

Recommendations



September 2022



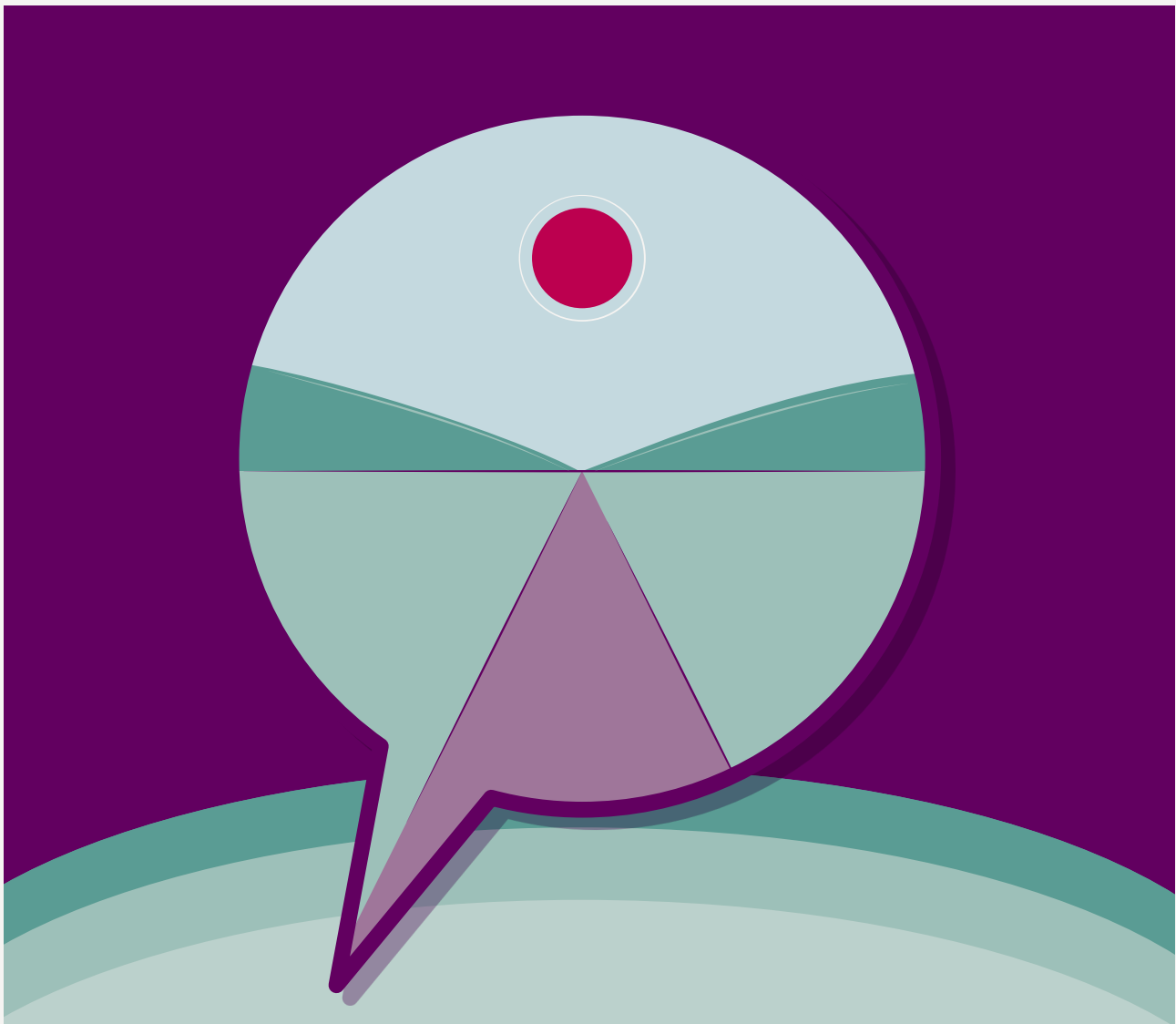
Stigma.

A small six letter word with a punch. A blow so powerful as to cause an end to a life, yet also invisible to others unaware of the fight another is undergoing. Bit too dramatic? I don't think so.

- Heidi Tweedie, Moray Wellbeing Hub CIC Director and Champion

Encourage and facilitate open conversations across society to speak about stigma and shame

- **Frontline staff** should create safe spaces for conversation and trusting, meaningful relationships, especially in health and social care settings. Spaces which are inclusive, open and without barriers or prejudice.
- **The media** should work to develop a person centred approach to media in Scotland, where people are aware of and adhere to best practice reporting guidelines, such as the **current NUJ guidelines** for reporting on mental health. Further best practice reporting guidelines for other stigmatised areas should also be developed.
- **Commissioners** should fund further information, awareness and media campaigns which challenge stigma.
- **Employers, trainers and educators**, especially those working in health and social care, education, criminal justice and the third sector, should support frontline staff to be trauma-informed and trauma-skilled.



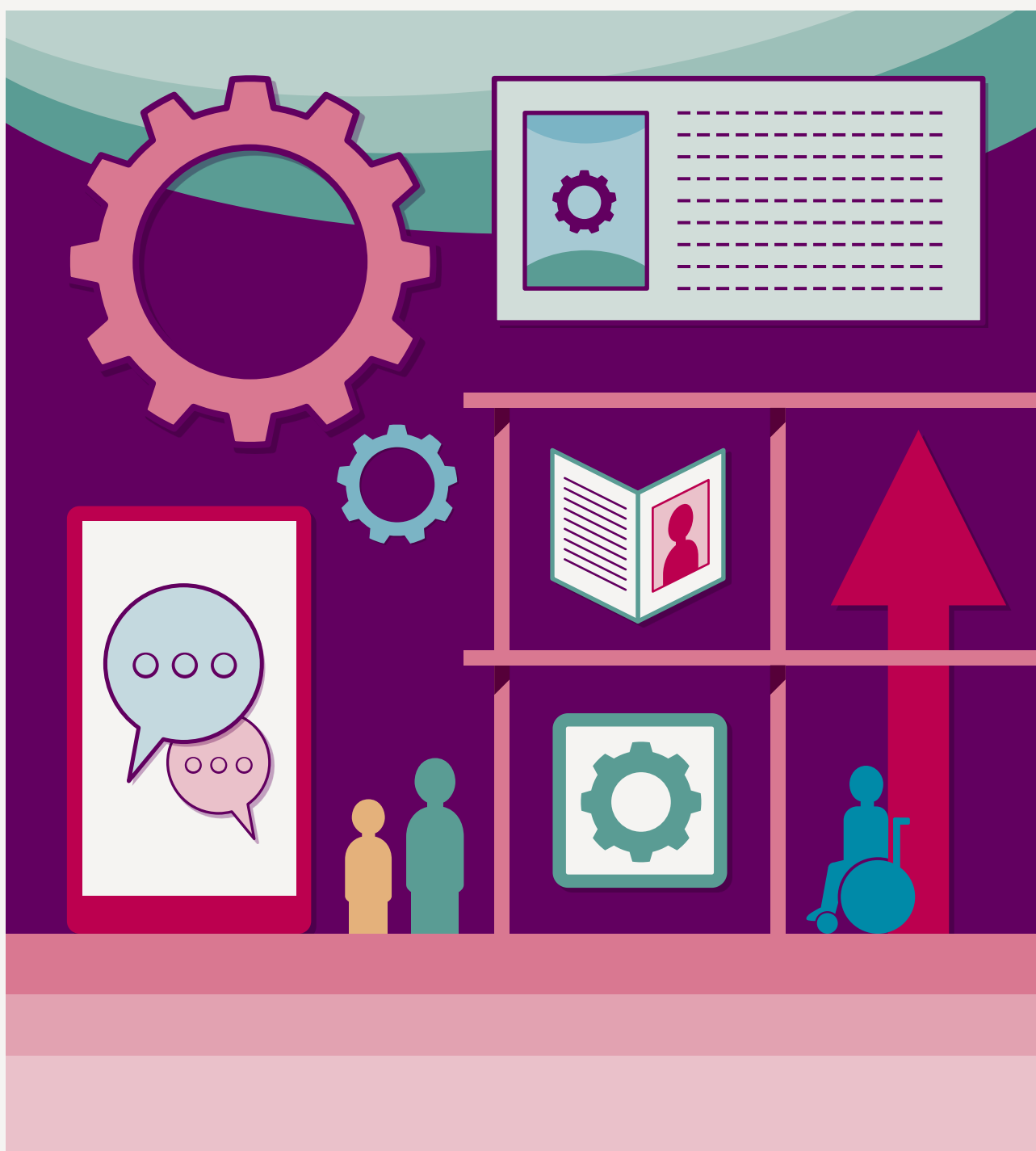
Co-produce anti stigma work and campaigns with people with lived experience

- **Scottish Government** should acknowledge the role people with lived experience play in co-producing quality services publicly, starting at a national policy level.
- **All stakeholders** should create more opportunities for people with lived experience to lead and/ or meaningfully get involved in anti-stigma work and campaigns. Underpinned by access to high quality wellbeing support and empowering capacity building opportunities, such as media training.
- **Funders and commissioners** should provide sustainable financial investment into peer led change, including the development of further peer networks and accessible, inclusive resources to support individuals who experience stigma, including self-stigma and stigma by association.



Provide anti stigma training to individuals and health and social care professionals

- **Health and social care employers** should provide anti stigma training to health and social care professionals.
- **Funders and commissioners** should fund the development of anti stigma training, codesigned with people with lived experience, aimed at both individuals and health and social care professionals. This training should actively promote non-stigmatising language to individuals, organisations and institutions as part of this.



Underpin anti stigma engagement work with a human rights and equalities approach

- **All stakeholders** should use creative methods of communication and outreach to ensure 'no one is left behind'.
- **All stakeholders** should embed inclusive communication practices in anti stigma work.
- **All stakeholders** should work to break down barriers and cede power to actively balance the power between professionals and people.



Prevent stigma by addressing its perpetuation

- **Scottish Government** should commit to a holistic, whole person, national approach to tackling stigma which involves people with lived experience in its design.
- **Legislators** should limit opportunities for private industries to profit from the perpetuation of stigma, such as 'clickbait media' and gambling marketing, working with people with lived experience to identify where this is needed. **The appropriate regulators** must then ensure effective implementation into practice.
- **Funders and commissioners** should increase investment in high quality services and preventative spending to tackle poverty and health inequalities.





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