What works to prevent and tackle poverty stigma?

Key insights from a rapid evidence review

by Alexander Jones and Charlotte Morgan

Background

A 2022 review of international poverty and social exclusion strategies, programmes and interventions, conducted by the Wales Centre for Public Policy (WCPP) for the Welsh Government, found that tackling stigma is a key priority for people experiencing poverty (Carter et al., 2022). This is because poverty stigma damages people's mental health and can prevent them from accessing support and participating fully in their community.

To build on this work for the Welsh Government, and to inform policy and practice approaches to tackling poverty stigma in Wales at a local level, we commissioned the Poverty Alliance and the Scottish Poverty Inequality Research Unit (SPIRU) to conduct a rapid evidence review (RER) examining how poverty stigma has been effectively prevented or addressed through policy and practice, in the UK and internationally (Robertson et al., 2025). This policy briefing provides an overview of the key findings.

There is no universally accepted definition of poverty stigma. Here, poverty stigma is defined as 'the collective forms of stigma that are experienced by people living on low incomes' (Inglis et al., 2024a, p. 1). Poverty stigma can take multiple forms:

1. **Received stigma:** a form of discrimination directed towards a person because they have a low income.

2. **Anticipated stigma:** an individual's concern that others will treat them unfairly because they have a low income.

3. **Self-stigma:** occurs when people on low incomes internalise negative stereotypes and apply these to themselves.

4. **Perceived structural stigma:** relates to individuals' beliefs about how people on low incomes are treated by institutions, public services, or policy makers.

Affecting nearly one in four (24%) adults in Wales, particularly disabled people, young people, those on low incomes and renters (Inglis et al., 2024b), poverty stigma evokes feelings of shame, fear and sadness (Tyler, 2020), to the detriment of mental health and wellbeing (Inglis et al., 2023; Scottish Parliament Child Poverty Group (CPG) on Poverty, 2023). The Welsh Government's Child Poverty Strategy for Wales (2024) commits to challenging poverty stigma. It aims to ensure that children, young people, and their families experience dignity and respect in every interaction with people and services, while receiving the support they need (Objective 4). It is in this context that this RER aims to inform policy and practice in Wales. The RER findings have also been used to inform policy and practice more specifically in Swansea, as the Council has identified tackling poverty stigma as a key objective in its Child Poverty Strategy.

While this briefing focuses on ways to prevent or address poverty stigma, the most effective way to tackle poverty stigma is to reduce poverty itself, by maximising incomes and lowering costs for those on the lowest incomes. In Wales, where powers over social security are limited, this underscores the need for continued action to mitigate the harms caused by living in poverty, including poverty stigma.

The remainder of this briefing is structured as follows:

(1) firstly, we outline the rapid evidence review approach;

(2) secondly, we discuss the key findings; and thirdly,

(3) we conclude with a set of recommendations for de-stigmatising services for people experiencing poverty.

Methodology

The review focused on a single research question: **'What works to prevent and tackle poverty stigma through public policy and practice?'**, with the aim of identifying what works, for whom, and under what conditions. To address this question, the review adopted a systematic approach to identify, assess and synthesise evidence on tackling and reducing poverty stigma. This involved an initial scoping of academic and grey literature, a five-stage screening process, and an in-depth appraisal of research papers. In total, 23 papers met the inclusion criteria for the review across a range of policy areas, including housing, food assistance, social security and education. Of the evidence reviewed, only a small number of interventions have been evaluated, very few of which could be described as robust evaluations. As a result, the review mainly draws on evidence and learning from research that has not been formally evaluated. The research explores how services that aim to support people living in poverty can be designed and delivered in ways that do not, often unintentionally, generate poverty stigma.

In addition to the published work discussed here, we draw on the Tackling Poverty Locally Directory, hosted by SPIRU. This directory showcases case studies of local work aiming to tackle poverty, along with guidance for replication. While the directory focuses on tackling poverty more broadly, its search function can be used to filter case studies with a poverty stigma element. Many of these case studies are underpinned by evidence; however, the purpose of the Directory is to share all practice, including emerging work and initiatives that have been less successful, all of which offer learning opportunities.

Key findings

Design of services

The design of public and charitable services is central to ensuring that they prevent, rather than create, stigma. Research has highlighted the importance of user-centred design, which involves people with lived experience in the design, delivery and evaluation of services. Other key approaches include automation, cash-first approaches and the co-location of services.

A recent inquiry into poverty stigma in Scotland identified a strong desire for user-focused service design that prioritises people's needs while affording them dignity and respect (Scottish Parliament CPG Poverty, 2023). This was coupled with an emphasis on the inclusion of people with lived experience in the design, delivery and evaluation of public services.

Example

Lived Experience Online Forum

Aberdeenshire Council's Lived Experience Online Forum aims to provide a channel for people experiencing poverty to provide feedback on 'poverty-mitigating services'. The forum exists to support the Council in improving service delivery.

Source: SPIRU (n.d.,a)

Design of services

Automation of services and cash-first approaches

There are multiple examples from Scotland of services effectively challenging the stigmatisation of people in poverty through automating eligibility and adopting cash-first approaches (Scottish Parliament CPG Poverty, 2023). Here, automation refers to the removal of benefit application processes by using existing entitlement data. A cash-first approach provides an alternative to vouchers and food parcels, enabling dignity and choice, while empowering people to make decisions that best meet the needs of their households and families (Scottish Parliament CPG Poverty, 2023).

During a discussion event with Scottish Parliament members and people with lived experience of poverty-related stigma, Scottish Parliament CPG Poverty (2023) found that both Glasgow City Council's automation of School Clothing Grants in 2017 and the automated provision of free school meals during Covid-19 reduced stigma by removing the need for repeated applications. Parents spoke of the 'incredible relief' they felt at no longer having to repeatedly confront their claimant status. A rapid review of stigma associated with foodbank use and affordable food provision in Birmingham (UK) recommended prioritising cash-first approaches, such as adequate benefit levels and Living Wage policies, to prevent reliance on foodbanks and enable citizens to exercise choice when sourcing food (Birmingham City Council, no date). Similarly, Scotland's Menu for Change project promotes income maximisation through cash payments to help mitigate food poverty (Independent Food Aid Network, no date).

"A cash first approach avoids stigma, empowers people to make the best choices for their households and families, and shows commitment to including the voice of low-income families in policy decisions designed to tackle poverty."

(Scottish Parliament CPG Poverty, 2023: 37)

Design of services

Co-location of services

Carrick et al. (2017) examined how the co-location of advice workers and services within three Scottish GP practices reduced stigma linked to claiming social security benefits. Among 35 patients, most reported feeling less stigmatised and described improvements in self-worth after accessing advice workers. Key factors in reducing stigma included referrals from trusted medical staff and support from non-judgemental advisors. Similarly, Baskin et al. (2023), drawing on a multi-site case study of six community / mental health and wellbeing services, found that the co-location of services helped reduce stigma by creating psychologically safe, non-judgemental environments. This was achieved through disassociation from clinical health services and by fostering a culture of friendliness, empathy and trust, which left service users feeling dignified and respected (Baskin et al., 2023).

Poverty proofing in schools

The Poverty Proofing the School Day (Children North East) and Cost of the School Day (Child Poverty Action Group, in partnership with Children North East) programmes, based in England, aim to tackle poverty stigma in schools by identifying and removing barriers to learning associated with poverty. Through school audits involving pupils, staff and parents, participating schools implement changes such as universal breakfast provision, affordable uniform schemes and stigma-free communication. Evaluations of these programmes reported benefits including reduced school-related costs, improved attendance and attainment, greater uptake of free meals and school trips, and improved wellbeing for families (Laing et al., 2023; Mazzoli-Smith and Todd, 2016). The success of the programmes depended on leadership support and dedicated staff (Laing et al., 2023), although it should be acknowledged that many of the underlying causes of stigma cannot be addressed by schools alone.

Housing and local regeneration

Evidence on interventions designed to reduce place-based stigma through housing and regeneration is mixed. Ejiogu and Denedo (2021) found that measures such as regeneration initiatives, mixed tenure policies, planning reforms, staff training and tenant involvement have had limited impact. This is often because such measures address symptoms rather than the underlying power relationships, for example between social housing landlords and tenants, that sustain stigmatisation.

They argue that challenging stigma associated with social housing requires a collective, rights-based approach that recognises affordable housing as a 'fundamental human right' (2021, p. 8).

Similarly, Carnegie et al. (2018) examined income and tenure mixing in three Dublin neighbourhoods and reported mixed outcomes in relation to reducing place-based stigma. While income and tenure mixing generated more positive external perceptions of one neighbourhood, internal perceptions of stigma were exacerbated due to 'significant conflict between private and public residents' (Carnegie et al., 2018, p. 16). Carnegie et al. conclude by emphasising the importance of considering wider socio-economic contexts and housing market conditions when designing tenure-mixing programmes to address the stigmatisation of public housing. For example, their research found tenure mixing difficult to achieve in highly stigmatised neighbourhoods, where housing was challenging to sell.

Training and awareness

Three papers were identified that focused on reducing poverty stigma through training for health and social care practitioners (Gupta, 2015; Beddoe and Keddell, 2016; Murray et al., 2022).

Beddoe and Keddell (2016) explore the use of complex and realistic case studies to bring 'service user' voices into the classroom. This approach is underpinned by the assumption that trainee practitioners may have limited understanding of the challenges associated with living in poverty, which may contribute to stigmatising practices. Poverty simulation exercises may help practitioners to empathise with, and better understand, how poverty can affect health and wellbeing.

However, no evidence of impact is provided. Stronger evidence of effectiveness is reported in Murray et al. (2022), who examined the impact of poverty simulation role play, described as 'cultural competency training', on US healthcare practitioners' attitudes towards poverty. Using the Attitudes Towards Poverty Scale, the study identified sustained improvements in attitudes over a six-month period. Participants reported increased awareness, compassion and empathy, alongside reduced judgement towards patients on low incomes (Murray et al., 2022). Gupta (2015) describes a workshop on poverty and shame that aimed to inform the development of a training programme for social workers. The workshop brought together academics, practitioners and family members living in poverty with experience of child protective services (CPS). Parents shared both positive and negative experiences of CPS, poverty and shame. Positive experiences included social workers taking time to get to know parents, rather than approaching interactions as a 'tick box' exercise.

Example

Think Poverty

Think Poverty is a training programme run by Falkirk Council that aims to raise awareness of poverty and challenge stigma associated with it. Staff are encouraged to experience the decision-making pressures faced by people living in poverty through budgeting activities. The programme is reported to improve understanding and increase empathy among staff.

Source: SPIRU (n.d.,b)

Social security

Two recent studies provide evidence on reducing poverty stigma and improving social security benefit uptake (Lasky-Fink and Linos, 2023; The Poverty Alliance, 2024).

Lasky-Fink and Linos (2023) explored the impact of de-stigmatising language in communications with residents. The authors found that 'subtle framing changes' in letters to residents increased engagement with rental assistance by 36% and application requests by 18%. These subtle language changes included highlighting that the programme was intended to support eligible residents to access the help they deserved, which addressed potential anticipated stigma, and emphasising that it was no one's fault if they were struggling to pay their rent, which addressed potential internalised stigma.

The Poverty Alliance's (2024) citizens' panel research recommended several measures to reduce stigma and increase benefit take-up, including:

- advocacy support;

- staff training;

- streamlined entitlement processes through automations and 'passporting';

- a public awareness campaign;

- information and support services through local, trusted access points;

- stigma-free language; and

- targeted information about benefits entitlements for people experiencing domestic abuse.

Fife Stigma Toolkit

The Fife Stigma Toolkit is designed to promote and improve practice across a wide range of service providers that engage with people experiencing poverty. The toolkit is reported to have empowered both service users and providers to confidently challenge stigmatising behaviours and to reflect on how language can contribute to stigma.

Source: SPIRU (n.d.,c)

Food

Several studies have found that food assistance schemes, such as free school meals and food banks or food vouchers, can stigmatise people experiencing poverty (Domina et al., 2024; Psarikidou et al., 2019). However, evidence also shows that food assistance can be delivered in ways that prevent or reduce poverty stigma.

Three papers identified through the review provided evidence on approaches to free school meals as a means of tackling poverty stigma (CPAG, 2023; Birmingham City Council, no date; Domina et al., 2024).

Based on research with schools and families in London, the Child Poverty Action Group (CPAG) recommended small changes to free school meal delivery that could make a 'big difference to how young people experience school food' (CPAG, 2023, p. 1). Recommendations included greater flexibility and choice over free school meals, such as the roll-over of funds and discreet collection of packed lunches.

Domina et al. (2024) evaluated the impact of universal free meal provision on suspension rates in US schools with high rates of child poverty. They found that by removing distinctions between students who received free or reduced-price school meals and those who did not, the intervention contributed to a reduction in poverty stigma. By reducing the stigma experienced by economically disadvantaged students, the intervention was also associated with wider behavioural changes, including improvements in suspension rates (Domina et al., 2024). Similarly, a review of national and international evidence on the potential of universal free school meals (UFSMs) to alleviate stigma found that universal provision reduces stigma through the absence of association with means-tested welfare (James, 2024).

Research on food hubs[1] and food banks identifies features of provision that can either create or help reduce poverty stigma. On the one hand, Psarikidou et al. (2019) highlight the limited ability of the food hubs in their study to overcome poverty stigma. Situated in urban deprived areas, the food hubs appeared to appropriate and reproduce existing narratives of stigmatisation or even enable new processes of stigmatisation through discourses and practices. This was attributed to the food hubs primarily employing individual-based stigma management strategies to address food poverty, such as a focus on enhancing people's cooking and ICT skills, which risked reinforcing knowledge-deficit stereotypes (Psarikidou et al., 2019).

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[1] 'Local Food Hubs are a relocalised distribution channel that aim to reconnect local small-scale producers with consumers' (Psarikidou et al., 2019, p. 2)

On the other hand, evidence suggests that food banks and affordable food models can help to mitigate stigma and shame when they prioritise welcoming and positive physical and social environments, with particular emphasis on the friendliness of volunteers (Birmingham City Council, n.d.; Purdam et al., 2015; Garthwaite, 2016; McNaughton et al., 2021). For example, an ethnographic study found that volunteers 'attempted to create a non-judgemental and relaxed atmosphere' to alleviate feelings of stigma, with 'tables… set up café style… with plates of biscuits and crystal bowls of sugar on top' (Garthwaite, 2016, p. 282).

The WCPP identified two further papers that focused on tackling poverty stigma through food aid (Brennan-Tovey et al., 2023; Ranta et al., 2024). Ranta et al. (2024) explored user perspectives on social supermarkets as an alternative to food banks in East Sussex, in South England. As with the Birmingham City Council review (n.d.), features of service delivery, including a friendly atmosphere, opportunities for social interaction, and support provided beyond food access, were credited with helping to reduce stigma, although feelings of embarrassment were not entirely eliminated among users. Brennan-Tovey et al. (2023) conducted a small-scale ethnographic case study examining user experiences of 'stigma-power', defined as the use of stigma to 'exploit, control, or exclude others' (Brennan-Tovey et al., 2023, p. 780), alongside the 'anti-stigma strategies' employed at an independent food hub in north-east England. The food hub sought to reduce stigma by presenting the facility as less like a traditional food bank, fostering a sense of a service provided for the community by the community, ensuring volunteers were empathetic and sensitive to users' experiences, and emphasising the service's environmental credentials, such as preventing food waste from going to landfill (Brennan-Tovey et al., 2023).

Caledonia Funeral Aid

Caledonia Funeral Aid is a service that works to reduce funeral costs for people on low incomes and is careful not to promote itself explicitly as a poverty-focused intervention. This approach reflects recommendations in the WCPP's 2022 lived experience report, which emphasises the importance of using asset-based, rather than deficit-based, terminology when communicating with current and potential service users.

Source: SPIRU (n.d.,d)

Conclusions and recommendations

Key messages

Key messages for policy and practice include the following:

Successful approaches to tackling and preventing poverty stigma are underpinned by common principles, including dignity and respect, and the involvement of people living on low incomes in the design, delivery and evaluation of services.

Principal lessons for non-stigmatising service provision can be drawn from the everyday practices of effective services, including:

- General operational practices (for example, automation of benefits, cash-first approaches, universal provision, and minimising the 'burden' of proof of entitlement);

- Overarching organisational cultures and values (for example, engaging people with lived experience of poverty to ensure services are sensitive to how their offer is received, and applying principles underpinning the Cost of the School Day, such as dignity, empathy and respect); and

- Approaches that challenge stigma directly (for example, promoting alternative, non-stigmatising interpretations and descriptions).

However, the challenge of tackling stigma should not be underestimated. Stigma can be enduring and deeply embedded, and it is unrealistic to assume that design-based solutions alone can de-stigmatise poverty.

Recommendations

In light of these findings, the following recommendations are identified to build and strengthen the evidence base on approaches and interventions to tackle and prevent poverty stigma:

Increased funding to support robust evaluations of approaches and interventions that seek to tackle poverty stigma, including evaluations that extend beyond the point of intervention completion.

Active dissemination in Wales of learning from local-level examples of effective practice from elsewhere in the UK.

Further research on poverty stigma that explores how poverty-related stigma intersects with stigma associated with marginalised populations and other vulnerabilities, such as substance misuse and disability.

The inclusion of poverty stigma as a measured outcome in evaluations of services and interventions for people on low incomes.

Identification of, and engagement with, poverty stigma experts outside the UK to explore evidence and practice that has been effective in tackling poverty stigma in other contexts.

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