

Stigma and discrimination and its homeless and health system contexts in south London: an ethnographic case study



24th November 2023

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Background

**Limited progress to address
stigma at systems level**

Anti-stigma strategies in the homelessness sector

- Places for Change (~2007) Refurbishing hostel buildings
- Personalisation (~2009) Person centred care
- GROW (~2008) employment opportunities in homelessness services
- Repealing Legislation (~2008) Vagrancy Act 1824
- Introducing lived experience roles (Peer-navigators, -advocates, -researchers)
- Specialist services (e.g. health, addiction services, LBGTQI+)
- Addressing language (e.g service users, members, people with experience of ...)
- Changing narratives: (e.g '2 paychecks away from homelessness')
- More....

Reilly et al 2022, A systematic review of the effect of stigma on the health of people experiencing homelessness, Health and Social Care in the Community

Interventions are limited

Macro-micro theory gap

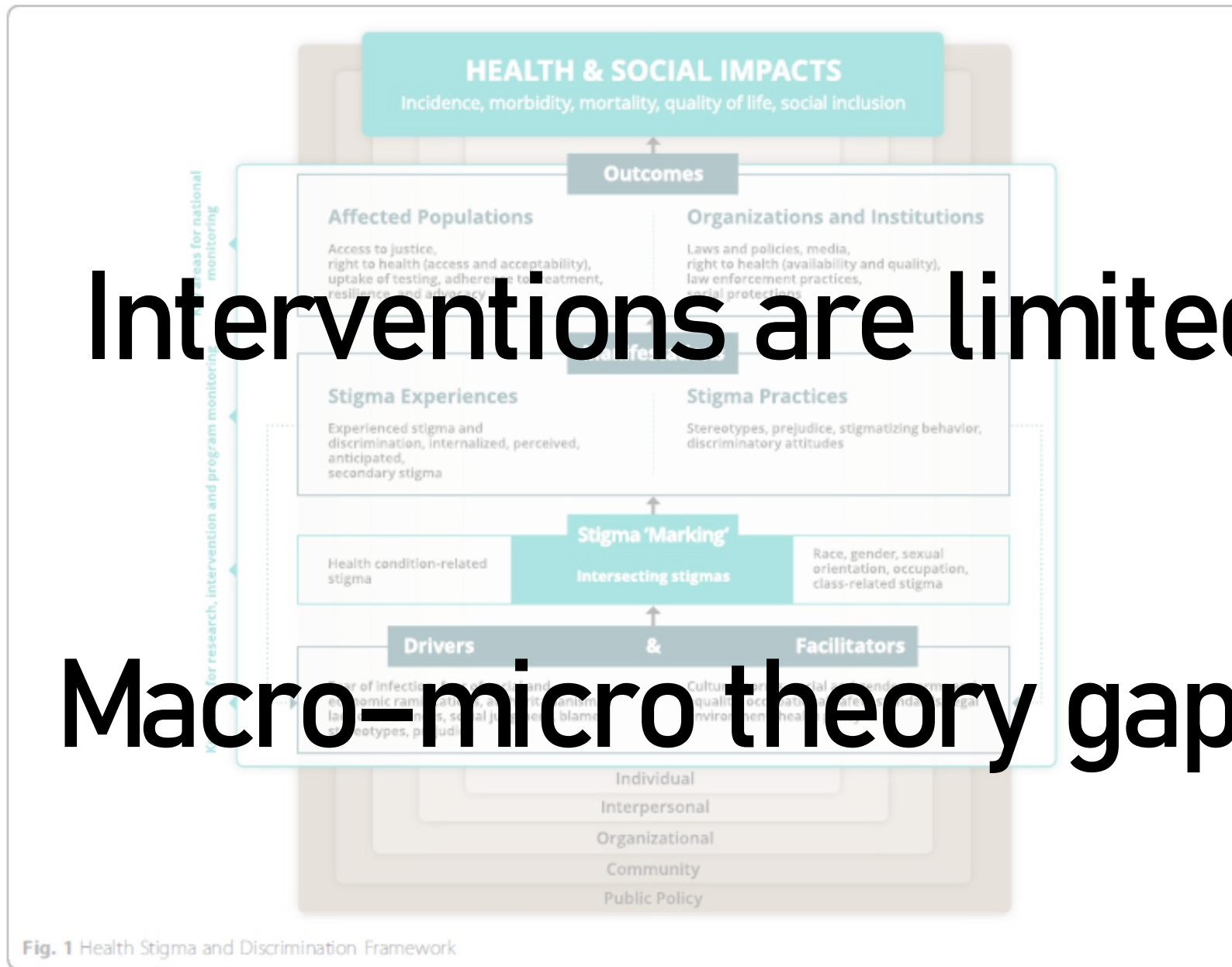


Fig. 1 Health Stigma and Discrimination Framework

Our questions and aim

- 1 How is stigma and discrimination experienced by people who are homeless?
- 2 How is this stigma shaped by the health and homelessness systems people engage with?
- 3 How can we change these systems?

Aim: develop theory of how stigma operates within different systems, using Bourdieu's social practice theory, to inform new systems level interventions

Methods

Ethnographic case
study in south London

2022

2023

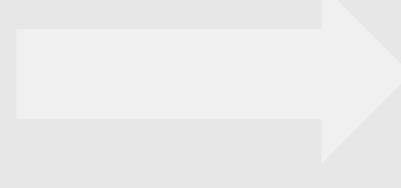
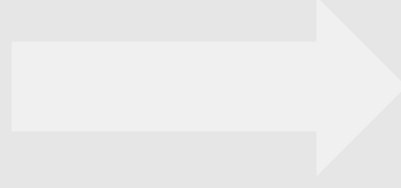
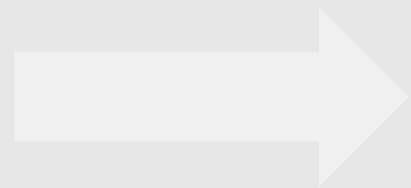
2024

2025

2026

2027

Ongoing ethnographic case study in south London
 To date - interviews (n=63), focus groups (n=3) with people with experience of homelessness and working or position in the sector; observation (96 hours) in hostels, day centres
 (in 2024: within NHS, welfare and policing settings)



Developing & evaluating Systems interventions

Survey of experiences of stigma – reporting early 2024

Sub-study on lived experience roles and stigma

Comparative analysis to global settings – reporting early 2025



Findings 1

How is stigma experienced?

Experiences of stigma



PERSONALLY MEDIATED DISCRIMINATION



INTERNALISED STIGMA



ANTICIPATED STIGMA



STRUCTURAL DISCRIMINATION



PERCEIVED STIGMA



ASSOCIATIVE STIGMA

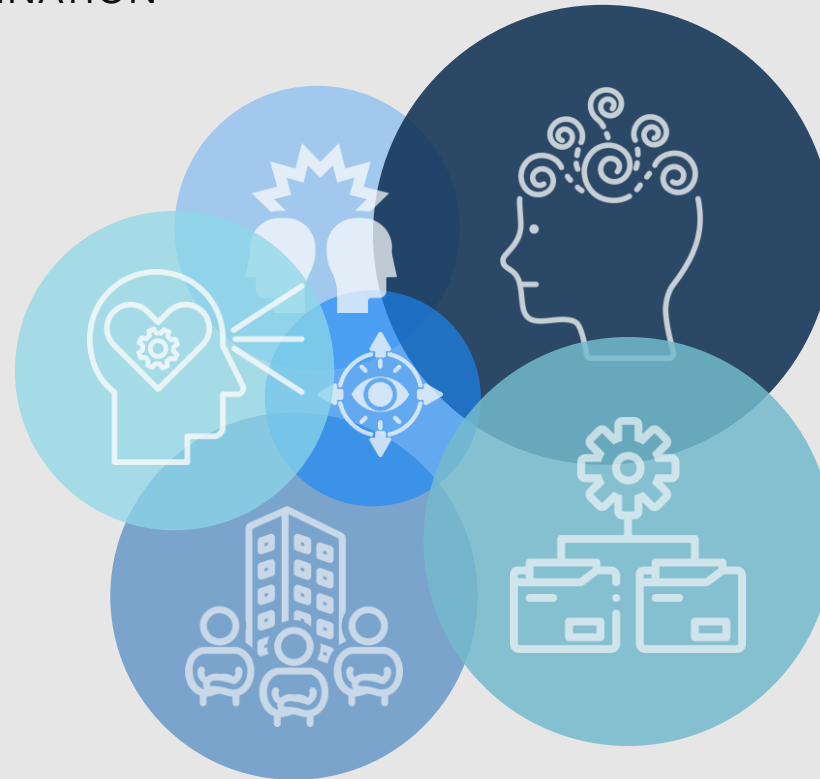
Experiences of stigma

PERSONALLY MEDIATED DISCRIMINATION

ANTICIPATED STIGMA

STRUCTURAL DISCRIMINATION

ASSOCIATIVE STIGMA



INTERNALISED STIGMA

PERCEIVED STIGMA

"When the treatment was starting, I told my wife then not to mention about me being an ex-crackhead. [...] I'd been four years clean. She did mention it because [...] I didn't want any morphine tablets or painkillers."

"She didn't understand why I was treated differently, because of that."
(George)

“Like the flesh was being more and more eaten. And I didn't have any choice. Joe dragged me to the hospital. [...] it turned out I had a really bad blood infection, blood disease.

“See I've always been more of a fix it myself kind of guy. Partly because of the way I get treated.” (George)

Findings 2

What are the system processes involved?

What is the problem?

How a problem is understood determines how we respond.

And how a problem is understood reveals properties of the system responding.

Day centre manager

“I think there is a stigma for some people around the very idea of using our type of service. ...and so they're like...they'll take pity on me, or it's a sign that in some way I have failed to be resilient or independent.”

Nurse

“I think this is something to do with stigma...[a colleague will] have clients She will have an agenda, but not think about what their agenda might be.”

Day Centre staff

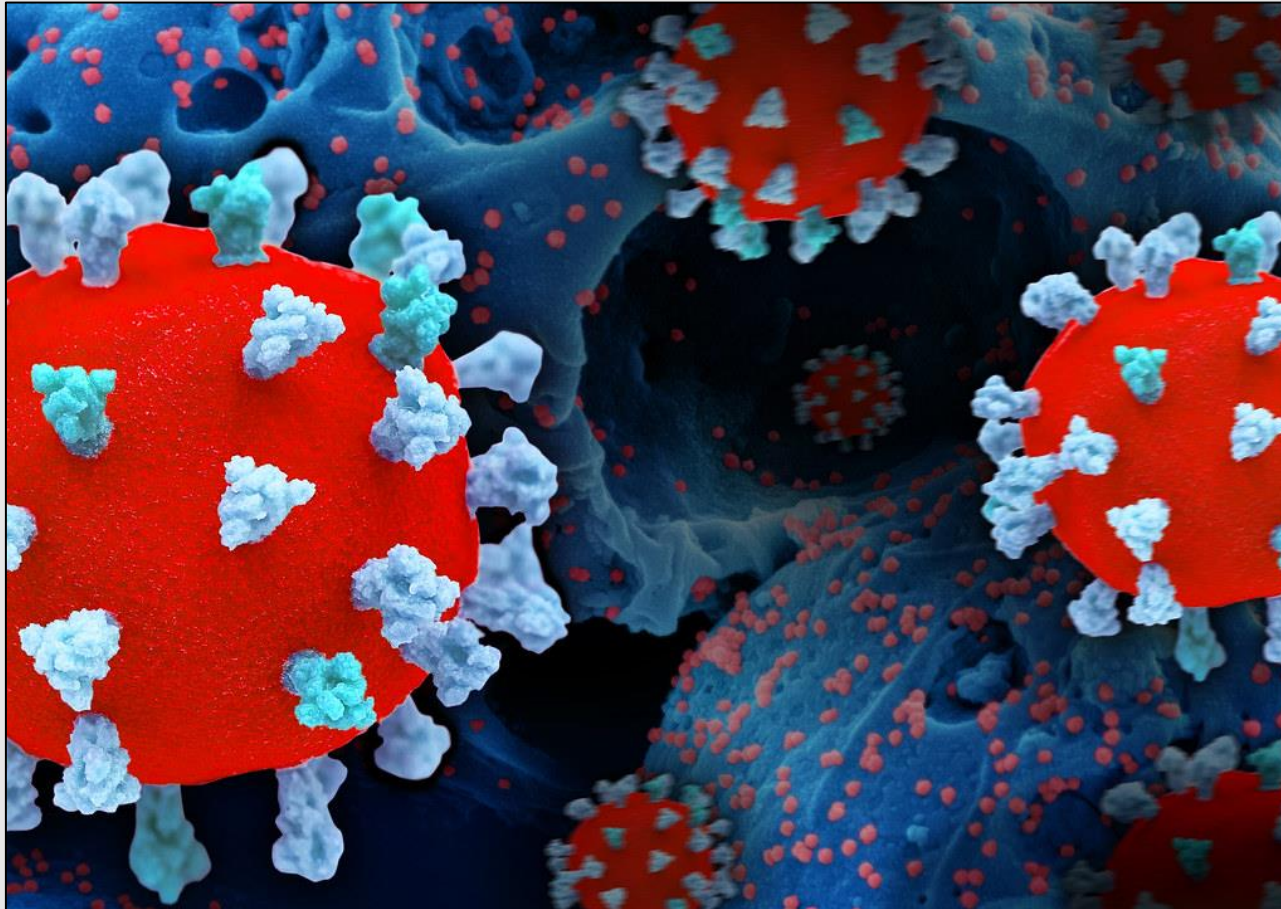
“The way I understand the stigma that we have today is that there's kind of loads of different examples ...but for me, it's the overarching stigma you just have in society, which kind of leads on to all the individual reasons.”

UK Government 2021 Drugs Strategy

“We will create a system where no one falls through the gaps, where there is no stigma attached to addiction and it is treated as a chronic health condition”

Discussion

What is the problem with how we see the problem?



The understanding of the problem of stigma limits debate

Rt Hon Suella Braverman
KC MP

“We cannot allow our streets to be taken over by rows of tents occupied by people, many of them from abroad, living on the streets as a lifestyle choice”

UK Government 2021 Drugs Strategy

“We will create a system where no one falls through the gaps, where there is no stigma attached to addiction and it is treated as a chronic health condition”

Early thoughts on how to counter this 'problem' of the understanding of the problem of stigma

Research, policy and services collectively need to be clearer on what we think the problem of stigma is, and what we think caused it

Shift from education and training on stigma, to critical pedagogy and reflection (reflective practice? psychologically informed environments? co-production?...and the resources to enable it?)

Thank you for listening

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Thank you also to the many people in hostels, day centres and other sites for our research in south London who have given their time, ideas and energy.

The project is funded by UKRI (ref - MR/T040688/1)

