# Addressing Stigma at the Intersection of Substance Use and Nutrition in Rural Communities



Tenneal Bringle



## **Food and Nutrition Stigma:**

**Food Insecurity Stigma:** This stigma surrounds individuals and families who are unable to access adequate food due to financial constraints. It can lead to feelings of shame and reluctance to seek help.

**Nutritional Stigma**: Stigma associated with body weight, diet choices, and health conditions related to nutrition (e.g., obesity, diabetes). People might be judged for their eating habits or physical appearance.

**Poverty Stigma:** Closely linked to food insecurity, this stigma affects those living in poverty, often leading to the assumption that they are responsible for their circumstances.

#### **Relevant Research:**

Studies show that individuals experiencing food insecurity often face social stigma, which can deter them from accessing food assistance programs like food banks or SNAP benefits.

Research indicates that children in food-insecure households are particularly vulnerable to stigma, affecting their social interactions and academic performance.

Evidence suggests that stigma related to obesity and diet can lead to negative mental health outcomes, including depression and anxiety.

# Examples of How Stigma Affects Individuals Seeking Food and Nutrition Services, Particularly in Rural Areas:

**Barriers to Accessing Services**: Reluctance to Seek Help: Many individuals in rural areas avoid seeking food assistance due to fear of judgment from their community. The close-knit nature of rural communities can exacerbate this fear, as privacy is harder to maintain.

**Social Isolation:** Stigma can lead to social isolation, where individuals avoid community events or social gatherings to hide their food insecurity or nutritional struggles.

**Mental Health Impact:** Constant stigma and judgment can lead to chronic stress, anxiety, and depression, further impacting an individual's ability to seek help and improve their nutritional status.

## Impact on Health and Well-Being:

**Undernutrition and Malnutrition:** Fear of stigma can result in individuals not accessing the food they need, leading to undernutrition or malnutrition. This is particularly critical for vulnerable populations such as children and the elderly.

**Negative Coping Mechanisms:** To avoid stigma, some individuals might resort to unhealthy coping mechanisms, such as skipping meals, eating low-cost but nutritionally poor foods, or not seeking medical help for diet-related health issues.





# Exploration of How Various Types of Stigma Intersect and Compound in Rural Areas: Substance Use Stigma:

Individuals struggling with substance use disorders often face significant stigma, characterized by judgment, blame, and social exclusion. This stigma can be particularly severe in rural areas where communities are smaller and privacy is limited.

#### **Poverty Stigma:**

Poverty stigma involves negative stereotypes about people living in poverty, such as the belief that they are lazy or irresponsible. This stigma can be pervasive in rural communities, where economic hardship is often visible and tightly knit social networks can amplify judgment.

## **Food Insecurity Stigma:**

People experiencing food insecurity may be stigmatized for needing assistance, such as food banks or government aid programs. This stigma is linked to poverty stigma and can prevent individuals from seeking help due to fear of judgment or perceived shame.

Intersection of Stigmas:

**Compound Effect:** When individuals face multiple stigmas simultaneously, the negative impacts can be magnified. For example, someone dealing with substance use disorder and food insecurity might experience heightened social isolation and reduced access to support services due to the compounded stigmas.

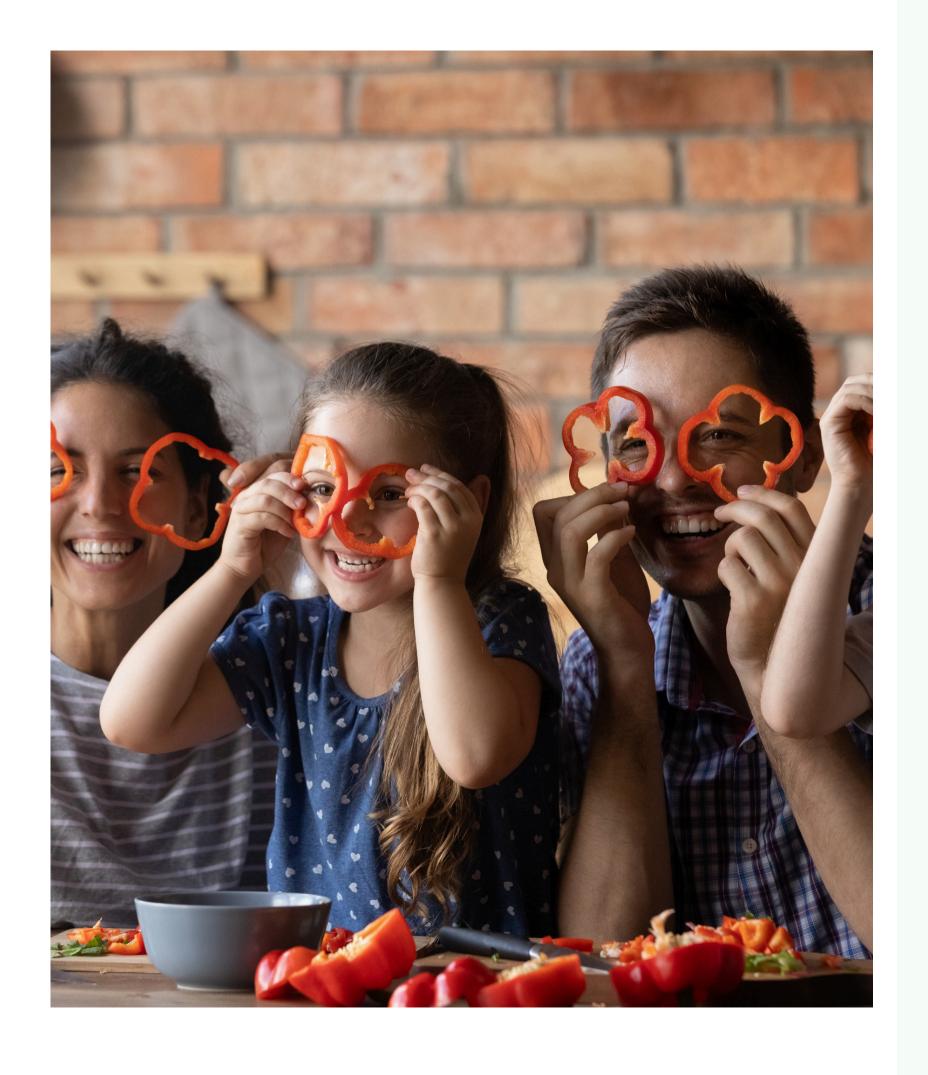
**Mutually Reinforcing Stigmas**: These stigmas often reinforce each other. For instance, substance use stigma can exacerbate poverty by limiting employment opportunities, which in turn can increase food insecurity. The cycle of stigma can create a persistent barrier to overcoming these challenges.

## Strategies to Reduce Stigma in Rural Communities

**Community Conversations:** Hosting open forums and discussions where community members can share their experiences and learn from each other can help break down stigma. These conversations should be inclusive and facilitated in a way that encourages empathy and understanding.

**Storytelling Projects**: Initiatives that collect and share personal stories of individuals affected by stigma can humanize the issues and reduce negative perceptions. This can be done through local media, social media, or community events.

**Awareness Campaigns:** Campaigns that highlight the realities of food insecurity, substance use, and poverty can educate the public and challenge stereotypes. These can include posters, flyers, social media campaigns, and local media coverage.



## HEALTHY EATING, HELPING HANDS PROGRAM

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NO FAMILY NEEDING TO DECIDE BETWEEN BUYING GROCERIES OR PAYING RENT.

NO ADULT/GUARDIAN NEEEDING TO SKIP A MEAL IN ORDER FOR THEIR CHILDREN TO EAT.

FEED 12 STUDENTS AT EACH SCHOOL (REFERRED BY TEACHERS/COUNSELORS) RECEIVE TWO HEALTHY READY MADE MEALS EVERY WEEKEND PLUS COMMODITIES OVER BREAKS.

NUTRITION, COOKING, AND FOOD INSECURITY EDUCATION PROVIDED TO EMPOWER STUDENTS AND REDUCE STIGMA