct or indirect) against people who possess one of the protected characteristics, listed above. It also prohibits the harassment and victimisation of such people⁵. It covers the following protected characteristics:

⁴ Tyler, IE (2020) 'Stigma: The Machinery of Inequality'. Zed Books, London.

⁵ [Equality Act 2010 | Equality and Human Rights Commission \(equalityhumanrights.com\)](https://www.equalityhumanrights.com/equality-act-2010)

- age
- disability
- gender reassignment
- race
- religion or belief
- sex
- sexual orientation
- marriage and civil partnership
- pregnancy and maternity

Understanding protected characteristics is important in terms of the risks and inequalities that distinct groups may face. Stigma interacts with other forms of disadvantage and inequality which means that Black and minority ethnic (BME) people, women, disabled people, people with problem drug and alcohol use, people with experience of the criminal justice system and single parents have specific experiences of stigma related to the protected characteristics and other wider characteristics such as life circumstances⁶. Thinking about inequality is critical to understanding who is most likely to be harmed by stigma.

Key Learning Points

- By reflecting on stigma and tackling where it happens, we can help support a way forward in our work, where we bring about a more fair and just society.
- Stigma can bring about impacts that are complex, hidden and impact on people physical and mental wellbeing as well as their economic and social circumstances.
- In tackling stigma, we can help create equity in outcomes and relationships for families and be more effective in the work we do.
- Stigma can be experienced in lots of different ways and it is important to understand inequalities and how this can increase the risks and harms of stigma that individuals or communities might face.

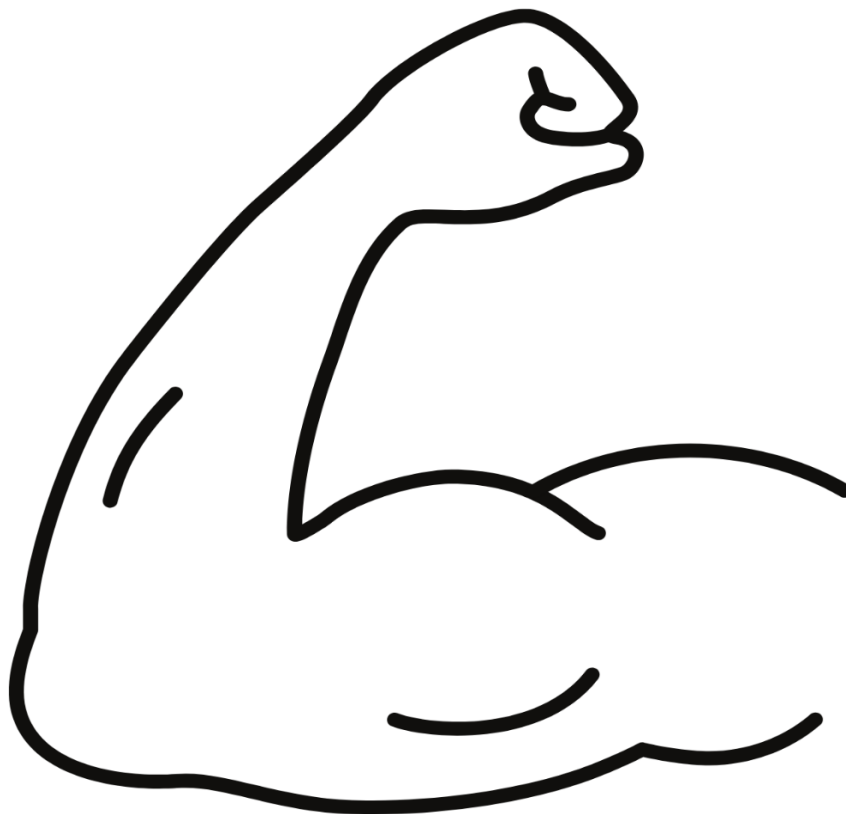
⁶ Mclean, A (2023) 'An enquiry into Poverty Related Stigma' Poverty Alliance : Glasgow [Report-of-the-inquiry-into-stigma-CPG-on-Poverty.pdf \(povertyalliance.org\)](https://www.povertyalliance.org/reports/report-of-the-inquiry-into-stigma-cpg-on-poverty.pdf)

Exercise One: Tattoos of Stigma

The word of 'Stigma' comes from centuries ago from Ancient Greek times. It is a word that originates in Latin. Stigma was used to describe a mark of disgrace associated with a particular situation or person with a branding / tattoo of that idea⁷ and was done with the approach of dehumanising them⁸.

In modern times Stigma refers to a set of negative beliefs about a group or individuals and can take different forms.

Thinking about the communities you work with, on the illustration below. Tattoo the types of stigma you think they may be experiencing or have experienced.



Reflection Points:

- What examples of stigma did you choose and why?
- Thinking of the communities and populations you work with, who is at most risk of these forms of stigma?

⁷ Tyler, I (2020) The ancient penal history of stigma
<https://stigmamachine.com/2020/01/20/the-ancient-penal-history-of-stigma/>

⁸ ibid

'The Everyday' - Where does stigma occur?

Stigma does not occur by accident. Stigma occurs due to several different influences and power structures and by being reflective and exploring and thinking critically we can understand and think about how stigma is produced and reinforced. This is important if we are to challenge it. Thinking about context allows us to explore ideas, framing and the narratives that surround it and consider the intended and unintended consequences that can bring.

When looking at the context in which stigma operates, this can be driven by ideas of norms and values, fears as well as other factors such as wider inequalities and power. When stigma operates it reinforces power and inequality. Experiences of oppression and marginalisation are often linked and reinforced through stigma.

When thinking about the experiences of stigma, thinking about context including inequalities, power, norms, systems, culture, and history as well as other factors is critical to help with the identification of what stigma may be experienced, who might be affected and when and in what way and why this is the case.

Questions to ask when exploring stigma may include:

- How might this group or individual experience everyday life? What are these ideas based on? How is this group or individual dehumanised or marginalised?
- What power or access to resources does this individual or community hold? If they do not hold power or resources who does and why? How might this affect their experience of stigma?
- What systems and policies are surrounding this individual / community?
- What assumptions are made within systems and policies about this individual/ community and why? Who drives these assumptions? How are these assumptions normalised and reinforced the stigma they experience?
- How has the community / individual been framed historically and how this impact on their current experience?

The current context has brought new challenges in relation to stigma. Recognising this context makes us more aware of where stigma might be experienced.

The cost-of-living crisis might impact on how stigma is experienced and by whom and why.

- For example, how do negative media narratives around recipients of social security impact those who may require it or are current recipients?
- How does how institutions deliver their service affect and shape how people feel using their services during this time?
- How might lower or higher levels of income affect how people feel in different settings, and how they access them?
- How might people perceive themselves in this context, what might make them more at risk of stigma and how does this impact on their daily life?

Key Learning Points

- Stigma is driven and operated in diverse ways. This is connected to power and oppression and other forms of inequality. Exploring context as well as other components such as systems, culture and history help us understand stigma and in turn helps us challenge stigma in both visible and invisible forms.
- Stigma serves as a tool to reinforce and reproduce inequalities and wider power in society.

The 'Everyday' Stigma Experiences from Families in Fife.

The Making it Work For Families team alongside Poverty Alliance participated in reflective exercises as well as a programme of engagement work with families. Families - through participatory exercises and one to one conversation - shared with us where they encountered and experienced stigma in their lives. These forms of stigma were complex and often interlinked to other types of stigmas and discrimination. They included phrases or attitudes used in interactions from services to direct experiences from others in the wider community to wider narratives or messages portrayed by the media or other institutions.

The engagement work highlighted several visible and invisible forms of stigma. For example, one family shared with us their experience of accessing support when in recovery from substance use. They reported feeling stigmatised by the visibility of this in treatment and having to join separate queues to access.

"The whole chemist knows you are there for your methadone, different queues and everything."

Another family discussed how their use of language and the different and often formal dress and languages used by professionals in meetings impacted on them and resulted in feelings of stigma and disempowerment.

A young person outlined how past experiences of other family members in school had resulted in their family being labelled as troublemakers. They discussed how references had been made in the classroom to other family members by teachers and this led them to feel stigmatised.



Locality	Being from a specific neighbourhood or locality was often perceived by families as a source of stigma, whilst this was often tied to social economic perceptions of the area, this was not the only issue highlighted. Visibility of other variables such as crime rates or the appearance of an area also led to negative associations and experiences of stigma.
Family type or circumstances	Families reported that the messages and images and structures around parenting and family types did not always match up to the circumstances they were in and led to experiences of feeling different and being stigmatised. This included how experiences of care were recognised and understood, historical 'reputations' of families and other factors such as unemployment and socio- economic status within the household.
Service engagement history	Within the project, families often had experiences dealing with complex life circumstances such as dealing with multiple services at different points across the life course. Long term service history as well as periods of not accessing and engaging with services was felt to be stigmatized.

Alongside this, practitioners in the Making it Work For Families team reflected on the languages of services and delivery approaches of services and the power this could hold in relation to stigma.

An example provided, was terminology often used by services when communities were not accessing or engaging with services such as “non-compliant” and “non-engaging” “chaotic” framed people in a negative way and led to unintended stigmas of how that household is framed.

The team also reflected on the trauma families they worked with had often experienced including adverse childhood experiences (ACES) and how stigma reinforced and added to that trauma.

Key learning points

- The Making it Work For Families team identified that stigma took a range of forms including phrases or attitudes used, interactions

from services to direct experiences from others in the wider community to wider narratives or messages portrayed by the media or other institutions.

- Families engaged through the project reported a range of experiences of stigma. This included how experiences of care were recognised and understood, historical 'reputations' of families and other factors such as unemployment and socio-economic status within the household, long term experience of services and experiences around recovery and addiction. Families experienced both visible and invisible forms of stigma.

Exercise 2: 'Read all about it' - Stigma in practice.

Where we gain information and ideas and narratives from is important. In modern society, the media including social media has a key role to play in reinforcing and challenging stigma.

Below is a list of real-life headlines. These refer to a range of social issues including obesity, non-attendance at school, economic circumstances and migration.

Obese patients 'being weight-shamed by doctors and nurses'⁹

Parents of truanting children could have benefit stopped, says Michael Gove¹⁰

MIGRANT WORKERS FLOOD BRITAIN¹¹

Looking at the headlines

- Consider how it is framed and what assumptions are being made within the story and of the audience reading it.
- What key language or phrases are used to grab the reader's attention?

⁹ Campbell, D. (2022) "Obese patients 'being weight-shamed by doctors and nurses,'" Guardian, 10 August.

[Obese patients 'being weight-shamed by doctors and nurses' | Obesity | The Guardian](#)

¹⁰ Guy, H (2023) "Parents of truanting children could have benefit stopped, says Michael Gove" 28 February. The Independent, [inews.co.uk/news/politics/parents-truant-pupils-benefits-michael-gove-2178520](https://www.independent.co.uk/news/politics/parents-truant-pupils-benefits-michael-gove-2178520)

¹¹ O Grady, S. (2011) "Migrant Workers flood Britain," Daily Express. 27 May <https://www.express.co.uk/news/uk/249097/Migrant-workers-flooding-Britain>

- What voices or opinions might be represented within the article, and how may this contribute to how the issue is understood or thought about?

Key learning points

- The media in all its forms has influence on how people understand and make sense of issues. Media messages can be immensely powerful and can influence the perceptions we hold including leading to stigma of individuals or communities.
- When looking at media sources consider the messages it is telling and the impacts this may result in. Is there stigma that is present in the story and if so, how is it presented.
- Challenging the media is important when we think about power. There are independent bodies that complaints can be raised with when we see stories that promote stigma and other social harms. A list of these can be found in the wider resources section at the end of this toolkit.

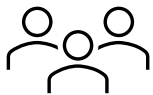
Exercise 3: 'My story, my family' - Exploring hidden stigma and unconscious bias



Read Story A

'I am a single parent with 3 children aged 14, 10 & 7. I have been clean from drugs for 11 years. My oldest child has not attended school for 6 months. I lost my job in lockdown and had to claim universal credit for a year.'

What thoughts came into your head when you heard this statement? What associations come to mind?



Read Story B

"I am a single person of 3 children working 30 hours a week, working in a decent job that I enjoy. I am applying for a promotion soon. My oldest has applied to college and is excited to start their course in the new term."

What thoughts came into your head when you heard this statement? What associations come to mind?

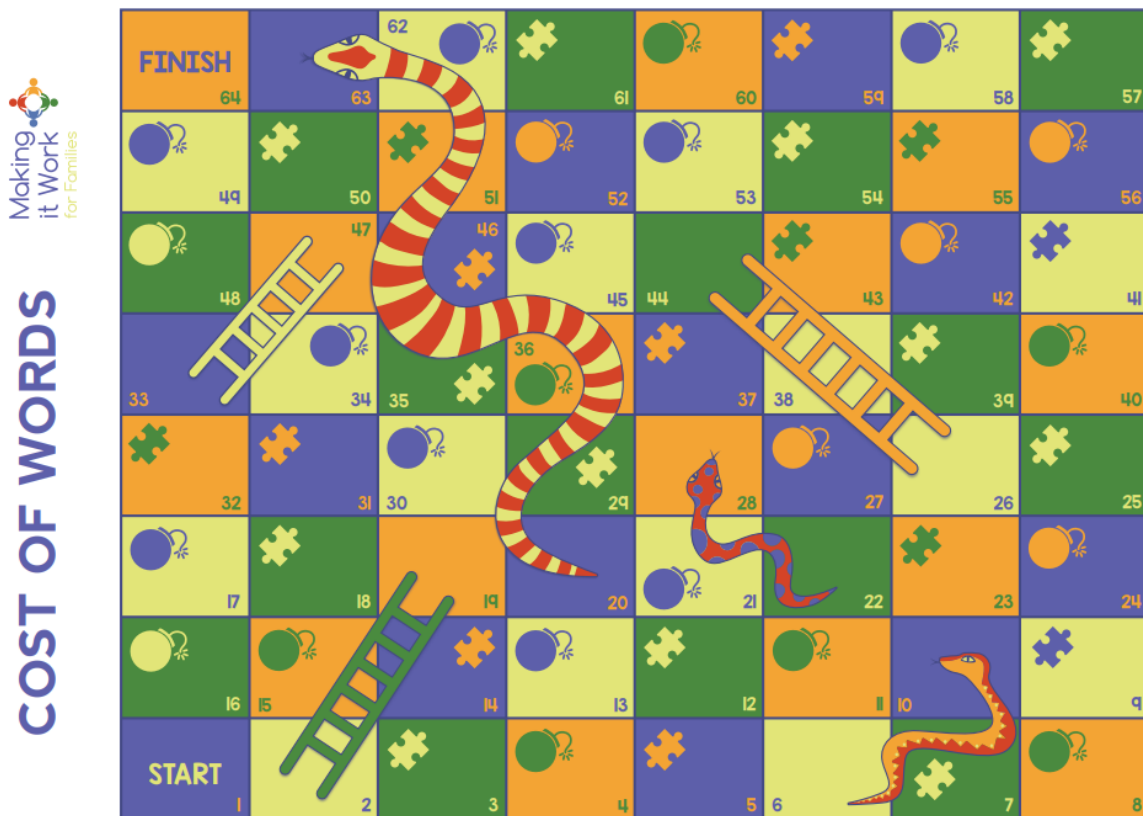
These stories both came from the same household. Was that a connection you made? If not, why not? Thinking about assumptions we made reading the stories can help us understand unconscious bias.

Unconscious bias in our attitudes or behaviour that operates outside of our awareness and often in our subconscious. It can be associations, life experiences and thinking that underpins our decisions and interactions often unconsciously. When we act on unconscious bias we can reinforce inequalities, power structures and stigma.

Key Learning Points

- Assumptions and ideas can often happen unconsciously without us, being aware of this. Consciously thinking about the assumptions, ideas, and associations that we hold can help us unpack our unconscious bias.

Exercise Four: 'Cost of Words Snakes and Ladders'



Thinking about stigma we have created a snakes and ladders game to illustrate lived experience of stigma captured by the Making it Work project staff. Please contact [them](#) for a version of this game to play with colleagues or others to help support your learning.

Key Learning Points

- Stigma can bring serious harms to people's lives. When individual and communities experience stigma this is a barrier to positive outcomes.
 - The Making it Work For Families team identified words that had been said to individuals they support and scenarios have happened in everyday life and discussed the thoughts and feeling of these words.
 - *Words can have a powerful impact on individuals both positive and negative, the game is designed to raise awareness through discussion on how a word can impact an individual differently.
-

Exercise Five: 'Stigma Experiences from Families in Fife'

In this section we have several tools for you to draw upon to help understand highlight challenging real life experiences. These tools have been designed by families who have experienced stigma during their daily life and to tell their stories in an engaging and provocative way. These have been designed with the families and the Making it Work For Families staff team and highlighted challenging and emotional experiences all based on real experiences.

Below there is a series of QR codes for you to watch and listen to the resources.



Challenging stigma



Letting go of stigma



Stigma animation

Key Learning Points

- Experiences of multiple and intersecting stigma experienced by families and young people were highlighted in these clips.
 - Stigma had a legacy in terms of how people perceived themselves, interacted with the others, and caused emotional harm and other visible and invisible impacts on behaviour.
-

'Anti Stigma Practice' - Bringing Action and Change

Tackling stigma in your work can be a challenging process. Working to tackle stigma involves challenges cultures, policies, practice and more. Tackling requires thinking and exploring using multiple lenses and angles to consider the visible and invisible ways it appears.

Critical to making sense and challenging stigma is unpacking power. Think about the power structures that surround you and how they create or reinforce stigma should be a central starting point. By exploring power, we can also focus on understanding what is maintaining power within structures and how stigma arises from this.

Tackling stigma is not a one-off set of activities, this should be an ongoing part of your work as society changes and shifts. Varied factors such as economic pressures or other social change may all shape and shift the experiences of stigma alongside other drivers such as wider inequalities.

Social Security Scotland

The Social Security Scotland Charter sets out what people should expect from the Scottish social security system, and explains how the agency will make sure that it is taking a human rights based approach that demonstrates dignity, fairness, and respect in all its actions.

[We will] ensure staff understand the needs of different people and the barriers they face - so that no-one experiences discrimination because of who they are

Social Security Scotland Charter

The agency measure its performance against the Charter every year, and has created Client Panels who give regular feedback on how the agency is performing.

Their last client survey found that 90% of people rated their overall experience with Social Security Scotland as 'very good' or 'good'

Working collectively to bring about solutions and actions to challenge stigma is critical. Working with others including amplifying unheard voices is important. There may be creative ways you wish to consider and amplify different voices within your workplace including those who are and may also not be using your setting. To bring effective change will require deep thinking and honest reflection, working with others in an open and transparent way and clear objectives. We have left this section of the toolkit open ended to allow this flexible and agile to be utilised in different settings but have developed a series of

prompts and questions to assist with action planning from this toolkit learning. It may be useful to think about a staff meeting or development time where you can bring this work forward.

Working with Values

- What are the values and motivations of those working in our setting?
- How do these values help with challenging stigma?
- Are there new values we need to add to our work ?
- What are the benefits to me and my workplace by tackling and challenging stigma ?
- What are the benefits to those who use our service by tackling and challenging stigma

Considering assumptions and power

- What ideas or assumptions are held about stigma in my practice setting ?
- Whose voices or views are shared or heard in this setting and who is excluded ? Where are the gaps ?
- What has influenced these ideas or assumptions ?
- What hierarchies / power structures / inequalities have contributed to this?
- What visible and invisible forms of stigma might we encounter in our practice?

Working with others.

- What structures or resources do I have within my practice setting to support me with challenging stigma?
- Do we have evidence sources that could contribute to this , what does this tell us ?
- If we don't hold this , what might be the consequences of this?
- How can we co produce and collaborate on this ?
- What other stakeholders could help with this?
- How will you communicate during this process?
- What might we need to consider here?
- What risks and challenges might we face with undertaking this work ?
- How will we address this ?

Making change?

- How will things change if you are successful?

- What would you like to change in your practice?
- What activities and inputs will help contribute to this change ?
- What would be short-term and long-term aims for our actions and activities ?
- How will we know, if we have been successful , what are the indicators of change or progression? How will we capture this ?

Conclusion

Thank you for taking part in the Making it Work For Families toolkit. We appreciate your time and energy to supporting us make better outcomes for families across Fife and the follow up actions you will implement.

As part of your next steps, we are keen to hear your feedback on the toolkit. There is [a link to an electronic form here](#) or please email Fiona McHardy on fiona.mchardy@povertyalliance.org

Wider Resources

Below is a list of resources that might be of use in helping build your thinking and understanding.

Reports

Poverty Alliance (2023) 'Report into the Inquiry of the Cross-Party Group on Poverty Based Stigma

[Report-of-the-inquiry-into-stigma-CPG-on-Poverty.pdf \(povertyalliance.org\)](#)

Shelia McKechnie Foundation (2022) 'It's all about power, a guide for thinking differently about the power for solidarity in social change'

[It's all about Power a guide for thinking differently about the power for solidarity in social change.](#)

[Care experienced children and young people's mental health | Iriss](#)

Websites:

Fife Equalities Centre [Home - Fife Centre for Equalities](#)

Royal Society (2015) [Understanding Unconscious Bias | Royal Society](#)

See Me Scotland [See Me | End Mental Health Stigma and Discrimination \(seemescotland.org\)](https://seemescotland.org)

The Promise Scotland [Home - The Promise](#)

Independent Press Standards Organisation [Complain \(ipso.co.uk\)](https://ipso.co.uk)

Ofcom <https://www.ofcom.org.uk/home>

Blogs

Rankin, J (2019) 'Let's stamp stigma out for care experienced once and for all'

<https://www.celcis.org/knowledge-bank/search-bank/blog/2019/06/lets-stamp-stigma-out-care-experienced-once-and-all>

Joseph Rowntree foundation 'How we can flush out Poverty stigma in our systems and services'

<https://www.jrf.org.uk/blog/how-we-can-flush-out-poverty-stigma-our-systems-and-services>

Arnott, S (2023) 'Stigma sucks: addressing stigma to overcome poverty' [Stigma Sucks: addressing stigma to overcome poverty | JRF \(Joseph Rowntree Foundation\)](#)

Videos

NHS (National Health Service) Tayside's Public Health team and included people with lived experience of substance use as well as members from Dundee Alcohol and Drug Partnership.

[NHS STIGMA 1X1 - YouTube](#)

Books

Tyler, IE (2020) 'Stigma: The Machinery of Inequality'. Zed Books, London.

Notes

Notes

