A small group discussion, all-staff meeting, workshop, or training can all be effective venues for open dialogue and reflections on stigmatizing beliefs, attitudes, and behaviors. However, talking about stigma can be uncomfortable. Follow the tips below when planning your own discussion about stigma.

1. **Acknowledge that stigma is within each of us**

Whether consciously or unconsciously, most of us have likely created feelings of “otherness” and stigma through our words or actions towards people with certain health conditions. Nobody is perfect. We’re all struggling to evolve. Creating this shared connection upfront ensures the conversation is a dialogue rather than a debate ([Alonzo, J., 2012](#)).

2. **Start with a story**

Invite a patient or client of your organization or a member of your community — such as a woman with opioid use disorder — to speak about their experience feeling stigmatized. This type of contact, in which you bring people face-to-face with those affected by health-related stereotyping and shaming, is a proven strategy to reduce stigma ([Kassam, et al., 2011](#)).
3. **Generate awareness of stigma in concrete terms**

Stigma can seem like an abstract concept that exists in our society. For people to feel confident that they can create change, they need to see how stigma exists in daily life. Make the concept more concrete by asking participants to think about words and phrases that they've heard that perpetuate stigma (e.g., “drain on the system”, “crazy”).

Have them write these words on flip charts or sticky notes and then take time to discuss as a group the power of language and alternative words that can be used instead (e.g., “person with a mental health condition”).

4. **Help people reflect on their own experiences**

Reflecting on our own stigmatizing attitudes and actions can help us tease apart where they are coming from (e.g., fear, myths) and how they affect others. Ask participants to think about an experience where they thought less or judged someone because of their health condition or behavior.

Create a nonthreatening space for sharing by defining ground rules: no stories leave the room and no judgmental comments are allowed (Burgess et al., 2007). You might also give participants the option to submit their stories anonymously on paper.

After each story is shared, discuss the negative effects on the health and well-being of the people being stigmatized. Ask questions like: “How do you think that person felt afterwards? How do you think it might have affected their health?”

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While it is important for each participant to accept the role they play in perpetuating stigma, it is just as important to have them accept the role they play in reducing it.

After sharing stories and reflecting on stigma’s negative effects, discuss what could have been said or done differently to reduce stigma in those situations. Instead of talking about stigma as a personality trait or malicious intention, address the concrete behavior, which can be changed.

For instance, share a flyer with a list of person-first words to use instead stigmatizing terms like “dirty” and “crazy”. Provide tools or metaphors like “wiping the slate clean” that can serve as helpful reminders to consciously acknowledge and then reconsider and remove stigmatizing beliefs before interactions with new people.