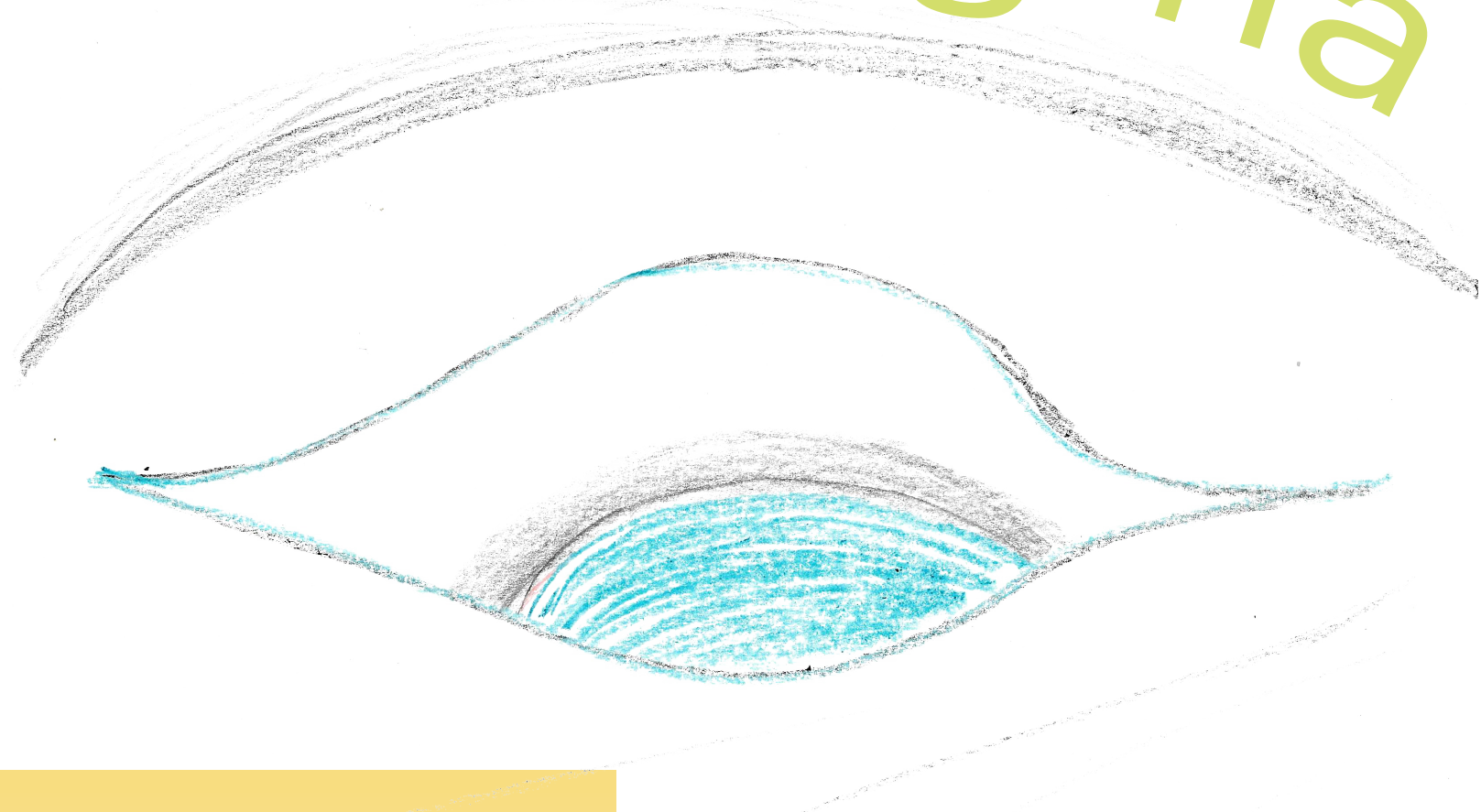


STAND UP TO Stigma



Let's Speak Up! (LSU!) is a participant-led group of DTES residents that support one another and work on issues that affect their lives in the community, which means that group members decide on what topics and issues to tackle and which projects to pursue. LSU! encompasses a working group that meets weekly to develop, learn, and practice leadership skills, civic and political literacy, and systems change capacity. Our meetings also provide an opportunity for folks to maintain a grounded, safe, and familiar space on a weekly basis, building on participant-led connections with one another. We are committed to meaningful participation in civic decision-making processes in the DTES. This year LSU! has taken a deeper exploration into how capacity building can take place, as well as challenging the often negative discourse surrounding the DTES that feeds into widespread and interwoven systems of stigma.

This poster is an attempt to depict some of the ways in which stigma; self, social, and structural are experienced by community members. Stigma in the DTES is commonly imbedded around issues of; material poverty in a deeply unequal city, substance use amid the eighth year of a provincial public health emergency, and those most acutely experiencing the current mental health crisis. While stigma is usually related to specific social groups such as folks experiencing homelessness or people of a specific ethnic group, community residents know that there also exists a perpetual and on-going prejudice in Metro Vancouver towards people who are perceived to belong to the DTES in and of itself. With this project, we'd like to illustrate some of the ways in which LSU! participants have and continue to experience the negative behaviour, reactions, and messaging that is elicited from the rest of the city.

STIGMA

Negative attitudes, beliefs, or behaviours directed at a group of people resulting in the negative labeling, stereotypes, and fear towards the subject group. Stigma leads to discrimination and barriers that affect a person's wellbeing in myriad of ways.

STIGMA IN THE CONTEXT OF THE DTES is commonly related to material poverty, mental health challenges, and substance use. Stigma devalues, denigrates, and shames individuals who are perceived to belong to the group in question, leading to a myriad of negative health and social outcomes for individuals, groups, and even entire communities.ⁱⁱⁱ

STRUCTURAL STIGMA

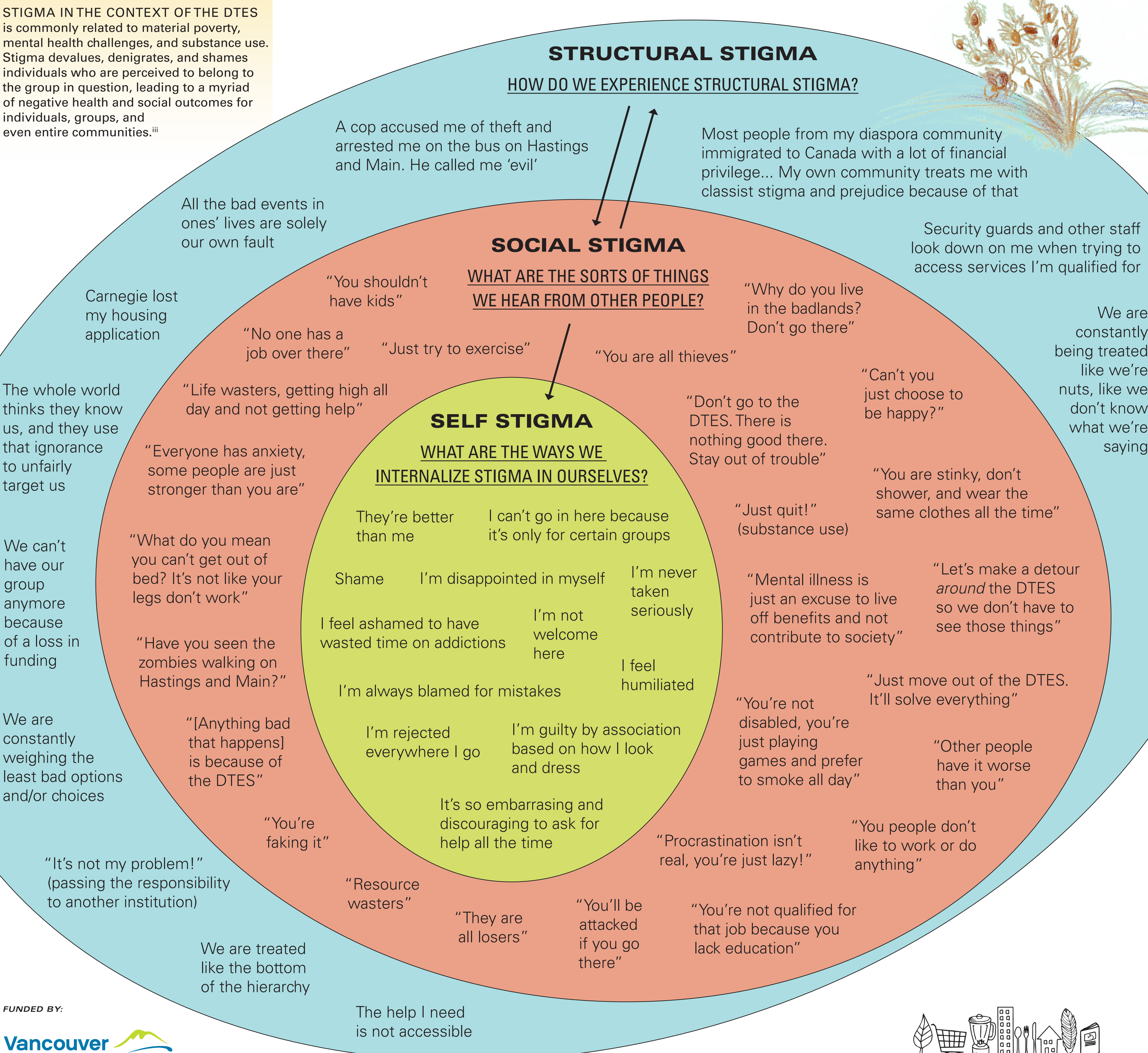
Structural stigma is the policy and procedures that are interwoven into social and healthcare institutions in more covert ways. They restrict and reinforce the often inferior quality of care that stigmatised individuals face.^{iii, iv}

SOCIAL STIGMA

Social stigma refers to the messages, verbal and/or behavioural, that are enacted or reinforced by society at large. These beliefs are often both internalised by individuals and also act as reinforcement for inhibitive and regressive social health policy.^{iii, iv}

SELF STIGMA

The internalized messages or beliefs a person holds about oneself. Self stigma is a major deterrent to successfully receiving resources and/or services necessary for improving related health outcomes.^{ii, iii}



ART CREDITS: Flowers by Ali, 'Eye of Stigma' by Form

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 iv. Livingston, J. D. (2020). Structural stigma in health-care contexts for people with mental health and substance use issues. *Ottawa, Canada: Mental Health Commission of Canada*.

The Downtown Eastside Neighbourhood House is situated on the ancestral, traditional, and unceded territory of the xʷməθkʷəy̓əm (Musqueam), Skwxwú7mesh (Squamish), and səliłwətał (Tsleil-Waututh) Nations.